## **2018 Medicare Coverage**

## Medicare Part A - Hospital Services - Per Benefit Period

\* A benefit period begins on the first day You receive service as an inpatient in a hospital and ends after You have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

Services	Medicare Pays	You Pay
HOSPITALIZATION*		
Semi-private room and board, general nursing, and miscellaneous services and supplies		
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
- Once lifetime reserve days are used, additional 365 days	\$0	All costs
SKILLED NURSING FACILITY CARE*		
You must meet Medicare's requirements, including having beeen in a hospital for at least 3 days and entering a Medicare-approved facility within 30 days		
after leaving the hospital		
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	All costs
Additional amounts	100%	\$0
HOSPICE CARE		
You must meet Medicare's requirements, including a doctor's certivication of terminal illness	All but very limited copayment/coinsurance for Rx and respite care	Medicare copayment/coinsurance