



THESE ELDERLY GENTLEMEN, residents of Astor Dowdy Tower, are among the millions of older Americans eligible for Medicare and Medicaid benefits.

## Medicare, Medicaid Defined

(The following is reprinted from The Chronicle, a publication of the Tulsa, Okla., Model Cities program. The article is used by permission.) Both Medicare and Medicaid help pay medical bills.

Both Medicare and Medicaid are part of the Social Security Act. Medicare and Medicaid work together, but are *not* the same.

Here's the difference:

MEDICARE is for people 65 or older.

Almost everybody 65 or older, rich or poor can have Medicare.

Some people 65 or older can have both Medicare and Medicaid.

MEDICAID is for *certain kinds* of needy and low income people:

the aged (65 or older)

the disabled

the blind

members of families with dependent children

some other children

MEDICARE is an *insurance* program. Money from trust funds pays medical bills for *insured* people.

MEDICAID is an *assistance* program. Money from federal, state, and local taxes pays medical bills for *eligible* people.

MEDICARE is a *Federal* program. Medicare is the same all over the United States.

MEDICAID is a *Federal-State* partnership. States design their own Medicaid programs within Federal guidelines. Medicaid varies from State to State.

MEDICARE HOSPITAL INSURANCE:

Provides basic protection against costs of inpatient hospital care, post hospital extended care, post hospital home health care.

MEDICARE MEDICAL INSURANCE:

Provides supplemental protection against costs of physicians services, medical services and supplies, home health care services, out patient hospital services and therapy, and other services.

MEDICAID:

Pays for at least these services: inpatient hospital care, outpatient hospital services, other laboratory and X-ray services, physicians' services, screening, diagnosis and treatment of children.

MEDICARE:

Pays part—but not all—of hospital and medical costs for people who are insured.

MEDICAID:

Can pay what Medicare does not pay for people who are eligible for both programs.

TO APPLY FOR MEDICARE, GO TO YOUR SOCIAL SECURITY OFFICE. TO APPLY FOR MEDICAID GO TO YOUR SOCIAL SERVICES (WELFARE) OFFICE.

## Unit Mobilized

The Mobile Information unit has a new home.

Last week it was moved from Hulda Street, where it has been located since last winter, to the corner of Vail and S. Elm Streets.

It will be manned by staff members of Model Cities' Citizen Participation project.

The trailer is used as an outreach post for the Southside, as well as for neighborhood meetings organized by Citizen Participation.

All Model Neighborhood residents are invited to come by the mobile unit on its new site for any information needed on Model Cities projects or on CP activities.

## Tenants Meeting Postponed

Lack of response from tenants from the public housing units of Carson Stout, Astor Dowdy, J. C. Morgan, and Cedar Street has caused a delay in a mass meeting planned in December by the Resident Council Association.

The announcement was made by Resident Council chairman Judy Harmon of the Clara Cox Tenants' Council after a two-day series of meetings last week to discuss plans for the mass meeting.

The meeting was to be designed as a forum for tenants' problems in public housing. At the preliminary discussions last week, only representatives from Clara Cox and Daniel Brooks

## Evaluation, City Conditions Lead To Fourth Year Plan

The casual visitor to the Model Cities office (City Demonstration Agency, or CDA) will find a buzz of activity these days as the agency flows toward its Fourth Action Year next August.

In this all-important planning process, two projects have been undertaken to impact upon the Fourth Year Action Plan.

One is being carried out by the CDA staff itself, and is coordinated by the Information and Evaluation division: a thorough evaluation of all ongoing projects now under contract by Model Cities.

Not only will the I & E project staff be involved in the careful analysis of the performance and expenditures of all operating agencies, but also the principal planners. Such elements as personnel policies, coordination with other agencies, and budgets will be examined in depth.

The outcome of these in-house project evaluations, to be completed by Christmas, will then be discussed with the directors themselves, and recommendations be made to the task forces and to the Executive Committee of the Model City Commission.

It is hoped by the CDA staff that projects with a poor "track record" can either be improved or their budgets trimmed accordingly. On the other hand, projects with better performance records could benefit from this reshifting of funds.

Whatever the outcome of the CDA staff evaluation of projects, it will be the task forces, and eventually the Model City Commission itself who will be asked to make the final decisions about the fate of each project. The CDA staff itself has no power to decrease or increase budgets, or redesign a project without the approval of Model City Commissioners.

This close evaluation will simply enhance the decision-making process for the fourth year, and provide task force members and Commissioners with new perspectives regarding the projects.

In another effort to enhance the planning process for the Fourth Year, consultant Earl Redwine has been hired to write city-wide condition statements in the areas of health and social services, employment and economic development, education, and crime and juvenile delinquency.

In the past, condition statements had been written with particular emphasis on the Model Cities target neighborhood only. As city-wide task forces become a reality, and the planning effort of Model Cities has expanded to include High Point as a whole, Model Cities planners believe a comprehensive look should be taken at the city.

These condition statements will document on paper the needs and weaknesses found in the High Point community, and perhaps point the way toward filling these gaps.

## Credit Tip

Since Christmas is only a month away, it's time you thought about buying your gifts—within your budget, of course.

If you haven't made your list already, do it right away. The further in advance you plan for your purchases, the better.

Based on what you spent last year for gifts, determine how much you can spend this season. (Learn from your past mistakes!) Set a limit for each person on your list.

Large families should consider drawing names at Christmas time.

When you shop, keep an open mind: instead of trying to find "exactly the right gift," regardless of cost, try to find reasonable items to substitute. And instead of buying a gift for one particular person, choose things that could be given to any number of people.

Try making your own gifts if you sew, bake, paint or if you have other craft skills. Not only is this method more economical in most cases, it's more meaningful to the receiver, and more fun in the long run!

Keep your eye on prices that have been raised especially to capitalize on the Christmas season. Since merchants make the majority of their profits between now and the end of the year, they want to make the most of seasonal shoppers. It's up to you to boycott items you think are overpriced.

Don't overspend your pocketbook, even if it is Christmas time. You'll pay for it later. That Christmas cheer doesn't spread too far into January when bill time rolls around.

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