

# Overview of Medicare Parts A & B

# A

## In-patient hospital

First 60 days      \$1,736 deductible

Days 61-90      \$434 per day  
coinsurance

Days 91 and on      \$868 per day  
per Lifetime reserve      coinsurance

## Skilled nursing facility

First 20 days      100% (no copay)

Days 21-100      \$217 per day  
coinsurance

## Home health hospice

100% Services

\*Benefit period ends when patient is out of the hospital or skilled nursing facility for 60 consecutive days.

Amount you pay

Amount Medicare pays

# B

## \$283 deductible

(the amount you must pay before any coverage from the insurer)

## 20% coinsurance

## 80% of costs

(after deductible is met)

Provider's charges  
(in or out of hospital)

Durable medical equipment

Ambulance

Outpatient hospital charges

## Excess charges

If providers do not accept Medicare's reimbursement rate, they are allowed to charge up to 15 percent more for covered services. If the doctor you visit is one of these, you will be responsible for paying that 15 percent above what Medicare covers.