# **Eligibility Coverage Detail Report**

TABILANGAN, REMEDIOS

Gender: F

Provider: 297068 as of 07/31/2025 Eligibility Period: 07/31/24 - 11/25/25

Patient Name: TABILANGAN, REMEDIOS

Per Medicare: TABILANGAN REMEDIOS D
Address: 11696 ROSSOVINO ST

LAS VEGAS NV 89183-5560

Beneficiary ID:6W77H89EH72 Birth Date: 11/25/1931

Previous Inquiry Date: N/A - new inquiry\*

#### **Benefit Information**

Effective Terminated Lifetime Psychiatric Days: 190 ESRD Dialysis Date:
Part A: 06/01/1997 - Lifetime Reserve Days: 60 ESRD Transplant Eff. Date:
Part B: 03/01/1998 - ESRD Coverage Period Date:

Date of Death - Smoking Cessation Days: 8 Initial Cessation Session Date:

QMB: 03/01/2015 - CA QMB Plan Beneficiary ID Crosswalk: Data not Available

Pa	rt	Δ	/B

Part A													
	Hospital Days					SNF Days		Inpatient	Deductible	Physical	Occupational	Blood Pints	
Type	First Bill	Last Bill	Full C	coins.	Base	Full C	Coins.	Base	Deductible	Remaining	Therapy	Therapy	Part A/B
BASE	01/01/2025	12/31/2025	60	30	\$ 0.00	20	80	\$ 0.00			\$ 0.00	\$ 0.00	3
BASE	01/01/2024	12/31/2024	60	30	\$ 0.00	20	80	\$ 0.00			\$ 0.00	\$ 0.00	3

### QMB

Start End Plan Description 03/01/2015 CA QMB Plan

#### **Medicare Advantage**

Effective	Terminated	Plan Code	Payer Name/Address	Plan Name/Type/Website	Phone	
01/01/2023	3 - 04/30/2025	H0504-047	CALIFORNIA PHYSICIANS' SERVICE	Blue Shield Inspire	(800) 776-4466	
Option C		Option C	6300 CANOGA AVENUE	Health Maintenance Organization (HMO) - Medicare Risk		

WOODLAND HILLS CA 91367 blueshieldca.com/medicare

www.wellcare.com/PDP

WOODLAND HILLS CA 91367

## Part D

Effective	Terminated	Plan Code	Payer Name/Address	Plan Name/Website	Phone
07/01/2025	-	S4802-094	WELLCARE PRESCRIPTION INSURANCE, INC.	Wellcare Classic	(888) 888-9355
			7700 Forsyth Blyd		

Clayton MO 63105

05/01/2025 - 06/30/2025 X0001-015 HUMANA INSURANCE COMPANY OF NEW YORK Limited Income NET Program

500 West Main Street

Louisville KY 40202 www.humana.com/LINET 01/01/2023 - 04/30/2025 H0504-047 CALIFORNIA PHYSICIANS' SERVICE Blue Shield Inspire

6300 CANOGA AVENUE

WOODLAND HILLS CA 91367 blueshieldca.com/medicare

### **Rehabilitation Sessions**

Pulmonary Remaining (G0424) Cardiac Applied (93797, 93798) Intensive Cardiac Applied (G0422, G0423)

Tech: 72 Prof: 72 Tech: 0 Prof: 0 Tech: 0 Prof: 0

**Behavioral Services** 

				Deductible	Deductible	Coinsurance
HCPCS	Description	Tech Date	Prof Date	Base	Remaining	Percent
G0444	Adult Depression Screening	10/14/2011	10/14/2011			
G0442	Alcohol Misuse Screening		10/14/2011			
G0446	Cardiovascular Disease Counseling	11/08/2011	11/08/2011			
G0447	Obesity Counseling	11/29/2011	11/29/2011			
G0473	Obesity Counseling	01/01/2015	01/01/2015			

Help Document Link

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(800) 776-4466

The information for this report was generated from a request dated 07/31/2025 02:55 PM, and is not a guarantee of coverage. Actual benefits are determined only when the claim is received by Medicare. Printed by Julia Koerber.

Caring Nurses, Inc

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TABILANGAN, REMEDIOS

Provider: 297068 as of 07/31/2025 Eligibility Period: 07/31/24 - 11/25/25

Patient Name: TABILANGAN, REMEDIOS  Behavioral Services				Benefi	ciary ID:6W7	7H89EH72	Birth Date: 11/25	Birth Date: 11/25/1931		
HCPCS	Description	-				Tech Date	Prof Date	Deductible Base	Deductible Remaining	Coinsurance Percent
G0445	STIs Screening/Counseling					11/08/2011	11/08/2011	Dase	rtemannig	
Diabete	s Preventi	on Pro	gram (	MDPP)						
Entitlement From	: To	HCPCS	Ded Coi	Date o ns Service	_	Description		Billing NPI	Name	
05/01/202	5 11/25/2025	5	0.00	0.00						

The following sections had no data available: Hospice, PPS Episodes, MSP, Home Health Certification

The following sections were suppressed: Preventive Services

<sup>\*</sup> Previous requests must be within 90 days to be used for change comparison. Requests after 90 days are considered "new."

