

2023 MEDICARE COSTS & PREMIUMS

PART A (HOSPITAL)

You pay:

Inpatient Hospital Stay (*benefit period ends 60 days after release from care*):

- Deductible: \$1,600 per benefit period
- Coinsurance (days 1-60): \$0 per day of each benefit period
- Coinsurance (days 61-90): \$400 per day of each benefit period
- Coinsurance (60 lifetime reserve days): \$800 per day after day 90 of each benefit period

Skilled Nursing Facility Stay (*3-day inpatient hospital stay required first*):

- Coinsurance (days 1-20): \$0 per day of each benefit period
- Coinsurance (days 21-100): \$200 per day of each benefit period

PART B (MEDICAL)

You pay:

Part B Deductible: \$226 per calendar year

Part B Coverage: Generally 20%, after \$226 deductible is met

PART B PREMIUMS & PART D HIGH INCOME PREMIUMS (PAID TO MEDICARE)

Those enrolled in **Medicare Part B** will pay the premiums listed in the table below (**based on income**). Higher income earners will pay a **Part B IRMAA (Income Related Monthly Adjustment Amount)** *in addition* to the \$164.90 base premium.

Those with higher income who are enrolled in **Part D Prescription Drug** coverage also pay a **Part D IRMAA** *in addition* to the monthly premium for a Part D prescription drug plan with an insurance carrier (see table below).

If your yearly income (MAGI: Modified Adjusted Gross Income*) in 2021 was ...			Your pay in 2023 (per person) monthly premiums to Medicare	
Individual Tax Return	Joint Tax Return	Married & Separate Tax Return	Part B Premium + IRMAA	Part D IRMAA (in addition to Part D Plan Premium)
\$97,000 or less	\$194,000 or less	\$97,000 or less	\$164.90	\$0.00
\$97,000 to \$123,000	\$194,001 to \$246,000	N/A	\$230.80	\$12.20
\$123,001 to \$153,000	\$246,001 to \$306,000	N/A	\$329.70	\$31.50
\$153,001 to \$183,000	\$306,001 to \$366,000	N/A	\$428.60	\$50.70
\$183,001 to \$500,000	\$366,001 to \$750,000	\$97,001 to \$403,000	\$527.50	\$70.00
\$500,000+	\$750,000+	\$403,000+	\$560.50	\$76.40

* 2021 MAGI = Adjusted Gross Income (Form 1040 line 8b) + Tax-Exempt Interest (Form 1040 line 2a)