\*A **benefit period** begins on the first day you receive services as an **inpatient** in a hospital and ends after you have been out of the hospital or skilled nursing facility for 60 consecutive days.

Services	Benefit	Medicare Pays <sup>(1)</sup>	You Pay <sup>(1)</sup>
<b>INPATIENT HOSPITALIZATION (admitted)</b> Semi-private room and board, general nursing and miscellaneous hospital services and supplies.	First 60 days	All but <b>\$1,632</b> deductible	\$1,632 deductible
	61st to 90th day	All but <b>\$408</b> per day	<b>\$408</b> per day
	91st to 150th day <sup>(2)</sup>	All but <b>\$816</b> per day	<b>\$816</b> per day
	Beyond 150 days	Nothing	All costs
<b>POST-HOSPITAL SKILLED NURSING FACILITY CARE</b> You must have been an inpatient in a hospital for at least 3 days, enter a Medicare-approved facility generally within 30 days after hospital discharge, and meet other program requirements. <sup>(3)</sup>	First 20 days	100% of approved amount	Nothing
	21st to 100th day	All but <b>\$204</b> per day	Up to <b>\$204</b> per day
	Beyond 100 days	Nothing	All costs
HOME HEALTH CARE (also see Part B) Medically necessary skilled care, home health aide services, medical supplies, etc. after a 3-day inpatient hospital stay for visits 1-100.	100% part-time or intermittent nursing care and other services for as long as you meet criteria for benefits.	100% of approved amount; 80% of approved amount for Durable Medical Equipment.	Nothing for services. 20% of approved amount for Durable Medical Equipment.
<b>HOSPICE CARE</b> Full scope of pain relief and support services available to the terminally ill.	If doctor certifies need.	All but limited costs for outpatient prescription medications and inpatient respite care.	Limited cost sharing for outpatient prescription medications and inpatient respite care.
BLOOD	Blood	All but first three pints per calendar year	For first three pints <sup>(4)</sup>

<sup>1</sup> These figures are for **2024** and are subject to change each year.

<sup>2</sup> Lifetime reserve days may be used only once.

<sup>3</sup> Neither Medicare nor Medicare Supplement (Medigap) insurance will pay for most nursing home care.

<sup>4</sup> To the extent the blood deductible is met under one part of Medicare during the calendar year it does not have to be met under the other part.

NOTE: The Medicare Part A premium is **\$0** for eligible beneficiaries. For those who are ineligible, the Medicare Part A premium is **\$505** per month for those who worked fewer than 30 quarters, or **\$278** per month for those who worked between 30 and 40 quarters.