# Medicare Part A, Part B Premiums and Cost Sharing



All costs are for calendar year 2026 without any Medicare Supplement

#### **Part A Hospital Insurance Premium**

Most people pay \$0 each month for Part A because they contributed to SSA/Medicare for 40 quarters (about 10 years) either on their own or their spouse's work record. If one has between 30 and 39 quarters, they may buy into Part A for \$311 per month. If less than 30 quarters, one may buy into Part A for \$565 per month.



### **Hospital Stay**

**\$1,736 deductible** for days 1-60 of each Benefit Period. A benefit period starts upon admittance to the Hospital and ends after you have been out of the Hospital or a Skilled Nursing facility for 60 consecutive days.

**\$434** per day for days 61-90 each Benefit Period

**\$868** per day for Lifetime Reserve Days. Lifetime Reserve Days are 60 extra days of coverage you can use in your lifetime. One is responsible for all costs for each day over 90 days once Lifetime Reserve Days are exhausted.

### **Skilled Nursing Facility Stay**

**\$0** for the first 20 days each Benefit Period.

**\$217** per day for days 21-100 of each Benefit Period. One is responsible for all costs after a stay of 100 days in any Benefit Period.

#### Part B Outpatient Services Premium and Cost Sharing

People enrolled in Medicare must pay a \$202.90 monthly premium. This applies to those enrolled in Medicare Advantage Plans and those using traditional Medicare with a supplement. With original Medicare, there is a \$283 annual deductible where one pays the full amount of the Medicare approved amount until the deductible is met. After the deductible, there is 20% coinsurance, based on the Medicare assigned rate, for most doctor services, outpatient therapy, mental health, and durable medical equipment.

There is no maximum out of pocket limit on the co-insurance responsibility. Expensive procedures such as Kidney Dialysis or Chemotherapy can result in co-insurance liability of over \$10,000.

Many Preventive Procedures, Clinical Laboratory Services and Home Health Care Services are fully covered by Medicare with no cost.

#### **Blood Transfusions**

Blood transfusions in an Inpatient Hospital setting are fully covered with the patient responsible for the cost of the first 3 units. In an outpatient setting, one pays 20% of the Medicare approved amount after paying the full cost of the first 3 units.

## PARTS B and D Income Adjustments (IRMAA) for Higher Income Beneficiaries

An Income Related Medicare Adjustment Amount (IRMAA) is a surcharge added for one year to the monthly Medicare Part B and Part D premiums. It is based on yearly income. The Social Security Administration (SSA) uses income tax information from tax year 2024 (the most recent they have) to determine an IRMAA in addition to the monthly premium. Medicare Advantage plans in Contra Costa are also



subject to the Part D adjustment. One can always appeal this adjustment based on a 'life changing event' such as retiring, divorce, etc. Ask for the HICAP handout for more details about appeals.

Yearly modified adjusted gross income <sup>1</sup> is:		Part B Monthly		Part D Monthly
Individual Tax Return <sup>2</sup>	Joint Tax Return	Adjustment	Part B Premium <sup>3</sup>	Adjustment <sup>4</sup>
\$109,000 or less	\$218,000 or less	\$0.00	\$202.90	\$0.00
\$109,001 - \$137,000	218,001 - \$274,000	\$81.20	\$284.10	\$14.50
\$137,001 - \$171,000	\$274,001 - \$342,000	\$202.90	\$405.80	\$37.50
\$171,001 - \$205,000	\$342,001 - \$410,000	\$324.60	\$527.50	\$60.40
\$205,001-\$499,999	\$410,001-\$749,999	\$446.30	\$649.20	\$83.30
\$500,000 or above	Above \$750,000	\$487.00	\$689.90	\$91.00
Married filing separately but lived with spouse with modified adjusted gross income is <sup>1</sup> :				
\$109,000 or less		\$0.00	\$202.90	\$0.00
\$109,001 - \$393,999		\$446.30	\$649.20	\$83.30
\$394,000 or above		\$487.00	\$689.90	\$91.00

<sup>&</sup>lt;sup>1</sup> Total adjusted gross income plus any tax-exempt interest

### Contra Costa County Health Insurance Counseling and Advocacy Program (HICAP) Contact Us: 925-655-1393, (800) 510-2020 or (800) 434-0222

Visit: <a href="www.cchicap.org">www.cchicap.org</a> then 'Contact Us' Email: ehsdhicap@ehsd.cccounty.us





**Navigating Medicare** 

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<sup>&</sup>lt;sup>2</sup> Also Head of Household

<sup>&</sup>lt;sup>3</sup> Adjustment paid to SSA, not the Plan.

<sup>&</sup>lt;sup>4</sup> Plus plan premium and any late enrollment penalty paid to the Plan.