

About Your Medicare Benefits

Medicare is a federally funded health insurance program for people age 65 and older who have paid Social Security disability for more than two years, or people of any age with end-stage renal disease. There are two parts to the Medicare program: hospital insurance (Part A) and medical insurance (Part B).

Hospital Insurance (Part A) helps pay for:

- Acute care in a hospital
- Hospice services
- Medicare-certified care in a skilled nursing facility

Medical Insurance (Part B) helps pay for:

- Certain hospital or skilled nursing visits and procedures
- Outpatient hospital costs
- Medicare-certified care in a skilled nursing facility

We are able to assist with any questions or concerns you may have regarding Medicare and its coverage. For more information, contact your nearest Extencicare health center or visit our website at www.extencicare.com.

About Extencicare

Extencicare Health Services, Inc. is a leading provider of long-term skilled nursing care and short term rehabilitation solutions. Over the last 40 years, Extencicare has developed a reputation for providing quality clinical-based services. The hallmarks of Extencicare's philosophy are dignity, respect, integrity, responsiveness, compassion and pride, which guide our interaction with residents and their families.

Extencicare implements rigorous standards designed to ensure that we meet the physical, spiritual, social and emotional needs of our residents and their loved ones. We measure our success by providing quality services to residents and patients who entrust us with their health care needs. Our goal is to be the provider of choice for the communities we serve.

EXTENCICARE®

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Code #MEDICAREBIFOLD_1210

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Exploring Your Medicare Benefits 2011

2011 MEDICARE FACTS

PART A SERVICES (Hospital Insurance)

SERVICE	TIME LIMITS	YOU PAY	MEDICARE PAYS	NOT COVERED	REQUIREMENTS
HOSPITAL INPATIENT Semi-private room accommodations, meals, general nursing and other hospital services. Includes drugs, supplies, appliances and equipment ordinarily furnished, laboratory and X-ray services.	First 60 days	\$1132 once per benefit period	100 % after deductible is met	Private nurses, first three pints of blood, services of physician and surgeon, private room (unless medically necessary), personal convenience items.	Over 65 and eligible for Social Security or under 65 with a valid HIC number. Hospital must be Medicare certified. Utilization Review Committee or Peer Review approves stay.
	Days 61 to 90	\$283 a day	Balance		
	Days 91 to 150	\$566 per day, or balance for up to 60 one-use only lifetime reserve days.			
SKILLED NURSING FACILITY Skilled medical services including drugs, supplies, appliances and equipment ordinarily furnished, laboratory, rehabilitation services and X-ray services.	First 20 days	None*	100%	Same as above and all personal convenience items such as barber, beautician, personal laundry, dry cleaning, private telephone and television. Medicare does not cover custodial care (help with eating, bathing, toileting) if that is the only care needed.	Must occur within 30 days of spending three or more qualifying and consecutive midnights in an acute care setting. Must be extension of treatment of condition requiring daily skilled nursing care.
	Next 80 days of continuous service (100 day maximum)	\$141.50 a day	Balance		
HOSPICE Physician services, nursing care, medical equipment, supplies, drugs, therapy, counseling, short-term inpatient care and respite care.	Unlimited	Up to \$5 co-pay on prescriptions and 5% of respite care rate	Balance	Any treatments other than pain relief, symptom management and respite care (you can receive Medicare's standard benefits when treatment is required for a condition other than the terminal illness).	Must be certified by physician as terminally ill. Services can be provided in a skilled nursing facility.

*This excludes certain medical supplies which may be provided by an outside supplier and are covered under Medicare Part B and subject to the \$162 deductible and 20% coinsurance

PART B SERVICES (Medical Insurance)

SERVICE	TIME LIMITS	YOU PAY	MEDICARE PAYS	NOT COVERED	REQUIREMENTS *
PHYSICIANS AND SURGEONS Hospital, skilled nursing facility and certain office visits or procedures.	Unlimited	100% plus 20% of the balance of Medicare-approved charges	80% of the balance of Medicare-approved charges	Routine check-up, eyeglasses, hearing aids, dental work, cosmetic surgery, most immunizations, private duty nurses, first three pints of blood and prescription drugs.	Must enroll and pay the current monthly premium (most people will pay \$115.40 per month in 2011, however, your premium may be higher based on Federal Guidelines). Services covered under Part A will not be simultaneously covered under Part B.
HOSPITAL OUTPATIENT Diagnostic tests, radiation therapy, rehabilitation, certain supplies, artificial limbs, braces and durable medical equipment. Patient resides at home.		50% for outpatient mental health			
SKILLED NURSING FACILITY Diagnostic tests, therapy, certain supplies, artificial limbs, braces and certain ambulance fees. Patient receives service while in a skilled nursing center.	Limited benefits	\$162 deductible and 20% co-pay for therapy and other services after deductible	Same as above (certain services may not be subject to co-pay)	Therapy services may have a yearly maximum	

*Applies to all services.