CRCS Exam Study Manual
Update for 2022

This document reflects updates made to the instructional content from the
AAHAM Certified Revenue Cycle Specialist (CRCS) Exam Study Manual 2021
to the 2022 version of the manual. This does not include updates to spelling, punctuation, the
Introduction, dates in examples, Knowledge Checks and Answers, or the Glossary.

Table of Contents
Edit(s) to page 4-5: Part A Deductibles, Coinsurance, and Copayments ..............................................................2
Edit(s) to page 4-7: Part B Deductibles, Coinsurance, and Copayments ..............................................................3
Medicare Part A

<table>
<thead>
<tr>
<th>Service</th>
<th>Beneficiary Obligation</th>
<th>2022 Amount</th>
</tr>
</thead>
</table>
| **Inpatient hospital stay** – Semi-private room, meals, general nursing, other hospital services, and supplies. This includes care in critical access hospitals, but does not include private duty nursing, television, or telephone service in the room if billed separately. It also does not include a private room, unless medically necessary. Inpatient mental healthcare in an independent psychiatric facility is limited to 190 days in a lifetime. | Days 1 through 60*:  
  - Part A current year inpatient deductible  
  *Renewable during the next benefit period | $1,556 1,484 per spell of illness |
| Days 61 through 90*:  
  - Part A coinsurance (1/4 or 25% of current year inpatient deductible)  
  *Renewable during the next benefit period | $389 371 per day |
| Days 91 through 150*:  
  - Part A lifetime reserve (LTR, 1/2 or 50% of current year inpatient deductible)  
  *Nonrenewable; hospitals alert patients when they have 5 days of coinsurance left so they can choose whether to use their LTR days | $778 742 per day |
| **SNF care** – Semi-private room, meals, skilled nursing and rehabilitative services, and other services and supplies. (Patients need three midnights as an inpatient to qualify for Medicare coverage in a SNF.) | Days 1 through 20:  
  - No deductible or coinsurance | $0 per benefit period |
| Days 21 through 100:  
  - 1/8 of current year inpatient deductible | $194.50 185.50 per day |
### Medicare Part B

<table>
<thead>
<tr>
<th>Service</th>
<th>Beneficiary Obligation</th>
<th>2022 21 Amount</th>
</tr>
</thead>
</table>
| **Medical and other services** – Doctors services (except for routine physical exams); outpatient medical and surgical services; supplies; diagnostic tests; ambulatory surgery center facility fees for approved procedures; and DME. Also covers second surgical opinions; outpatient physical, occupational, and speech therapy; and outpatient mental healthcare. | Medical and other services:  
  - Current year deductible, then coinsurance (20% of Medicare-approved amount, except in the outpatient setting) | $233 203 per year, then 20% of Medicare-approved amount |
|                                                                        | Outpatient physical, occupational, and speech-language therapy services:  
  - Coinsurance                                                      | 20% of Medicare-approved amount                                                            |
|                                                                        | Outpatient mental healthcare:  
  - Coinsurance                                                       | 20% of Medicare-approved amount                                                            |