



The Official U.S. Government Site for Medicare

[Home](#) / [Your Medicare costs](#) / Medicare 2017 costs at a glance

Medicare 2017 & 2018 costs at a glance

Listed below are basic costs for people with Medicare. If you want to see and compare costs for specific health care plans, visit the [Medicare Plan Finder](#).

For specific cost information (like whether you've met your [deductible](#), how much you'll pay for an item or service you got, or the status of a [claim](#)), visit [MyMedicare.gov](#).

[Find out if Medicare covers a specific test, item or service that's not listed under the detailed Medicare cost information section of this page.](#)

2017 & 2018 costs at a glance	
Part A premium	Most people don't pay a monthly premium for Part A (sometimes called " premium-free Part A "). If you buy Part A, you'll pay up to \$413 each month (\$422 in 2018). If you paid Medicare taxes for less than 30 quarters, the standard Part A premium is \$413 (\$422 in 2018). If you paid Medicare taxes for 30-39 quarters, the standard Part A premium is \$227 (\$232 in 2018).
Part A hospital inpatient deductible and coinsurance	You pay: <ul style="list-style-type: none"> ◆ \$1,316 deductible for each benefit period (\$1,340 in 2018) ◆ Days 1-60: \$0 coinsurance for each benefit period (\$0 in 2018) ◆ Days 61-90: \$329 coinsurance per day of each benefit period (\$335 in 2018) ◆ Days 91 and beyond: \$658 coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime) (\$670 in 2018) ◆ Beyond lifetime reserve days: all costs (all costs in 2018)
Part B premium	The standard Part B premium amount is \$134 (or higher depending on your income) (\$134 in 2018). However, some people who get Social Security benefits will pay less than this amount (\$109 on average in 2017; \$130 on average in 2018).
Part B deductible and coinsurance	\$183 per year (\$183 in 2018). After your deductible is met, you typically pay 20% of the Medicare-approved amount for most doctor services (including most doctor services while you're a hospital inpatient), outpatient therapy, and durable medical equipment .
Part C premium	The Part C monthly premium varies by plan. Compare costs for specific Part C plans .
Part D premium	The Part D monthly premium varies by plan (higher-income consumers may pay more). Compare costs for specific Part D plans .

Detailed Medicare cost information for 2017 & 2018

Medicare Part A (Hospital Insurance)

◆ Monthly [premium](#):

Most people don't pay a monthly premium for Part A (sometimes called "[premium-free Part A](#)"). If you buy Part A, you'll pay up to \$413 each month in 2017 (\$422 in 2018). If you paid Medicare taxes for less than 30 quarters, the standard Part A premium is \$413 (\$422 in 2018). If you paid Medicare taxes for 30-39 quarters, the standard Part A premium is \$227 (\$232 in 2018).

[Learn more about Part A costs.](#)

◆ Late enrollment penalty:

- If you don't buy it when you're first eligible, your monthly premium may go up 10%. (You'll have to pay the higher premium for twice the number of years you could have had Part A, but didn't sign up.) [Learn more about the Part A late enrollment penalty.](#)

Part A costs if you have Original Medicare

Note

All Medicare Advantage Plans must cover these services. If you're in a Medicare Advantage Plan, costs vary by plan and may be either higher or lower than those in Original Medicare. Review the "[Evidence of Coverage](#)" from your plan.

◆ Home health care

- \$0 for home health care services.
- 20% of the [Medicare-approved amount](#) for [durable medical equipment](#).

◆ Hospice care

- \$0 for [hospice](#) care.
- You may need to pay a [copayment](#) of no more than \$5 for each prescription drug and other similar products for pain relief and symptom control while you're at home. In the rare case your drug isn't covered by the hospice benefit, your hospice provider should contact your Medicare drug plan to see if it's covered under [Part D](#).
- You may need to pay 5% of the [Medicare-approved amount](#) for inpatient [respite care](#).
- Medicare doesn't cover room and board when you get hospice care in your home or another facility where you live (like a nursing home).

◆ Hospital inpatient stay

- \$1,316 [deductible](#) for each [benefit period](#) (\$1,340 in 2018).
- Days 1–60: \$0 [coinsurance](#) for each benefit period (\$0 in 2018).
- Days 61–90: \$329 coinsurance per day of each benefit period (\$335 in 2018).
- Days 91 and beyond: \$658 coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime) (\$670 in 2018).
- Beyond [lifetime reserve days](#): all costs (all costs in 2018).

Note

You pay for private-duty nursing, a television, or a phone in your room. You pay for a private room unless it's medically necessary.

◆ Mental health inpatient stay

- \$1,316 [deductible](#) for each [benefit period](#) (\$1,340 in 2018).
- Days 1–60: \$0 [coinsurance](#) per day of each benefit period (\$0 in 2018).
- Days 61–90: \$329 coinsurance per day of each benefit period (\$335 in 2018).
- Days 91 and beyond: \$658 coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime) (\$670 in 2018).
- Beyond [lifetime reserve days](#): all costs (all costs in 2018).
- 20% of the [Medicare-approved amount](#) for mental health services you get from doctors and other providers while you're a hospital inpatient.

