

ORIGINAL MEDICARE OUT OF POCKET EXPENSES 2021

\$0.00 Premium for most People
Up to: \$471.00 for less than 30 Quarters
\$259.00 for 30 - 39 Quarters

PART A (HOSPITAL)

\$148.50 Premium
 (Or higher depending on your income.)

PART B (MEDICAL)

\$1,484
Deductible per Stay

Day 1
↓
Day 60

\$371 x 30 = \$11,130
Per Day

61
↓
Day 90

\$742 x 60 = \$44,520
Per Day

91
↓
Day 150

MEDICARE STOPS
PATIENT PAYS

BLOOD (First 3 Pints)

HOSPICE CARE

You pay nothing for Hospice care.
 You may need to pay a Copayment of no more than \$5 for each prescription drug and other similar products for pain relief and symptom control while you're at home.
 You may need to pay 5% of the Medicare-approved amount for inpatient respite care.

SKILLED NURSING FACILITY

DAYS 1-20	NO COST
DAYS 21-100	\$185.50 Per Day = \$14,840
DAYS 101-	ALL COST

\$203.00
Annual Deductable

	80% Approved
	20% Approved
	15% BILLED APPROVED EXCESS

BLOOD (First 3 Pints)

Typical price to patient is
\$343 per pint

NURSING HOME COST
MEDICARE PAYS NOTHING

FOREIGN TRAVEL
MEDICARE PAYS NOTHING