



Actor portrayals.

Understanding Government Health Plan Options

This brochure does not include a complete list or explanation of government health plans. Please visit [HHS.gov](https://www.hhs.gov) for more information.

Important considerations

To learn more about your government health plan options

Social Security Disability Insurance (SSDI):

Visit a local Social Security Administration office, visit ssa.gov/disabilityssi, or call 1-800-772-1213 (TTY: 1-800-325-0778).

Medicare: Visit [Medicare.gov/plan-compare](https://medicare.gov/plan-compare) or call 1-800-MEDICARE (1-800-633-4227).

Medicaid: Visit medicaid.gov/state-overviews/index.html.

If you or your loved one has been diagnosed with amyotrophic lateral sclerosis (ALS), there may be government health plan options to consider.

Regardless of age, people diagnosed with ALS can apply for SSDI benefits, and subsequently can apply for Medicare and/or Medicaid coverage.^{1,2}

About Social Security Disability Insurance

- Apply as soon as possible to avoid a gap between commercial insurance and Medicare coverage¹
- If you qualify, SSDI can pay monthly benefits if you are disabled with a long-term medical condition and are unable to work before retirement age^{1,2}
- SSDI requires an application be completed. For more information, visit ssa.gov/disability or call 1-800-772-1213 (TTY: 1-800-325-0778)^{1,2}

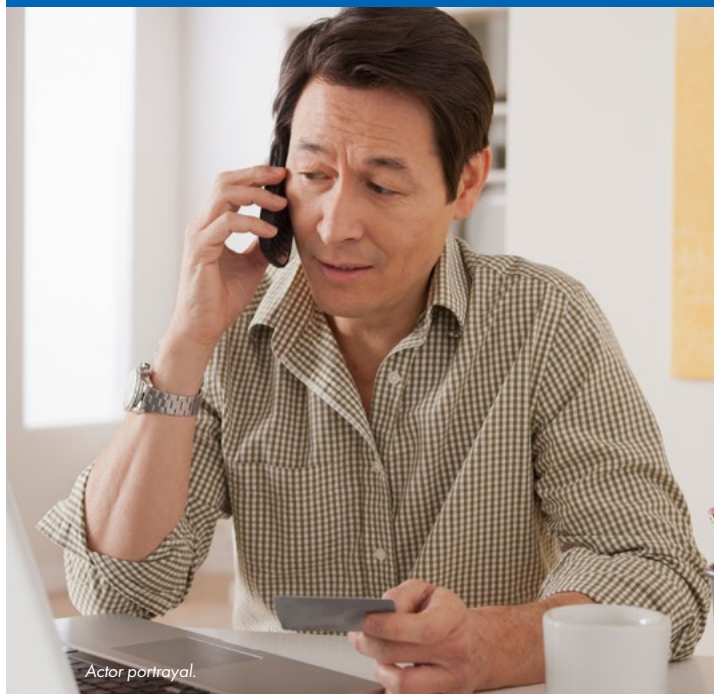
See the [chart](#) on pages 4-5 for an overview of government health plan options.

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Helping you understand information about government health plan options.

For more information, be sure to speak with your doctor or health insurance representative. You can also visit the websites found in this brochure and CMS.gov.



Actor portrayal.

See the [glossary](#) for helpful health insurance terms.

Know your options

Use this chart to understand your government health plan options.

This chart does not include a complete list or explanation of government health plans. Please visit [HHS.gov](https://www.hhs.gov) for more information. Be sure to talk with your doctor about your government health plan options.

Government health plan options	Coverage and costs
<div>Medicare Part B</div> <div>See page 6</div>	<div>Typically covers 80% of the cost for:</div> <ul style="list-style-type: none">• Medications given by a healthcare professional• Medication administration, such as infusion services³• A Medicare Supplement (Medigap) plan may help with out-of-pocket costs not covered by Medicare Part B³
<div>Medicare Part C (Medicare Advantage)</div> <div>If you are treated at home, may cover the cost of medication and the cost of medication administration when required, such as IV infusion</div> <div>See page 6</div>	<ul style="list-style-type: none">• May be available as an alternative to Original Medicare coverage³• Coverage benefits and cost of monthly premiums vary by health insurance plan³• If enrolled in a Medicare Advantage plan, you cannot enroll in a Medigap plan³
<div>Medicare Part D</div> <div>If you are treated at home, may cover the cost of medication only</div> <div>See page 7</div>	<ul style="list-style-type: none">• Coverage applies to the medication cost only, not to any related services, equipment, or supplies⁴• Coverage for remaining out-of-pocket costs varies by health insurance plan³
<div>Medicaid</div> <div>See page 7</div>	<ul style="list-style-type: none">• May cover the cost for medication and related services⁵• Coverage for out-of-pocket costs varies by state⁵
<div>Medicare and Medicaid (Dual Eligibility)</div> <div>See page 8</div>	<ul style="list-style-type: none">• May cover the cost for medication and related services⁶• Coverage for out-of-pocket costs varies by state⁶

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Medicare

Medicare Part B

20%

After your deductible is met, you typically pay 20% of the cost of medication and its administration when required, such as IV infusion.

80%

Medicare Part B covers 80% of the cost of medication and its administration when required, such as IV infusion.

Supplemental coverage and plans may be available to help with premiums and the 20% of costs for treatment not covered by Medicare Part B.³

Medicare Supplement (Medigap) plans may be available to help with monthly premiums and some or all of the 20% of costs not covered by Original Medicare. Medigap plans vary in coverage benefits and cost of monthly premiums.³

Visit [medicare.gov](https://www.medicare.gov) or your State Health Insurance Assistance Program (SHIP) at [ShipHelp.org](https://shiphelp.org) for help with additional Medicare-related questions.

