



2022 MEDICARE REFERENCE SHEET

	PART A Hospital Insurance	PART B Medical Insurance	PART D Prescription Drug Insurance	PART C Medicare Advantage	MEDIGAP Medicare Supplement				
	Original Medicare			Alternative to Original Medicare	Supplement to Original Medicare				
	Administered directly through the federal government		Administered by private insurers with federal regulation		Administered by private insurers with state regulation and federal laws				
Covers	<ul style="list-style-type: none"> Hospital stays & inpatient services Skilled nursing after a hospital stay Part-time skilled home health care Hospice care 	<ul style="list-style-type: none"> Doctor visits Outpatient medical services Preventative care Clinical laboratory services 	Prescription drugs	Covers all Part A & B services & generally includes prescription drug coverage. May also provide coverage for dental, vision, hearing & other health or wellness services.	Helps reduce out-of-pocket expenses for Parts A & B including deductibles, copays & coinsurance.				
Eligibility	Must be 65 years old or have a qualifying disability or medical condition and be a U.S. citizen or legal resident		Must have Part A & B		Cannot have Part C				
Enrollment	Automatic enrollment at age 65 if receiving Social Security benefits		Voluntary Enrollment						
	Initial Enrollment Period: 7-month window beginning 3 months before month of 65th birthday		Medigap Open Enrollment Period: 6-month window beginning month in which 65 or older and enrolled in Part B. Cannot be denied coverage based on health condition during this period.						
	General Enrollment Period: January 1 – March 31		Annual Open Enrollment Period: October 15 – December 7						
	Special enrollment period: 8-month window after employment or coverage ends		Special enrollment period: 63-day window after employment or creditable insurance coverage ends						
Costs	No annual premium if individual or spouse qualifies for Social Security benefits. Otherwise a maximum premium of \$499 per month.	Income-based premium ranging from \$170.10 to \$578.30 per month Most new enrollees will pay \$170.10 per month, but those with higher income may pay more.		Base Beneficiary Premium is \$33.37 but can vary widely by plan. Those with higher income will pay a surcharge.	Costs vary widely by each plan Individual still pays premiums for Part B	Costs vary widely by policy type, geography and insurer 10 nationally standardized plans labeled by letters A – N			
	Hospital Stay	Individual Pays	Modified Adjusted Gross Income in 2020	Part B Premiums	Part D Surcharge	Plans generally have a limited network of providers that are covered Generally copayment structure for services. Some plans utilize deductibles and coinsurance. Varies widely but out of pocket max is capped at \$7,550 annually, out of network is \$11,300.			
	Days 1-60	\$1,556 deductible	Single	Married (Joint)	Monthly		Annual		
	Days 61-90	\$389 daily copay	under \$91K	under \$182K	\$170.10		\$2,041.20	\$0	\$0
	Days 91-150*	\$778 daily copay	\$91K to \$114K	\$182K to \$228K	\$238.10		\$2,857.20	\$12.40	\$148.80
	* (60 lifetime reserve days)		\$114K to \$142K	\$228K to \$284K	\$340.20		\$4,082.40	\$32.10	\$385.20
	Days 151+	All costs	\$142K to \$170K	\$284K to \$340K	\$442.30		\$5,307.60	\$51.70	\$620.40
	Skilled Nursing Facility Stay	Individual Pays	\$170K to \$500K	\$340K to \$750K	\$544.30		\$6,531.60	\$71.30	\$855.60
	Days 1-20	\$0	over \$500K	over \$750K	\$578.30		\$6,939.60	\$77.90	\$934.80
	Days 21-100	\$194.50 daily copay	Annual Deductible \$233		Plan deductibles can range from \$0 to \$480 annually				
Days 101+	All costs	Coinsurance 20% of Medicare approved amount							
Penalties	10% premium increase for each year enrollment is delayed. Only applies to those who must pay Part A premiums.	10% premium increase each 12-month period enrollment is delayed, unless covered by another creditable health insurance plan. Lifetime penalty.		1% premium increase for each month enrollment is delayed, unless covered by another creditable prescription drug plan. Lifetime penalty.					