



## Medicare Deductible, Coinsurance & Premium Rates: CY 2026 Update

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<b>Effective Date:</b> January 1, 2026	<b>Related Change Request (CR) Number:</b> <a href="#">CR 14279</a>
<b>Implementation Date:</b> January 5, 2026	<b>Related CR Transmittal Number:</b> R13504GI
<b>Related CR Title:</b> Update to Medicare Deductible, Coinsurance and Premium Rates for Calendar Year (CY) 2026	

### Affected Providers

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- Physicians
- Hospitals
- Suppliers
- Other providers billing Medicare Administrative Contractors (MACs) for services

### Action Needed

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Make sure your billing staff knows about CY 2026 Medicare Part A and Medicare Part B:

- Deductibles
- Coinsurance rates
- Premiums

### Background

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#### Deductibles & Coinsurance

Patients using covered Part A and Part B services may be subject to deductible and coinsurance requirements, which is the percentage of costs the patient may pay.

During a spell of illness, a patient is responsible for an inpatient hospital deductible. Medicare subtracts the deductible amount from the amount payable to the hospital for inpatient hospital services it provides. When a patient gets such services for more than 60 days during a spell of illness, they're responsible for a coinsurance amount equal to one-fourth of the inpatient hospital deductible for each day of days 61–90 spent in the hospital. A patient has 60 lifetime reserve days of coverage, which they may use after day 90 in a spell of illness. The coinsurance amount for these days is equal to one-half of the inpatient hospital deductible.

For skilled nursing facility (SNF) services, a patient is responsible for a coinsurance amount equal to one-eighth of the inpatient hospital deductible per day for days 21–100 during a spell of illness.

## Premiums

Most people age 65 and older, and many people with a disability under age 65, have Part A benefits without a premium payment. The Social Security Act states that certain aged and people with a disability who aren't insured may voluntarily enroll, but they must pay a monthly premium. Since 1994, voluntary enrollees may qualify for a reduced premium if they have 30–39 quarters of covered employment. All enrollees are subject to a Part B monthly premium, and most Part B-covered services are subject to an annual deductible and coinsurance.

When voluntary enrollment takes place more than 12 months after a person's initial enrollment period, we add:

- A 10% penalty for twice the number of years they could enroll in Part A but didn't
- A 10% increase in the premium for each year they could enroll in Part B but didn't

## Key Updates

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We updated the [Medicare General Information, Eligibility and Entitlement Manual, Chapter 3](#), sections 10.3, 20.2, and 20.6 with the CY 2026 Part A and Part B deductible, coinsurance, and premium amounts.

### 2026 Part A — Hospital Insurance

- Part A deductible: \$1,736
- Part A coinsurance:
  - \$434 a day for days 61–90
  - \$868 a day for days 91–150 (lifetime reserve days)
  - \$217 a day for days 21–100 (SNF coinsurance)
- Part A base premium (BP): \$565 a month
- Part A BP with 10% surcharge: \$621.50 a month
- Part A BP with 45% reduction: \$311 a month (for those who have 30–39 quarters of coverage)
- Part A BP with 45% reduction and 10% surcharge: \$342.10 a month

2026 Part B — Supplementary Medical Insurance

- Part B deductible: \$283 a year
- Part B coinsurance: 20%
- Part B standard premium: \$202.90 a month
- Pro rata data amount:
  - \$191.17 first month
  - \$91.83 second month
- Part B immunosuppressive drug coverage only premium: \$121.60 a month

More Information

We issued CR 14279 to your MAC as the official instruction for this change. For more information, find your [MAC's website](#).

Document History

Date of Change	Description
December 5, 2025	Initial article released.

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