

## Partial Hospitalization

Partial hospitalization is a program of outpatient active psychiatric treatment that's more intensive than the care you get in a doctor's or therapist's office. In some cases, Medicare Part B will cover partial hospitalization. This type of treatment doesn't require an overnight stay. Medicare helps cover partial hospitalization services when they're provided through a hospital outpatient department or community mental health center.

For Medicare to cover a partial hospitalization program, you must meet certain requirements and your doctor must certify that you would otherwise need inpatient treatment. Your doctor and the partial hospitalization program must accept Medicare payment.

## Co-Pays and Deductibles Mental Health Inpatient Stay

Days:	You pay:
1–60:	\$1,632 deductible for each benefit period
61–90:	\$408 coinsurance per day of each benefit period
91 and beyond:	\$816 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

## Need Help Paying?

Do you need help paying? There are programs to help pay for in patient, out patient, and prescription medications. If your monthly income is about \$2,268, you may qualify for assistance. Call SHIP to find out more information.

In some cases, Medicare Savings Programs may also pay Medicare Part A (Hospital Insurance) and Medicare Part B (Medical Insurance) deductibles, coinsurance, and copayments if you meet certain conditions.

Call SHIP to see if you qualify for these assistance programs. (800) 452-4800

## What is SHIP?

The State Health Insurance Assistance Program (SHIP) is a free and impartial counseling program for people with Medicare. SHIP is provided by the Administration for Community Living and the Indiana Department of Insurance. SHIP helps answer your questions about Medicare, Medicare Supplement Insurance, Medicare Advantage, Medicaid, long term care insurance, prescription coverage and low-income assistance. SHIP provides tools and information to help you make decisions regarding your health care. We strive to help you be wise consumers and to get the most value for your health insurance dollars.

# Your Guide to Mental Health Benefits and Medicare



## SHIP

State Health Insurance  
Assistance Program

Navigating Medicare

## *We can help.*

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**(800) 452-4800**  
**[www.medicare.in.gov](http://www.medicare.in.gov)**

Mental health is an important aspect of every individual's wellbeing. Medicare offers coverage for some services and medications.

Medicare covers a one-time "Welcome to Medicare" preventive visit. This visit includes a review of your potential risk factors for depression. (Note: This visit is only covered if you get it within the first 12 months you have Part B.) You pay nothing if your doctor or other health care provider accepts Medicare assignment.

Medicare covers a yearly "Wellness" visit once every 12 months (if you've had Part B for longer than 12 months). You pay nothing if your doctor or other health care provider accepts Medicare assignment.

Medicare covers one depression screening per year. The screening must be done in a primary care doctor's office or primary care clinic that can provide follow-up treatment and referrals. You pay nothing if your doctor or other health care provider accepts Medicare assignment.

Medicare Advantage plans also cover outpatient and inpatient mental health care and mental health prescriptions. Call your plan to check on benefits and which providers to use.

## Inpatient Mental Health Services

If you receive inpatient mental health services, Medicare Part A helps pay. These services can be either in a general hospital or in a psychiatric hospital that only cares for people with mental health conditions. If you're in a psychiatric hospital, Part A only pays for up to 190 days of inpatient freestanding psychiatric hospital services during your lifetime.

### What You Will Pay...

Medicare measures your use of hospital services (including services you get in a freestanding psychiatric hospital) and skilled nursing facility (SNF) services in benefit periods. A benefit period

begins the day you're admitted as an inpatient in a hospital or in a SNF. The benefit period ends after you haven't had any inpatient hospital care or skilled care in a SNF for 60 days in a row. If you go into a hospital or SNF again after 60 days, a new benefit period begins, and you must pay a new deductible for any inpatient hospital services you get.

There is no limit to the number of benefit periods you can have for mental health care in a general hospital. You can also have multiple benefit periods when you get care in a freestanding psychiatric hospital, but there is a lifetime limit of 190 days.

## Outpatient Mental Health Services

If you receive mental health services outside of the hospital, such as in a clinic, doctor's office, or hospital outpatient department, Medicare Part B typically helps pay for the following covered services:

- Individual and group psychotherapy
- Diagnostic tests
- Family counseling if the main purpose is to help with your treatment
- Testing to make sure you're getting the services and treatment you need
- Psychiatric evaluation
- Medication management
- Occupational therapy that's part of your mental health treatment
- Certain prescription drugs that aren't usually "self administered"
- Individual patient training and education about your condition

Medicare telehealth services include office visits, psychotherapy, consultations, and certain other medical or health services that are provided by a doctor or other health care provider who's located elsewhere using interactive 2-way real-time audio and video technology.

### What You Will Pay...

After you pay your yearly Medicare Part B deductible, how much you pay for mental health services depends on whether the purpose of your visit is to diagnose your condition or to get treatment.

For outpatient treatment of your condition, you pay 20% of the Medicare-approved amount in 2024.