



ORIGINAL MEDICARE

MEDICARE PART A

Hospital Care

days 1-60 = \$1408

days 61-90 = \$352 per day

days 91-150 = \$704 per day

Skilled Nursing

days 1-20 = \$0*

days 21-100 = \$176 per day

day 100+ = No LTC coverage

Home Health Services

\$0

Hospice

Generally covered \$0

5% co-pay for Rx

MEDICARE PART B

\$144.60 Premium per month*

\$198.00 annual deductible -

80% / 20% co-insurance

Physician services

Laboratory services

Diagnostic Testing

Durable Medical Equipment

Physical Therapy

Emergency services

Ambulance transport

Outpatient services

Clinical Rx