2018 Medicare Coverage

Medicare Part A - Hospital Services

Services	Medicare Pays	You Pay
HOSPITALIZATION		
First 60 days	All but \$1,340	\$1,340 (Part A Deductible)
61st thru 90th day	All but \$335/day	\$335/day
91st day and after:		
- While using 60 lifetime reserve days	All but \$670/day	\$670/day
- Beyond 60 lifetime reserve days	\$0	All costs
SKILLED NURSING FACILITY CARE		
First 20 days	All approved amounts	\$0
21st thru 100th day	All but \$167.50/day	Up to \$167.50/day
101st day and after	\$0	All Costs
BLOOD		
First 3 pints	\$0	Cost of 3 pints
Additional amounts	100%	\$0
HOSPICE CARE		
	All but very limited co- payment/co-insurance for Rx and respite care	Medicare co-payment/co- insurance

Part B Medical Services (Physician charges and supplies)

Services	Medicare Pays	You Pay
MEDICAL EXPENSES		
In or out of the hospital treatment, such as physician's services inpatient/outpatient medical and surgical services and supplies, physical and speech therapy, diagnostic tests, durable medical equipment		
First \$183 of Medicare-approved amounts	\$0	\$183 (Part B Deductible)
Remainder of Medicare-approved amounts	Generally 80%	Generally 20%
PART B EXCESS CHARGES		
Above Medicare-approved amounts	\$0	All Costs
CLINICAL LABORATORY SERVICES		
Tests for diagnostic services	100%	\$0
HOME HEALTH CARE MEDICARE-APPROVED SERVICES		
Medically necessary skilled care services and medical supplies	100%	\$0
- Durable medical equipment		
- First \$183 of Medicare-approved amounts	\$0	\$183 (Part B Deductible)
- Remainder of Medicare-approved amounts	80%	20%