

PART A, B & D

COVERAGE & COSTS



Medicare Part A (Hospital Insurance)

Part A Monthly Premium

If you or your spouse paid Medicare taxes for the required amount of time while working (40 quarters), you are eligible to receive premium-free Part A. Otherwise, you will pay up to \$437 each month per individual in 2019.

Hospital Stay

What You Will Pay for a Hospital Stay in 2019

- \$1,364 deductible per benefit period
- \$0 for the first 60 days of each benefit period
- \$341 per day for days 61-90 of each benefit period
- \$682 per “lifetime reserve day” after day 90 of each benefit period (up to a maximum of 60 days over your lifetime)

Skilled Nursing Facility Stay

What You Will Pay for a Skilled Nursing Facility Stay in 2019

- \$0 for the first 20 days of each benefit period
- \$170.50 per day for days 21-100 of each benefit period
- 100% of billed expenses from day 101 of the benefit period and on

Medicare Part B (Medical Insurance)

Part B Monthly Premium

The monthly Part B premium for 2019 is \$135.50. High-income households will pay an additional amount. (See the premium charts on the back.)

Services and Supplies

What Part B Covers in 2019

- Medically necessary doctors' services
- Outpatient care
- Preventive services
- Durable medical equipment
- Part-time or intermittent home health and rehabilitative services

Part B Deductible and Coinsurance

What You Will Pay in 2019

- \$185 annual deductible
- 20% coinsurance

Sources: www.medicare.gov and www.cms.gov

PART B & PART D INCOME-RELATED PREMIUM ADJUSTMENT AMOUNTS

\$ Part B Monthly Premium

If Your Yearly Income in 2017 was			You Pay:
File Individual Tax Return	File Joint Tax Return	File Married & Separate Tax Returns	
\$85,000 or less	\$170,000 or less	\$85,000 or less	\$135.50
above \$85,000 up to \$107,000	above \$170,000 up to \$214,000	N/A	\$189.60
above \$107,000 up to \$133,500	above \$214,000 up to \$267,000	N/A	\$270.90
above \$133,500 up to \$160,000	above \$267,000 up to \$320,000	N/A	\$352.20
above \$160,000 up to \$500,000	above \$320,000 up to \$750,000	above \$85,000 up to \$415,000	\$433.40
above \$500,000	above \$750,000	above \$415,000	\$460.50

\$ Part D Monthly Premium

If Your Yearly Income in 2017 was			You Pay:
File Individual Tax Return	File Joint Tax Return	File Married & Separate Tax Returns	
\$85,000 or less	\$170,000 or less	\$85,000 or less	Your Plan Premium
above \$85,000 up to \$107,000	above \$170,000 up to \$214,000	N/A	\$12.40 + Your Plan Premium
above \$107,000 up to \$133,500	above \$214,000 up to \$267,000	N/A	\$31.90 + Your Plan Premium
above \$133,500 up to \$160,000	above \$267,000 up to \$320,000	N/A	\$51.40 + Your Plan Premium
above \$160,000 up to \$500,000	above \$320,000 up to \$750,000	above \$85,000 up to \$415,000	\$70.90 + Your Plan Premium
above \$500,000	above \$750,000	above \$415,000	\$77.40 + Your Plan Premium

If you have questions about your Part B or Part D premium, call the Social Security office at **1-800-772-1213**. If you use a TTY phone or device, please call the Social Security office at **1-800-325-0778**. If you pay a late enrollment penalty, these amounts may be higher.