

Medicare Amounts

The table below shows various amounts relating to Medicare.

An explanation of these amounts can be found at the bottom of the table after the footnotes.

| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) |
|------------------------|----------|-------------------------------|---------------------------------|--------------------|-----------|---------------|-----------------------|-------------------|
| Part A (Hospital Ins.) | | | | | | | Part B (Medical Ins.) | |
| | | | | Daily Coinsurance | | | | |
| | | | | Inpatient Hospital | | Nursing Care | | |
| Year | Tax Rate | Monthly Premium for Uninsured | Deductible (covers 1st 60 days) | Days 61 - 90 | Days > 90 | Days 21 - 100 | Monthly Premium *** | Annual Deductible |
| 2012 | 1.45% | \$451 | \$1,156 | \$289 | \$578 | \$144.50 | \$99.90 | \$140 |
| 2011 | 1.45 | 450 | 1,132 | 283 | 566 | 141.50 | 115.40 | 162 |
| 2010 | 1.45 | 461 | 1,100 | 275 | 550 | 137.50 | 110.50 | 155 |
| | | | | | | | | |
| 2009 | 1.45% | \$443 | \$1,068 | \$267 | \$534 | \$133.50 | \$96.40 | \$135 |
| 2008 | 1.45 | 423 | 1,024 | 256 | 512 | 128.00 | 96.40 | 135 |
| 2007 | 1.45 | 410 | 992 | 248 | 496 | 124.00 | 93.50 | 131 |
| 2006 | 1.45 | 393 | 952 | 238 | 476 | 119.00 | 88.50 | 124 |
| 2005 | 1.45 | 375 | 912 | 228 | 456 | 114.00 | 78.20 | 110 |
| | | | | | | | | |
| 2004 | 1.45 | 343 | 876 | 219 | 438 | 109.50 | 66.60 | 100 |
| 2003 | 1.45 | 316 | 840 | 210 | 420 | 105.00 | 58.70 | 100 |
| 2002 | 1.45 | 319 | 812 | 203 | 406 | 101.50 | 54.00 | 100 |
| 2001 | 1.45 | 300 | 792 | 198 | 396 | 99.00 | 50.00 | 100 |
| 2000 | 1.45 | 301 | 776 | 194 | 388 | 97.00 | 45.50 | 100 |
| | | | | | | | | |
| 1999 | 1.45% | \$309 | \$768 | \$192 | \$384 | \$96.00 | \$45.50 | \$100 |
| 1998 | 1.45 | 309 | 764 | 191 | 382 | 95.50 | 43.80 | 100 |
| 1997 | 1.45 | 311 | 760 | 190 | 380 | 95.00 | 43.80 | 100 |

Medicare Amounts - Parts A and B

| | | | | | | | | |
|------|-------|-------|--------|-------|-------|-----------|---------|-------|
| 1996 | 1.45 | 289 | 736 | 184 | 368 | 92.00 | 42.50 | 100 |
| 1995 | 1.45 | 261 | 716 | 179 | 358 | 89.50 | 46.10 | 100 |
| | | | | | | | | |
| 1994 | 1.45% | \$245 | \$696 | \$174 | \$348 | \$87.00 | \$41.10 | \$100 |
| 1993 | 1.45 | 221 | 676 | 169 | 338 | 84.50 | 36.60 | 100 |
| 1992 | 1.45 | 192 | 652 | 163 | 326 | 81.50 | 31.80 | 100 |
| 1991 | 1.45 | 177 | 628 | 157 | 314 | 78.50 | 29.90 | 100 |
| 1990 | 1.45 | 175 | 592 | 148 | 296 | 74.00 | 28.60 | 75 |
| | | | | | | | | |
| 1989 | 1.45% | \$156 | \$560* | N/A* | N/A* | \$25.50** | \$31.90 | \$75 |
| 1988 | 1.45 | 234 | 540 | 135 | 270 | 67.50 | 24.80 | 75 |
| 1987 | 1.45 | 226 | 520 | 130 | 260 | 65.00 | 17.90 | 75 |
| 1986 | 1.45 | 214 | 492 | 123 | 246 | 61.50 | 15.50 | 75 |
| 1985 | 1.35 | 174 | 400 | 100 | 200 | 50.00 | 15.50 | 75 |
| | | | | | | | | |
| 1984 | 1.30% | \$155 | \$356 | \$89 | \$178 | \$44.50 | \$14.60 | \$75 |
| 1983 | 1.30 | 113 | 304 | 76 | 152 | 38.00 | 12.20 | 75 |
| 1982 | 1.30 | 113 | 260 | 65 | 130 | 32.50 | 12.20 | 75 |
| 1981 | 1.30 | 89 | 204 | 51 | 102 | 25.50 | 11.00 | 60 |
| 1980 | 1.05 | 78 | 180 | 45 | 90 | 22.50 | 9.60 | 60 |

* For 1989, once the annual deductible had been paid, Medicare paid for the balance of expenses for covered hospital services regardless of the number of days of hospitalization.

** For 1989, a daily coinsurance was paid for the first 8 days of care.

*** The premium for 2007 and later applies to those with income up to certain levels (based on tax filing status - \$85,000 in 2010 for individual filers, and \$170,000 for joint filers). The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA), as amended by the Deficit Reduction Act of 2005, provides that Medicare beneficiaries with higher incomes must pay a larger portion of their Medicare Part B premium amounts based on a predetermined formula, which will be phased-in starting in 2007 and ending in 2009. After 2007, the threshold and income range amounts will be annually adjusted.

Notes:

Columns (4), (5), (6) and (7) cover almost all inpatient hospital costs in any "benefit period" (see below).

Column (7) covers care in a "skilled nursing facility" for up to 100 days in a "benefit period" (see below) after a hospital stay of at least three consecutive days.

A "benefit period" begins with the first day of inpatient hospital or skilled nursing facility services and ends 60 days after discharge from the hospital or skilled nursing facility.

Medicare Part B requires a coinsurance payment of 20% of the fee schedule amount, plus the excess, if any, of the doctor's fee over the fee schedule amount (unless assignment is accepted by the doctor).