

Patient Name: DEAN, JAMES

Beneficiary ID: 7M68EJ8WM44

Birth Date: 02/10/1958

Gender: M

Per Medicare: DEAN JAMES A

Address: 4025 SAN DIEGO ST

N LAS VEGAS NV 89032-2809

Previous Inquiry Date: N/A - new inquiry*

Benefit Information											
Effective		Terminated	Lifetime Psychiatric Days: 190				ESRD Dialysis Date:				
Part A: 02/01/2023		-	Lifetime Reserve Days: 60				ESRD Transplant Eff. Date:				
Part B: 02/01/2023		-					ESRD Coverage Period Date:				
Date of Death		-	Smoking Cessation Days: 8				Initial Cessation Session Date:				
QMB:		-					Beneficiary ID Crosswalk: Data not Available				

Part A/B													
Part A										Part B			Blood Pints Part A/B
Type	First Bill	Last Bill	Hospital Days		Base	SNF Days		Base	Inpatient Deductible	Deductible Remaining	Physical Therapy	Occupational Therapy	
SPELL	05/15/2025 -	05/19/2025	56	30	\$ 419.00	20	80	\$ 209.50	\$0.00				
SPELL	08/28/2024 -	09/07/2024	50	30	\$ 408.00	20	80	\$ 204.00	\$0.00				
BASE	01/01/2025	12/31/2025	60	30	\$ 419.00	20	80	\$ 209.50	\$1,676.00	\$ 0.00	\$ 0.00	\$ 0.00	3
BASE	01/01/2024	12/31/2024	60	30	\$ 408.00	20	80	\$ 204.00	\$1,632.00	\$ 0.00	\$ 0.00	\$ 0.00	3

Part A/B Hospital SNF Stay					
Start Date	End Date	Type	Billing NPI	Billing Provider	
05/15/2025	05/19/2025	Hospital	1104870187	MOUNTAINVIEW HOSPITAL	
08/28/2024	09/07/2024	Hospital	1104870187	MOUNTAINVIEW HOSPITAL	

Effective	Terminated	Plan Code	Payer Name/Address	Plan Name/Website	Phone
12/01/2023	-	S4802-093	WELLCARE PRESCRIPTION INSURANCE, INC. 7700 Forsyth Blvd Clayton MO 63105	Wellcare Classic www.wellcare.com/PDP	(888) 888-9355

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							
HCPCS	Description	Tech Date	Prof Date	Deductible Base	Deductible Remaining	Coinsurance Percent	
G0444	Adult Depression Screening	02/01/2023	02/01/2023	- waived -	-	- waived -	
G0442	Alcohol Misuse Screening		02/01/2023	- waived -	-	- waived -	
G0446	Cardiovascular Disease Counseling	02/01/2023	02/01/2023	- waived -	-	- waived -	
G0447	Obesity Counseling	02/01/2023	02/01/2023	- waived -	-	- waived -	
G0473	Obesity Counseling	02/01/2023	02/01/2023	- waived -	-	- waived -	
G0445	STIs Screening/Counseling	02/01/2023	02/01/2023	- waived -	-	- waived -	

Diabetes Prevention Program (MDPP)									
Entitlement From	To	HCPCS	Ded	Coins	Date of Service	Proc	Description	Billing NPI	Name
08/01/2024	11/26/2025		0.00	0.00					

Provider: 297068 as of 08/01/2025 Eligibility Period: 08/01/24 - 11/26/25

Patient Name: DEAN, JAMES Beneficiary ID: 7M68EJ8WM44 Birth Date: 02/10/1958 Gender: M
The following sections were suppressed: Preventive Services

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

The information for this report was generated from a request dated 08/01/2025 11:01 AM, and is not a guarantee of coverage. Actual benefits are determined only when the claim is received by Medicare. Printed by VJ Farrales.

