Healthy Living

The basics of Medicare

Medicare was signed into law by United States President Lyndon B. Johnson in 1965. Since then, scores of seniors have enrolled in the program and benefitted greatly from the assistance Medicare provides.

Medicare has undergone various changes since its inception in 1965, but the essential function of the program, which is intended to make it easier for older adults and people with disabilities to cover the cost of health care, has remained. Despite that consistency, it's still easy for Medicare-eligible individuals and their families to feel overwhelmed when the time comes to enroll in the program. This rundown on the basics of Medicare may be helpful for millions of individuals as they prepare to enroll in this important yet sometimes confusing program.

The parts of Medicare

Medicare is broken down into various categories known as parts: Part A, Part B, Part C, and Part D. Medicare.gov notes that each part helps to cover different costs associated with health care.

• Part A: Part A helps to cover the cost of inpatient care in various medical facilities, including hospitals, skilled nursing facilties, hospice, and home health care.

• Part B: Part B helps to cover services from health care providers, outpatient care and home health care. AARP notes that such services may include diagnostic tests, preventive care and some medical equipment, which Medicare.gov indicates may include wheelchairs, walkers and hospital beds.

• Part C: Part C is also known as Medicare Advantage, which serves as an alternative to Original Medicare. Benefits in Part C are provided through a private, Medicare-approved health plan. Part C may require users to remain in-network and receive prior authorizations for certain drugs or services. Out-of-pocket costs with Part C typically differ from Orignal Medicare, but Part C also tend to offer extra benefits, such as vision and dental care, not offered through Original Medicare.

• Part D: Medicare.gov notes that Part D helps to cover the cost of prescription drugs. Users must join a Medicare drug plan in addition to Original Medicare. Those who choose a Medicare Advantage plan may have their prescription drug costs covered by the plan they choose.

Medicare enrollment

AARP reports that nine in 10 Medicare users are age 65 or older. Medicare.gov indicates that people generally sign up for Medicare when they turn 65, noting the Initial Enrollment Period is a seven-month period that begins three months before a person turns 65 and ends three months after the month a person turns 65.

Additional information regarding enrollment, including special enrollment periods for Part A and Part B, can be found at https://www.medicare.gov/basics/get-started-with-medicare/sign-up/when-does-medicare-coverage-start.

Do I have to enroll at 65?

AARP notes that it's not necessarily essential that people eligible for Medicare sign up at age 65. Eligible adults who are still working and have health insurance through their employer or adults who are insured through a spouse's employer may not need to sign up for Medicare. However, some employers may require employees 65 and older to sign up for Medicare. Working adults who are eligible or about to become eligible for Medicare are urged to contact their human resources and benefits department to learn about what they need to do related to health care coverage.

Are all health care costs covered by Medicare?

AARP notes that most, but not all, medical costs are covered by Medicare. Enrollees may have to pay monthly premiums, deductibles, copayments, and coinsurance costs. A 2025 poll from the University of Michigan found that one common misconception about Medicare is that it will pay for care if enrollees need to permanently move into a nursing home due to a long-term illness or disability. But AARP notes that is not the case. Special circumstances may be applicable, but long-term care generally must be covered by individuals and/or their families.

Navigating Medicare can be confusing. More information about the program can be found at Medicare.gov.



The basics of bladder infections

Maintenance of the urinary tract is vital to overall health. Notably, the main function of the urinary tract, according to Johns Hopkins Medicine, is to filter blood, make urine and remove liquid waste from the body. The urinary tract also keeps salt, water and chemical levels balanced in the body. But like other areas of the body, the urinary tract can be compromised by infection.

Understanding urinary tract infections

The Centers for Disease Control and Prevention says urinary tract infections (UTIs) account for roughly 2.7 million emergency department visits and 400,000 hospitalizations annually in the United States. UTIs are the most common outpatient infections, with women experiencing them in greater numbers than men. The CDC estimates between 50 and 80 percent of women will experience at least one UTI in their lifetimes, and about 30 to 40 percent of women who get a UTI will experience recurrence.

UTIs can impact any part of the urinary system. This includes the kidneys, ureters, bladder, and urethra. When a UTI is localized to the bladder, that is known as a bladder infection or cystitis. Bladder infections are the most common type of UTI, according to Sepsis Alliance.

Symptoms infection

Common symptoms of a bladder infection, which affects the lower urinary tract, can include the following:

• Pain or burning while urinating.

• A strong, constant urge to urinate, even right after emptying the bladder.

• Passing small amounts of urine frequently.

• Urine that is cloudy, dark, bloody, or foul-smelling.

• Cramping pains or pressure in the pelvis.

If these symptoms are accompanied by high fever and chills, pain in the lower back or side, or nausea and vomiting, that could indicate a more serious UTI that has spread to the kidneys.

Diagnosing the issue

A medical diagnosis will involve a doctor asking about symptoms and then running a urine test and culture to check for the presence of bacteria, according to the CDC. Prescription antibiotics and pain medication may be prescribed to clear the infection.

Bladder infections can be avoided with some simple steps, including:

• urinating promptly when the urge arrives

• taking showers instead of baths

• minimizing douches, sprays or powders in the genital area

• urinating before and after sexual activity

• wiping from front to back

Infections of the urinary tract are common and highly treatable.

