

## Medicare Part A: Hospital-Insurance Covered Services for 2008

Services	Benefit	Medicare Pays	You Pay
HOSPITALIZATION			
Semi-private room and board, general nursing, and other hospital services and supplies.	First 60 days 61 <sup>st</sup> – 90 <sup>th</sup> day 91 to 150 <sup>th</sup> day* Beyond 150 <sup>th</sup> day	All but \$1,024 All but \$256 a day All but \$512 a day Nothing	\$1,024 \$256 per day \$512 per day All costs
SKILLED NURSING FACILITY  Semi-private room and board, general nursing, skilled nursing, and rehabilitative services and other services and supplies**	First 20 days  Additional 80 days  Beyond 100 days	100% of approved amount  All but \$128 a day  Nothing	Nothing  Up to \$128 a day  All Costs
Part-time or intermittent skilled care, home health aide services, durable medical equipment and supplies, and other services.	Unlimited as long as you meet Medicare conditions	100% of approved amount; 80% of approved amount for durable medical equipment	Nothing for services; 20% of approved amount for durable medical equipment
HOSPICE CARE	For as long as doctor certifies need	All but limited costs for outpatient drugs and inpatient respite care	Limited costs for outpatient drugs and inpatient respite care
BLOOD	Unlimited if medically necessary	All but first 3 pints per calendar year	First 3 pints***

2008 Part A monthly premium: Most people do not pay a premium because they or a spouse has 40 or more quarters of Medicare covered employment. However, the premium is \$423 per month if you are not otherwise eligible for premium-free hospital insurance and have less then 30 quarters of Medicare covered employment. The Part A premium is \$233 for those individuals having 30-39 quarters of Medicare covered employment.

Source: Health Care Financing Administration, www.medicare.gov

<sup>\*</sup>This 60-reserve-days benefit may be used only once in a lifetime.

<sup>\*\*</sup>Neither Medicare nor private Medigap insurance will pay for most nursing home care.

<sup>\*\*\*</sup>Blood paid for or replaced under Part B of Medicare during the calendar year does not have to be paid for or replaced under Part A