## Are You a Hospital Inpatient or a Hospital Outpatient?

If You Have Medicare – Ask!

Your costs are different if you are in a hospital as an inpatient or as an outpatient.

Did you know that even if you stay in the hospital overnight, you might still be considered an "outpatient"? Your hospital status (whether the hospital considers you an "inpatient" or an "outpatient") affects how much you pay for hospital services (like X-rays, drugs, and lab tests) and may also affect whether Medicare will cover care you get in a skilled nursing facility.

You're an inpatient starting the day you're formally admitted to the hospital with a doctor's order. The day before you're discharged is your last inpatient day.

You're an outpatient if the doctor hasn't written an order to admit you to the hospital as an inpatient and you're getting emergency department services, observation services, outpatient surgery, lab tests, or X-rays. In these cases, you're an outpatient even if you spend the night at the hospital.

**Observation services** are hospital outpatient services given to help the doctor decide if you need to be admitted as an inpatient or can be discharged. Observation services may be given in the Emergency Department(ED) or another area of the hospital. Observation stays typically happen when patients go to the emergency room and have symptoms that require hospital physicians to monitor them.

If you are in the hospital for an observation stay, you are considered an outpatient, not an inpatient.

## **COST DIFFERENCES**

Your <u>inpatient hospital costs</u> are usually covered under Medicare Part A.

If you have Original Medicare, you generally have no co-payments for the first 60 days, once you reach the deductible. Your costs may be different if you have a Medicare Advantage private plan. The hospital benefit includes nurse's services, medically necessary medications, X-rays, supplies, appliances, and equipment the hospital provides for you to use during your inpatient hospital stay.

<u>Outpatient hospital costs</u> (including Observation services) are usually covered under Medicare Part B.

For outpatient stays, you typically pay a coinsurance or copay for each medical service you receive after you meet the Part B deductible. Original Medicare generally covers 80 percent of the cost of most doctors' services you receive, after you have met your yearly deductible. You or your supplemental insurance are usually responsible for the remaining 20 percent. Your costs may be different if you have a Medicare Advantage plan.

Either way, when Part B covers your hospital care, you may have higher costs than if Part A covered your stay.

If you're in the hospital more than a few hours, always ask your doctor or the hospital staff if you're an inpatient or an outpatient.

It is also important to note that you need a three day inpatient hospital stay for Medicare to cover skilled nursing facility care once you leave the hospital. An observation stay is an outpatient hospital stay, and will not help you qualify for skilled nursing facility coverage.

Read more about hospital coverage on Medicare Interactive.

http://www.medicareinteractive.org/page2.php?topic=counselor&page=script&slide\_id=1755

Read more about skilled nursing facility coverage on Medicare Interactive.

http://www.medicareinteractive.org/page2.php?topic=counselor&page=script&slide\_id=56