

Part B: Physician and Other Outpatient Services

SERVICE	MEDICARE 2016	PATIENT'S RESPONSIBILITY
Physicians and Outpatient Services <ul style="list-style-type: none"> • doctor's services • outpatient medical services and supplies at a hospital or skilled nursing facility • physical and occupational therapies and speech-language pathology • ambulance • lab • X-ray 	Medicare pays: <ul style="list-style-type: none"> • 80% of Medicare-allowed charges 	Patient pays: <ul style="list-style-type: none"> • deductible: \$147 per calendar year • coinsurance: 20% of allowed charges above deductible
Prescription Drugs <ul style="list-style-type: none"> • home IV therapy, services and supplies 	Medicare pays: <ul style="list-style-type: none"> • no benefit 	Patient pays: <ul style="list-style-type: none"> • all outpatient prescription expenses
Routine Mammogram <ul style="list-style-type: none"> • limited to one every two years 	Medicare pays: <ul style="list-style-type: none"> • 80%, the same as physician services 	Patient pays: <ul style="list-style-type: none"> • annual Part B deductible and the 20% coinsurance

Additional Part A or B Services

SERVICE	MEDICARE 2016	PATIENT'S RESPONSIBILITY
Respite Care	Medicare pays: <ul style="list-style-type: none"> • no benefit 	Patient pays: <ul style="list-style-type: none"> • all respite care costs
Home Healthcare	Unlimited for part-time intermittent skilled nursing care, physical, occupational and speech therapies, medical supplies and durable medical equipment (at 80%) as long as there is a need for skilled nursing or rehabilitation care	Home health services NOT covered by Medicare include: <ul style="list-style-type: none"> • 24-hour-a-day nursing care at home • drugs and biologicals • meals delivered to the patient's home • homemaker services • blood transfusions

Cost to Beneficiary

Part A Premium: Some Medicare Part A beneficiaries who have fewer than 30 quarters of covered employment and certain people under 65 with disabilities pay different premiums.	None
Part B Premium: Medicare Part B enrollees with higher incomes (in excess of \$85,000 for single or \$170,000 for married couple) may pay a higher premium.	Monthly premiums for year 2014: \$161.00

This chart briefly summarizes some of the benefits provided by Medicare. For additional information on Medicare, contact the Social Security Office or the Centers for Medicare and Medicaid Services (1.800.MEDICARE) or www.cms.gov.



Tranquil Care
HOSPICE

Medicare 2016

COVERAGE OVERVIEW



Hospital Services
Skilled Nursing Care
Physician and Outpatient Services
Additional Part A or Part B Services

Part A: Hospital Services

SERVICE	MEDICARE 2015	PATIENT'S RESPONSIBILITY
Inpatient Hospital Care (Acute) Days and Expenses Covered	<p>Medicare pays: 90 days per benefit period,* plus 60-day lifetime reserve.</p> <p>Covered services include:</p> <ul style="list-style-type: none"> • semi-private room • meals • routine nursing care • lab tests and X-rays billed by hospital • medical supplies and equipment • rehabilitation therapies 	<p>Patient pays:</p> <ul style="list-style-type: none"> • deductible: \$1,216 for each benefit period in 2015 • copayment: \$315 required after 60 days for the 61st through the 90th day • lifetime reserve days copayment: \$630 (an additional 60 days available with copayment) • expenses beyond 90 days: not covered, unless you choose to use your reserve days • services not covered: <ul style="list-style-type: none"> –personal convenience items, such as TV –private duty nurses –extra charges for private room
Blood	Paid in full, furnished by the hospital during the inpatient stay.	Patients pay for the first three pints of blood in a benefit period.
Skilled Nursing Care Days and Expenses Covered	<p>Medicare pays: 100 days per benefit period* (based on your need for daily skilled care)</p> <p>Covered services include:</p> <ul style="list-style-type: none"> • semi-private room • meals • routine nursing care • lab tests and X-rays billed by hospital • medical supplies and equipment • rehabilitation therapies and services • drugs furnished by the facility <p>Eligibility Requirements Prior Medicare-covered three-day inpatient stay</p>	<p>Patient pays:</p> <ul style="list-style-type: none"> • copayment: \$161.00 required for days 21-100 • expenses beyond 100 days of treatment: not covered • services not covered: <ul style="list-style-type: none"> –personal convenience items, such as TV –private duty nurses –extra charges for private room –custodial nursing home care <p>Eligibility Requirements The physician must confirm a need for daily skilled nursing and/or rehabilitative care.</p>
Hospice Care Days and Expenses Covered	Unlimited coverage for services, including nursing care, doctor's care; drugs including outpatient, physical, speech and occupational therapies; home health aide and homemaker services; medical supplies and appliances; respite care and counseling	None , if requirements for hospice care are met. Patients should contact their local hospice agency to determine specific Medicare availability.

*A benefit period, also referred to as a "spell of illness," begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital or skilled nursing facility (SNF) for 60 days in a row or 60 non-skilled days in a SNF.

Have you ever wondered what would happen if, after returning from a Medicare-covered stay in a skilled nursing center, you find that you need to be readmitted for additional recuperation and recovery? Medicare guidelines allow for residents to be readmitted within a 30-day period. This 30-day period is referred to as a Medicare Window.

To qualify for this 30-day Medicare Window you must:

- within the last 30 days, have received Part A benefits in an acute hospital or skilled nursing center
- require rehabilitative services or skilled nursing care

- have days remaining on your skilled nursing Part A, 100-day benefit period
- have physician orders for readmission

If you feel that you meet the criteria, we will be happy to provide a free evaluation.