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Update to Medicare Deductible, Coinsurance and Premium Rates for Calendar Year (CY) 2022

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Related Change Request (CR) Number: 12507

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Related CR Transmittal Number: R11136GI Implementation Date: January 3, 2022

Provider Types Affected

This MLN Matters Article is for physicians, other providers, and suppliers submitting claims to Medicare Administrative Contractors (MACs) for services they provide to Medicare patients.

Provider Action Needed

In this Article, you'll learn about new Calendar Year (CY) 2022:

- Medicare rates
- Part A and B Deductible and Coinsurance Rates
- Part A and B Premium Amounts

Make sure your billing staff knows about these changes.

Background

Patients who use covered Part A services may be subject to deductible and coinsurance requirements. Medicare subtracts an inpatient hospital deductible amount from the amount payable to the hospital for inpatient hospital services it provides in a spell of illness.

When a patient gets such services for more than 60 days during a spell of illness, they're responsible for a coinsurance amount equal to one-fourth of the inpatient hospital deductible per-day for the 61st-90th day in the hospital. A patient has 60 lifetime reserve days of coverage, which they may use after the 90th day in a spell of illness. The coinsurance amount for these days is equal to one-half of the inpatient hospital deductible.

A patient is responsible for a coinsurance amount equal to one-eighth of the inpatient hospital deductible per day for the 21st-100th day of Skilled Nursing Facility (SNF) services provided during a spell of illness.

Most individuals age 65 and older, and many disabled individuals under age 65, have Part A Health Insurance (HI) benefits without a premium payment. The Social Security Act says that

certain aged and disabled persons who aren't insured may voluntarily enroll, but must pay a monthly premium. Since 1994, voluntary enrollees may qualify for a reduced premium if they have 30-39 quarters of covered employment. When voluntary enrollment takes place more than 12 months after a person's initial enrollment period, Medicare adds a 10% penalty for 2 years for every year they could have enrolled and failed to enroll in Part A.

Under Part B of the Supplementary Medical Insurance (SMI) program, all enrollees pay a monthly premium. Most SMI services are subject to an annual deductible and coinsurance (percent of costs that the enrollee must pay), which are set by statute. When Part B enrollment takes place more than 12 months after a person's initial enrollment period, there's a permanent 10% increase in the premium for each year the patient could have enrolled and failed to enroll.

2022 PART A - HOSPITAL INSURANCE (HI)

Part A Deductible

- \$1,556.00

Part A Coinsurance

- \$389.00 a day for 61st-90th day
- \$778.00 a day for 91st-150th day (lifetime reserve days)
- \$194.50 a day for 21st-100th day (Skilled Nursing Facility (SNF) coinsurance)

Part A Base Premium (BP)

- \$499.00 a month

Part A BP with 10% surcharge

- \$548.90 a month

Part A BP with 45% reduction

- \$274.00 a month (for those who have 30-39 quarters of coverage)

Part A BP with 45% reduction and 10% surcharge

- \$301.40 a month

2022 PART B - SUPPLEMENTARY MEDICAL INSURANCE (SMI)

Part B Standard Premium

- \$170.10 a month

Part B Deductible

- \$233.00 a year

Pro Rata Data Amount

- \$150.66 1st month
- \$82.34 2nd month

Coinsurance

- 20%

More Information

We issued [CR 12507](#) to your MAC as the official instruction for this change.

For more information, [find your MAC's website](#).

Document History

Date of Change	Description
December 1, 2021	Initial article released.

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