

Search Medicare



Medicare 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), [log into your secure Medicare account](#).

[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.](#)

2021 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 \$471 each month in 2021 (\$499 in 2022). If you paid Medicare taxes for less than 30 quarters, the standard Part A premium is \$471 (\$499 in 2022). If you paid Medicare taxes for 30-39 quarters, the standard Part A premium is \$259 (\$274 in 2022).
Part A hospital inpatient deductible and coinsurance	You pay: <ul style="list-style-type: none">• \$1,484 (\$1,556 in 2022) deductible for each benefit period• Days 1-60: \$0 coinsurance for each benefit period• Days 61-90: \$371 (\$389 in 2022) coinsurance per day of each benefit period• Days 91 and beyond: \$742 (\$778 for 2022) coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime)• Beyond lifetime reserve days: all costs

Part B premium	The standard Part B premium amount is \$148.50 (\$170.10 in 2022) (or higher depending on your income).
Part B deductible and coinsurance	\$203 (\$233 in 2022). After your deductible is met, you typically pay 20% of the <u>Medicare-Approved Amount</u> for most doctor services (including most doctor services while you're a hospital inpatient), outpatient therapy, and <u>durable medical equipment (dme)</u>
Part C premium	The Part C monthly <u>premium</u> varies by plan. <u>Compare costs for specific Part C plans.</u>
Part D premium	The Part D monthly <u>premium</u> varies by plan (higher-income consumers may pay more). <u>Compare costs for specific Part D plans.</u>

Detailed Medicare cost information for 2021

Medicare Part A (Hospital Insurance)

Medicare Part B (Medical Insurance)

- Monthly premium:**

2021

The standard Part B premium amount in 2021 is \$148.50. Most people pay the standard Part B premium amount. If your modified adjusted gross income as reported on your IRS tax return from 2 years ago is above a certain amount, 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 your yearly income in 2019 (for what you pay in 2021) was			You pay each month (in 2021)
File individual tax return	File joint tax return	File married & separate tax	

		return	
\$88,000 or less	\$176,000 or less	\$88,000 or less	\$148.50
above \$88,000 up to \$111,000	above \$176,000 up to \$222,000	Not applicable	\$207.90
above \$111,000 up to \$138,000	above \$222,000 up to \$276,000	Not applicable	\$297.00
above \$138,000 up to \$165,000	above \$276,000 up to \$330,000	Not applicable	\$386.10
above \$165,000 and less than \$500,000	above \$330,000 and less than \$750,000	above \$88,000 and less than \$412,000	\$475.20
\$500,000 or above	\$750,000 or above	\$412,000 or above	\$504.90

2022

The standard Part B premium amount in 2022 is \$170.10. Most people pay the standard Part B premium amount. If your modified adjusted gross income as reported on your IRS tax return from 2 years ago is above a certain amount, 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 your yearly income in 2020 (for what you pay in 2022) was			You pay each month (in 2022)
File individual tax return	File joint tax return	File married & separate tax return	

\$91,000 or less	\$182,000 or less	\$91,000 or less	\$170.10
above \$91,000 up to \$114,000	above \$182,000 up to \$228,000	Not applicable	\$238.10
above \$114,000 up to \$142,000	above \$228,000 up to \$284,000	Not applicable	\$340.20
above \$142,000 up to \$170,000	above \$284,000 up to \$340,000	Not applicable	\$442.30
above \$170,000 and less than \$500,000	above \$340,000 and less than \$750,000	above \$91,000 and less than \$409,000	\$544.30
\$500,000 or above	\$750,000 or above	\$409,000 or above	\$578.30

- **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% of the standard premium 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:**

In 2021, you pay \$203 (\$233 in 2022) for your Part B deductible. After you meet your deductible for the year, 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 (Dme)

- **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 (dme).

- **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 (Dme) [Glossary].

- **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 your 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 you get in a hospital outpatient setting or community mental health center, and the Part B deductible applies.

- **Outpatient hospital services:**

- You usually pay 20% of the Medicare-approved amount for the doctor or other health care provider's services. For services that can also be provided in a doctor's office, you may pay more for outpatient services you get in a hospital than you'll pay for the same care in a doctor's office. However, the hospital outpatient copayment for the service is capped at the inpatient deductible amount.
- In addition to the amount you pay the doctor, you'll also usually pay the hospital a copayment for each service you get in a hospital outpatient setting, except for certain preventive services that don't have a copayment. In most cases, the copayment can't be more than the Part A hospital stay deductible for each service.
- The Part B deductible applies, except for certain preventive services. If you get hospital outpatient services in a critical access hospital, your copayment may be higher and may exceed the Part A hospital stay deductible.

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).

Part D premiums by income

The chart below shows 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.

2021

If your filing status and yearly income in 2019 was			
File individual tax return	File joint tax return	File married & separate tax return	You pay each month (in 2021)
\$88,000 or less	\$176,000 or less	\$88,000 or less	your plan premium
above \$88,000 up to \$111,000	above \$176,000 up to \$222,000	not applicable	\$12.30 + your plan premium
above \$111,000 up to \$138,000	above \$222,000 up to \$276,000	not applicable	\$31.80 + your plan premium
above \$138,000 up to \$165,000	above \$276,000 up to \$330,000	not applicable	\$51.20 + your plan premium
above \$165,000 and less than \$500,000	above \$330,000 and less than \$750,000	above \$88,000 and less than \$412,000	\$70.70 + your plan premium
\$500,000 or above	\$750,000 or above	\$412,000 or above	\$77.10 + your plan premium

If your filing status and yearly income in 2020 was			
File individual tax return	File joint tax return	File married & separate tax return	You pay each month (in 2022)
\$91,000 or less	\$182,000 or less	\$91,000 or less	your plan premium
above \$91,000 up to \$114,000	above \$182,000 up to \$228,000	not applicable	\$12.40 + your plan premium
above \$114,000 up to \$142,000	above \$228,000 up to \$284,000	not applicable	\$32.10 + your plan premium
above \$142,000 up to \$170,000	above \$284,000 up to \$340,000	not applicable	\$51.70 + your plan premium
above \$170,000 and less than \$500,000	above \$340,000 and less than \$750,000	above \$91,000 and less than \$409,000	\$71.30 + your plan premium
\$500,000 or above	\$750,000 or above	\$409,000 or above	\$77.90 + 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) or 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.

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