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What Medicare Covers

- Ambulance Transportation (when other transportation endangers health) to the nearest supplier of needed services that are not available at the SNF
- Medical Supplies and Equipment Used in the Facility
- Physical Therapy*
- Occupational Therapy*
- Speech-Language Therapy*
- Skilled Nursing Care
- Semi-Private Room
- Meals
- Medical Social Services
- Medications
- Dietary Counseling

Medicare covers these services if they are needed to meet your health goal.

Part A: Hospital Insurance: In addition to hospital inpatient care, Part A covers some skilled nursing facility (SNF), home, health, and hospice care. If you are entitled to Part A, there is no monthly or annual premium charge, but there is a charge for most health care services. There are also specific requirements you must meet before you can receive coverage for some services, such as home health care, skilled nursing facility care, and hospice care.

Part A BENEFITS

Individual Pays

Skilled Nursing Facility

100 Skilled days are not guaranteed as they are based on the progression of the individual
 No coinsurance-Medicare covers in full
 \$164.50 per day
 No benefit

Days 1-20

Days 21-100

After 100 days

*A Benefit period begins when a person is admitted into a hospital and ends 60 days after discharge from the hospital or a skilled nursing facility.

** Coinsurance-portion of a health care fee that must be paid by an insured patient.

Part B: Medical Insurance: Part B pays for doctor's services, outpatient hospital care, and home health visits not covered under Part A. It also covers laboratory tests, such as X-rays and blood work; medical equipment, such as wheelchairs and walkers; Preventive services, such as mammograms and prostate cancer screenings; cardiovascular (heart) disease and diabetes screenings; outpatient therapy; mental health care; and ambulance services