Medicare Part C (Medicare Advantage)

May be available as an alternative to Original Medicare coverage and typically covers healthcare professional services related to a medication given by a healthcare professional. May include prescription drug coverage (known as Medicare Part D). Some limitations apply. If you enroll in a Medicare Advantage plan, you cannot enroll in a Medigap plan. Medicare Advantage plans vary in coverage benefits, prescription drug coverage, and cost of monthly premiums.³

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Medicare Part D

Typically covers the cost of the prescription medication prescribed by your doctor. It is important to note that this coverage applies only to the medication cost and not to any services related to the medication, such as IV infusion services, or equipment or supplies.^{3,4*} You are eligible for Part D only after you apply for Part A and Part B.^{3,4}

After your deductible, you pay a portion of prescription medication costs, up to your out-of-pocket spending cap, and Medicare, your Part D plan, and the drug manufacturer pay the rest.⁷ It's important for you to contact your health insurance plan to verify your benefits. This will give you the information you need to understand your total annual out-of-pocket costs.

Learn more about Medicare eligibility requirements and available coverage options. Visit [Medicare.gov/plan-compare](https://www.medicare.gov/plan-compare) or call 1-800-MEDICARE (1-800-633-4227).

*Coverage may be different for Medicare beneficiaries who are homebound.

Medicaid

May provide free or low-cost health insurance coverage to eligible people. It may also be available to people with disabilities such as ALS and cover the cost for services related to the medication.

Learn about Medicaid eligibility requirements and coverage options in your state at [medicaid.gov/state-overviews/index.html](https://www.medicare.gov/state-overviews/index.html).

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Medicare and Medicaid Dual Eligibility

If eligible, Medicare pays for covered medical services first, and Medicaid may then cover some of the out-of-pocket costs that Medicare does not cover.⁶

- Dual eligible benefits vary by state⁶
- A **Dual Eligible Special Needs Plan (D-SNP)** may be available to coordinate care for people enrolled in both Medicare and Medicaid⁸

The information above is a summary of Dual Eligibility. Be sure to talk with your provider about dual eligible benefits and requirements in your state.

Learn about Dual Eligibility requirements and coverage options at [Medicaid.gov](https://www.Medicaid.gov).

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Other options

Department of Defense/Department of Veterans Affairs (VA)

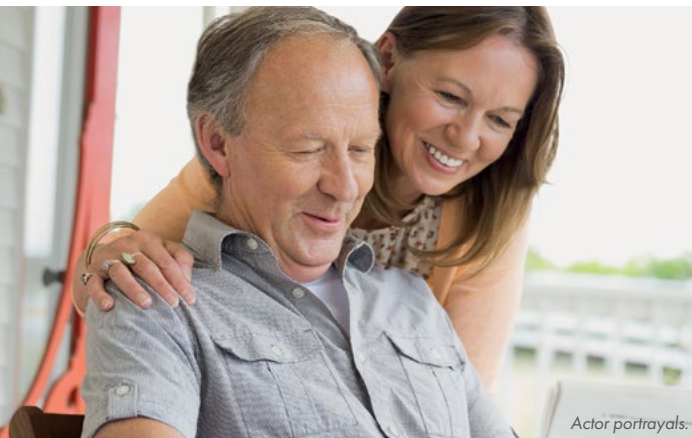
Veterans with ALS who spent at least 90 continuous days in the military are eligible for 100% disability* compensation benefits.^{9,10}

Alternative resources for government health plan cost support and coverage

- Patients with limited income and resources may qualify for a Medicare Savings Program. Visit [medicare.gov](https://www.medicare.gov) for more information³
- Extra Help Low-Income Subsidy may be available to help pay Medicare Part D drug plan costs¹¹

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*The VA assigns benefits based on a percentage of the disability that can be associated with your military service.



What can you do now?

Speak with your doctor or health insurance representative to better understand your coverage options. Or visit [CMS.gov](https://www.CMS.gov).

Glossary

Co-insurance: A percentage of the cost of your medications and healthcare services that you are responsible for paying. Typically, this is a lower percentage amount than what your health plan pays.^{1,2}

Co-pay: A set amount, determined by your health plan, that you pay for medications and healthcare services at the time of service.^{1,2}

Deductible: The out-of-pocket amount you must pay before your health plan begins to pay.^{1,2}

Dual Eligible Special Needs Plan (D-SNP): Provides dual coverage for those who qualify for both Medicare and Medicaid. Medicaid requirements and coverage vary by state.³⁻⁵

Medicaid: A joint federal and state program that helps with medical costs for some people with limited income and resources.¹

Medicare Advantage (Medicare Part C): Health plans approved by Medicare but offered by private insurance companies. Covers all the services that Original Medicare covers.¹

Medicare Extra Help Low-Income Subsidy: A Medicare program to help people with limited income and resources pay for prescription drug plan costs, including deductibles and out-of-pocket expenses. Offered at full and partial levels.^{1,6}

Medicare Savings Programs: State programs that help eligible low-income Medicare beneficiaries with their out-of-pocket costs. These may include premiums for Medicare Part A and Medicare Part B, deductibles, co-insurance, and co-pays.¹

Medigap (Medicare Supplement): A supplemental policy sold by private insurance companies that may cover some healthcare costs that Original Medicare doesn't cover, like co-pays, co-insurance, and deductibles.¹

Original Medicare: Federal health insurance coverage that includes Medicare Part A (hospital costs) and Part B (outpatient and doctor fees).¹

Premium: The periodic payment to Medicare or a health insurance company for healthcare or prescription drug coverage.¹

Social Security Disability Insurance (SSDI): A program that can pay monthly benefits if you become disabled with a long-term medical condition, before you reach retirement age, and aren't able to work.^{7,8}

Glossary (continued)

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