Note

There's no limit to the number of benefit periods you can have when you get mental health care in a general hospital. You can also have multiple benefit periods when you get care in a psychiatric hospital. Remember, there's a lifetime limit of 190 days.

◆ Skilled nursing facility stay

- Days 1–20: \$0 for each [benefit period](#) (\$0 in 2018).
- Days 21–100: \$164.50 [coinsurance](#) per day of each benefit period (\$167.50 in 2018).
- Days 101 and beyond: all costs (all costs in 2018).

Medicare Part B (Medical Insurance)

◆ Monthly premium:

2017

The standard Part B premium amount in 2017 is \$134 (or higher depending on your income). However, most people who get Social Security benefits pay less than this amount. This is because the Part B premium increased more than the cost-of-living increase for 2017 Social Security benefits. If you pay your Part B premium through your monthly Social Security benefit, you'll pay less (\$109 on average). Social Security will tell you the exact amount you'll pay for Part B in 2017. You'll pay the standard premium amount (or higher) if:

- ◆ You enroll in Part B for the first time in 2017.
- ◆ You don't get Social Security benefits.
- ◆ You're directly billed for your Part B premiums (meaning they aren't taken out of your Social Security benefits).
- ◆ You have Medicare and Medicaid, and Medicaid pays your premiums. (Your state will pay the standard premium amount of \$134.)
- ◆ Your modified adjusted gross income as reported on your IRS tax return from 2 years ago is above a certain amount. If so, you'll pay the standard premium amount and an Income Related Monthly Adjustment Amount (IRMAA). IRMAA is an extra charge added to your premium.

If you're in 1 of these 5 groups, here's what you'll pay:

If your yearly income in 2015 (for what you pay in 2017) was			You pay each month (in 2017)
File individual tax return	File joint tax return	File married & separate tax return	
\$85,000 or less	\$170,000 or less	\$85,000 or less	\$134
above \$85,000 up to \$107,000	above \$170,000 up to \$214,000	Not applicable	\$187.50
above \$107,000 up to \$160,000	above \$214,000 up to \$320,000	Not applicable	\$267.90

above \$160,000 up to \$214,000	above \$320,000 up to \$428,000	above \$85,000 and up to \$129,000	\$348.30
above \$214,000	above \$428,000	above \$129,000	\$428.60

2018

The standard Part B premium amount in 2018 will be \$134 (or higher depending on your income). However, some people who get Social Security benefits pay less than this amount (\$130 on average). You'll pay the standard premium amount (or higher) if:

- ◆ You enroll in Part B for the first time in 2018.
- ◆ You don't get Social Security benefits.
- ◆ You're directly billed for your Part B premiums (meaning they aren't taken out of your Social Security benefits).
- ◆ You have Medicare and Medicaid, and Medicaid pays your premiums. (Your state will pay the standard premium amount of \$134.)
- ◆ Your modified adjusted gross income as reported on your IRS tax return from 2 years ago is above a certain amount. If so, you'll pay the standard premium amount and an Income Related Monthly Adjustment Amount (IRMAA). IRMAA is an extra charge added to your premium.

If you're in 1 of these 5 groups, here's what you'll pay:

If your yearly income in 2016 (for what you pay in 2018) was			You pay each month (in 2018)
File individual tax return	File joint tax return	File married & separate tax return	
\$85,000 or less	\$170,000 or less	\$85,000 or less	\$134
above \$85,000 up to \$107,000	above \$170,000 up to \$214,000	Not applicable	\$187.50
above \$107,000 up to \$133,500	above \$214,000 up to \$267,000	Not applicable	\$267.90
above \$133,500 up to \$160,000	above \$267,000 up to \$320,000	Not applicable	\$348.30
above \$160,000	above \$320,000	above \$85,000	\$428.60

[Get more information about your Part B premium from Social Security \[PDF, 341 KB\].](#)

◆ Late enrollment penalty:

In most cases, if you don't sign up for Part B when you're first eligible, you'll have to pay a late enrollment penalty. You'll have to pay this penalty for as long as you have Part B. Your monthly premium for Part B may go up 10% for each full 12-month period that you could have had Part B, but didn't sign up for it. Also, you may have to wait until the General Enrollment Period (from January 1 to March 31) to enroll in Part B. Coverage will start July 1 of that year.

[Learn more about the Part B late enrollment penalty.](#)

Part B costs if you have Original Medicare

Note

All Medicare Advantage Plans must cover these services. If you're in a Medicare Advantage Plan, costs vary by plan and may be either higher or lower than those in Original Medicare. Review the "[Evidence of Coverage](#)" from your plan.

◆ Part B annual deductible:

You pay \$183 per year for your Part B [deductible](#) (\$183 in 2018). After your deductible is met, you typically pay 20% of the [Medicare-approved amount](#) for these:

- Most doctor services (including most doctor services while you're a hospital inpatient)
- Outpatient therapy
- [Durable medical equipment](#)

◆ **Clinical laboratory services:**

You pay \$0 for Medicare-approved services.

