

## UNDERSTANDING MEDICARE

The staff at Brookhaven Extensive Care understands how overwhelming admitting a loved one to a long term care community can be. That is why we have prepared this brochure to help families understand the rules and guidelines governed by Medicare.

Accommodating your needs, Brookhaven Extensive Care offers skilled nursing care with physical therapy, wound care management, occupational therapy and speech therapy.



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Medicare is a comprehensive health insurance program for persons age 65 or older, persons permanently disabled for at least 24 months or persons with end stage renal disease. Medicare covers acute care in a hospital, Medicare-certified care in a skilled nursing facility, home health and hospice services.

## MEDICARE PART A BENEFITS

TYPE OF CARE	TIME LIMIT	YOU PAY	MEDICARE PAYS	ELIGIBILITY	NOT COVERED
Hospital Inpatient	First 60 days	\$1100.00**	Balance	Person 65 years of age or older. Persons permanently disabled for at least 24 months. Persons with end stage renal disease.	Private room, private nurses, other services covered by Medicare Part B (see below).
	61 <sup>st</sup> – 90 <sup>th</sup> days	\$275.00** a day	Balance		
Skilled care in a Medicare-certified nursing facility	First 20 days	\$0.00**	100%	Must have had a minimum of 3-midnight hospital stays and be admitted to skilled nursing facility within 30 days of hospital discharge. Physician must certify need for skilled nursing care and the skilled care must relate to the reason for prior hospitalization.	Private room, private nurses, other services covered by Medicare Part B (see below).
	21 <sup>st</sup> – 100 <sup>th</sup> days*	\$137.50** a day	Balance		
Home health care services	Intermittent care recertified by physician every 60 days	\$0.00**	100%	Must be confined to home and authorized by physician to receive home health care services.	Full-time nursing care, drugs, meals, homemaker services.
Hospice care	Unlimited	\$0.00**	100%	Must be certified by physician as terminally ill.	Any treatments other than pain relief and symptom management of the terminal illness.

## MEDICARE PART B BENEFITS

TYPE OF CARE	TIME LIMIT	YOU PAY	MEDICARE PAYS	ELIGIBILITY	NOT COVERED
Physician services; outpatient hospital services; and inpatient ancillary services such as medically necessary physical, occupational and speech therapies, certain medical supplies and portable x-ray services, after Part A benefits are exhausted.	Unlimited	\$155.00** annual deductible, then 20% of Medicare-approved charges.	Balance	Must enroll and pay monthly premium of \$96.40** or greater, based on income.	Routine check-ups, eyeglasses, hearing aids, dental work, orthopedic shoes, private nurses, and prescription drugs.

After Medicare coverage ends, hospital or nursing facility staff will help you try to locate other available payment sources.  
Rates are set by the federal government and adjusted January 1 of each year.

*\*For as many days as you continue to meet the Medicare guidelines for qualification up to 100 days maximum.*

*\*\*Rates quoted as of January 2010.*