

**Addendum: for use with North Carolina Medicare Supplement/Long-Term Care online ExamFX course and study guide version 26165en, per exam content outline updates effective 01/01/2022.**

*The following are **content revisions** with updated dollar amounts for 2022:*

<b>MEDICARE PART A</b>	
<b>Part A Premium</b>	Most people don't pay a monthly premium for Part A. If you buy Part A, you'll pay up to <u>\$499</u> each month.
<b>Hospital Inpatient Deductible</b>	You pay: <ul style="list-style-type: none"> <li>• <u>\$1,556</u> deductible for each benefit period</li> <li>• Days 1-60: \$0 coinsurance for each benefit period</li> <li>• Days 61-90: <u>\$389</u> coinsurance per day of each benefit period</li> <li>• Days 91 and beyond: <u>\$778</u> coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over insured's lifetime)</li> <li>• Beyond lifetime reserve days: all costs</li> </ul>
<b>Skilled Nursing Facility Coinsurance</b>	<ul style="list-style-type: none"> <li>• Days 1–20: \$0 for each benefit period</li> <li>• Days 21–100: <u>\$194.50</u> coinsurance per day of each benefit period</li> <li>• Days 101 and beyond: all costs</li> </ul>
<b>MEDICARE PART B</b>	
<b>Premium</b>	<ul style="list-style-type: none"> <li>• <u>\$170.10</u> each month</li> </ul>
<b>Deductible</b>	<ul style="list-style-type: none"> <li>• <u>\$233</u> per year</li> </ul>
<b>MEDICARE PART D</b>	
<b>Premium</b>	The Part D monthly premium varies by plan (higher-income consumers may pay more) <ul style="list-style-type: none"> <li>• <u>\$33.37</u> (national base beneficiary premium)</li> </ul>
<b>Deductible</b>	<ul style="list-style-type: none"> <li>• <u>\$480</u></li> </ul>
<b>Drug Costs</b>	<ul style="list-style-type: none"> <li>• For the amounts between <u>\$480</u> and <u>\$4,430</u>, Medicare pays for drug costs;</li> <li>• Coverage gap: from <u>\$4,430</u>, plan enrollee pays <u>25%</u> for brand-name or generic drugs until true out-of-pocket spending reaches <u>\$7,050</u>;</li> </ul>

	<ul style="list-style-type: none"> <li>After plan enrollee reaches <u>\$7,050</u> in true out-of-pocket spending, Medicare pays about 95% of drug costs.</li> </ul>
<b>Catastrophic Coverage</b>	<ul style="list-style-type: none"> <li>Insured pays the greater of <u>\$3.95</u> for generic drugs and <u>\$9.85</u> for name brand drugs, or 5% of retail cost, whichever is higher</li> </ul>
<b>LONG-TERM CARE</b>	
<b>State Mandated Benefits</b>	<ul style="list-style-type: none"> <li>Benefits paid under a federally qualified plan are not taxable if the amount paid does not exceed the federal per diem amounts (<u>\$450</u>)</li> </ul>