

PART A

Part A (Hospital Insurance)	Patient Pays	Medicare Pays
First 60 Days	\$1,408	All but \$1,408
Days 61-90	\$352 a day	All but \$352 a day
Days 91-150	\$704 a day	All but \$704 a day
Days 151 & After	All	Nothing

Part A (Nursing Home)	Patient Pays	Medicare Pays
First 20 Days	Nothing	All
Days 21-100	Up to \$176 a day	All but \$176 a day
Days 101 & After	All	Nothing

PART B

Part B (Medical Insurance)	Premium	Deductible
2020	\$144.60	Annual \$198

Part B Premium Income Graph / Part D Rx Extra Premium		
Single Taxpayer	Married, Filing Jointly	Part B Premium / PDP Extra
Less than or equal to \$87,000	Less than or equal to \$174,000	\$144.66 / Plan Premium
\$87k to \$109k	\$174k to \$218k	\$202.40 / \$12.20 + Plan Premium
\$109k to \$136k	\$218k to \$272k	\$289.20 / \$31.50 + Plan Premium
\$136k to \$163k	\$272k to \$326k	\$376.00 / \$50.70 + Plan Premium
\$163k to \$500k	\$326k to \$750k	\$462.70 / \$70.00 + Plan Premium
\$500k +	More than \$750k	\$491.60 / \$76.40 + Plan Premium

PART C

Medicare Advantage Plans	
HMO	PPO
Health Maintenance Organization Network Only Must use network of doctors POS option may provide additional flexibility	Preferred Provider Organization Utilizes a network of doctors Less expense for in-network doctors, flexible out of network
\$0-50+ Premium and low Co-pays on Primary & Specialist visits. Find plans with low co-pays and a low maximum out of pocket	Generally \$30-\$150+ premiums, low Co-pays on Primary & Specialist visits. Find plans with low-co-pays and low maximum out of pocket

PART D

This is the Part D Standard Model (National Average is \$32.50 per month)		
Phase	Patient Pays	Plan Pays
Phase 1 – Deductible	Up to \$435	All but \$435
Phase 2 – Initial Coverage Limit	25% up to \$4,020	75% up to \$4,020
Phase 3 – Coverage Gap	*25% generic / 25% brand	*All but 25% generic / 25% brand
Phase 4 – Catastrophic Coverage Limit	5% or \$3.60 generic / \$8.95 brand	All but 5% or \$3.60 generic / \$8.95 brand
*After your total drug costs reach \$4,020, you will pay no more than 25% coinsurance for generic drugs or 25% coinsurance for brand name drug, for any drug tier during the coverage gap.		