◆ **Home health services:**

- \$0 for home health care services.
- 20% of the [Medicare-approved amount](#) for [durable medical equipment](#).

◆ **Medical and other services:**

You pay 20% of the [Medicare-approved amount](#) for most doctor services (including most doctor services while you're a hospital inpatient), outpatient therapy, and [durable medical equipment](#).

Note

In 2017 and 2018, there may be [limits on physical therapy, occupational therapy, and speech language pathology services](#). If so, there may be exceptions to these limits.

◆ **Outpatient mental health services:**

- You pay nothing for your yearly depression screening if your doctor or health care provider accepts assignment.
- 20% of the [Medicare-approved amount](#) for visits to a doctor or other [health care provider](#) to diagnose or treat your condition. The Part B [deductible](#) applies.
- If you get your services in a hospital outpatient clinic or hospital outpatient department, you may have to pay an additional [copayment](#) or [coinsurance](#) amount to the hospital.

◆ **Partial hospitalization mental health services:**

You pay a percentage of the [Medicare-approved amount](#) for each service you get from a doctor or certain other qualified mental health professionals if your health care professional accepts [assignment](#). You also pay [coinsurance](#) for each day of partial hospitalization services provided in a hospital outpatient setting or community mental health center, and the Part B [deductible](#) applies.

◆ **Outpatient hospital services:**

- You generally pay 20% of the [Medicare-approved amount](#) for the doctor or other health care provider's services, and the Part B [deductible](#) applies.
- For all other services, you also generally pay a [copayment](#) for each service you get in an outpatient hospital setting. You may pay more for services you get in a hospital outpatient setting than you would pay for the same care in a doctor's office.
- For some screenings and preventive services, [coinsurance](#), copayments, and the Part B deductible don't apply (so you pay nothing).

Medicare Part C (Medicare Advantage)

◆ **Monthly premium:**

The Part C monthly [premium](#) varies by plan.

◆ **Deductibles, copayments, & coinsurance:**

The amount you pay for Part C deductibles, copayments, and/or coinsurance varies by plan. [Look for specific Part C plan costs](#), and then call the plans you're interested in to get more details.

Medicare Part D (Medicare prescription drug coverage)◆ **Monthly premium:**

The Part D monthly [premium](#) varies by plan (higher-income consumers may pay more).

The charts below show your estimated prescription drug plan monthly premium based on your income as reported on your IRS tax return. If your income is above a certain limit, you'll pay an income-related monthly adjustment amount in addition to your plan premium.

2017

If your filing status and yearly income in 2015 was			
File individual tax return	File joint tax return	File married & separate tax return	You pay each month (in 2017)
\$85,000 or less	\$170,000 or less	\$85,000 or less	your plan premium
above \$85,000 up to \$107,000	above \$170,000 up to \$214,000	not applicable	\$13.30 + your plan premium
above \$107,000 up to \$160,000	above \$214,000 up to \$320,000	not applicable	\$34.20 + your plan premium
above \$160,000 up to \$214,000	above \$320,000 up to \$428,000	above \$85,000 up to \$129,000	\$55.20 + your plan premium
above \$214,000	above \$428,000	above \$129,000	\$76.20 + your plan premium

2018

If your filing status and yearly income in 2016 was			
File individual tax return	File joint tax return	File married & separate tax return	You pay each month (in 2018)
\$85,000 or less	\$170,000 or less	\$85,000 or less	your plan premium
above \$85,000 up to \$107,000	above \$170,000 up to \$214,000	not applicable	\$13.00 + your plan premium
above \$107,000 up to \$133,500	above \$214,000 up to \$267,000	not applicable	\$33.60 + your plan premium
above \$133,500 up to \$160,000	above \$267,000 up to \$320,000	not applicable	\$54.20 + your plan premium
above \$160,000	above \$320,000	above \$85,000	\$74.80 + your plan premium

◆ **Late enrollment penalty:**

You may owe a late enrollment penalty if, for any continuous period of 63 days or more after your [Initial Enrollment Period](#) is over, you go without one of these:

- ◆ A Medicare Prescription Drug Plan (Part D)
- ◆ A Medicare Advantage Plan (Part C) (like an HMO or PPO)
- ◆ Another Medicare health plan that offers Medicare prescription drug coverage
- ◆ [Creditable prescription drug coverage](#)

In general, you'll have to pay this penalty for as long as you have a Medicare drug plan. The cost of the late enrollment penalty depends on how long you went without Part D or creditable prescription drug coverage. [Learn more about the Part D late](#)

[enrollment penalty](#).

◆ **Deductibles, copayments, & coinsurance:**

The amount you pay for Part D deductibles, copayments, and/or coinsurance varies by plan. [Look for specific Medicare drug plan costs](#), and then call the plans you're interested in to get more details.

Medicare.gov

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