

Medicare and Medicaid Policies

Medicare

Regional West Health Services will bill Medicare for inpatient and outpatient services. If additional insurance information is provided at the time of service, your secondary insurance(s) will also be billed for any remaining balance after Medicare has paid.

Medicare Deductible and Coinsurance Amounts

Part A: Helps cover inpatient care (includes critical access hospitals and inpatient rehabilitation facilities)

- Hospice care services
- Home health care services
- Inpatient stays in a skilled nursing facility (not custodial or long term care)

For each benefit period, you pay:

- \$1632 (2024) deductible and no coinsurance for days 1 through 60 of a hospital stay
- \$408 (2024) per day for days 61-90 of a hospital stay
- \$816 (2024) per day for days 91-150 of a hospital stay (Lifetime Reserve Days)
- All costs for each day beyond 150 days

Skilled Nursing Facility stay you pay:

- \$0 for the first 20 days in the benefit period
- \$204 (2024) per day for days 21 through 100 each benefit period
- All costs for each day beyond 100 days

Part B: (Medical Insurance) Part B helps cover medically necessary services like doctors, outpatient care, and other medical services.

For each benefit period you pay:

- The first \$240 (2024) yearly deductible
- A co-insurance or co-payment amount that varies by service for each individual outpatient hospital service.

Nebraska Medicaid Access

Information about ACCESS (Insurance through the Department of Health and Human Services)

You may be a candidate for health insurance coverage through the State of Nebraska. For those patients who have unpaid bills for services, we direct you to contact the Department of Public Assistance for an appointment.

Patients who are ineligible for ACCESS

If you do not qualify for Nebraska Access, you may qualify for our Patient Financial Assistance program. This program was designed to assist patients who do not qualify for Nebraska Access, but who would find it very difficult to pay their hospital expenses out of their own pocket. These patients benefit from the program because there is a possibility that their bill may be reduced to a more affordable level.

If you are a working family, but do not have health insurance for your children, you may be able to enroll free or low cost health care coverage. The Nebraska Department of Health and Human Services administers CHIP. This program can cover children up until their 18th birthday. Please call 1-855-632-7633 to find out if you qualify for this benefit.