



Medicare Part A: When You Go to the Hospital

Medicare Part A is commonly called **hospital insurance**, which is accurate but incomplete. It covers inpatient hospital care as well as certain skilled nursing facility services, hospice and some home health care. The important thing to remember is that having Part A doesn't necessarily mean every service you receive in or around a hospital will be paid in full.

Inpatient Status Matters

Part A generally covers you when a hospital formally admits you as an inpatient. Your care can include a semiprivate room, meals, nursing services, medications provided during your inpatient treatment and other medically necessary hospital services.

Simply spending a night in a hospital, however, doesn't necessarily mean you've been admitted as an inpatient. You can sometimes remain under **observation status**, which is generally outpatient care covered under Part B. That distinction can affect what Medicare pays and what you owe.

Part A Has a Deductible

Unlike many private insurance plans, Medicare Part A uses a **benefit period** rather than a simple annual hospital deductible. In 2026, the inpatient hospital deductible is **\$1,736 for each benefit period**. After the deductible, Medicare pays according to a schedule that includes additional daily coinsurance for unusually long hospital stays.

Because a new benefit period can begin after you've been out of inpatient hospital or skilled nursing facility care for 60 consecutive days, it is possible to pay the Part A deductible more than once during a calendar year.

Skilled Nursing Isn't Long-Term Custodial Care

Part A can cover qualifying skilled nursing facility care following a hospital stay when Medicare's requirements are satisfied. This is short-term skilled medical or rehabilitative care—not indefinite nursing-home residence because someone can no longer live independently.

Medicare generally doesn't pay for long-term custodial care when assistance with ordinary activities such as bathing, dressing and eating is the only care required. That limitation is particularly important when families are planning for later retirement years.

Part A Also Covers Hospice

Medicare Part A provides hospice coverage for eligible terminally ill patients who elect hospice care. It can also cover certain home health services when Medicare's requirements are met.

The simple description of Part A as "hospital insurance" is therefore useful as a starting point, but not the whole story. Part A provides substantial protection against hospital expenses, yet deductibles, coinsurance, eligibility requirements and services Medicare doesn't cover can still leave expenses for the patient.