

Patient Name: SHERMAN, SANDRA

Beneficiary ID:1VR4JJ8MG77

Birth Date: 06/03/1943

Gender:F

Per Medicare: SHERMAN SANDRA

Address: 2464 DESERT SANDS DR

LAS VEGAS NV 89134-8863

Previous Inquiry Date: N/A - new inquiry*

Benefit Information											
Effective		Terminated	Lifetime Psychiatric Days: 190				ESRD Dialysis Date:				
Part A: 06/01/2008		-	Lifetime Reserve Days: 60				ESRD Transplant Eff. Date:				
Part B: 06/01/2008		-					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			
		Hospital Days		SNF Days		Inpatient				Deductible	Physical	Occupational	Blood Pints
Type	First Bill	Last Bill	Full	Coins.	Base	Full	Coins.	Base	Deductible	Remaining	Therapy	Therapy	Part A/B
SPELL	12/05/2024 -	12/07/2024	58	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	
12/05/2024	12/07/2024	Hospital	1104870187	MOUNTAINVIEW HOSPITAL	

Effective	Terminated	Plan Code	Payer Name/Address	Plan Name/Website	Phone
01/01/2021	-	S4802-161	WELLCARE PRESCRIPTION INSURANCE, INC. 7700 Forsyth Blvd Clayton MO 63105	Wellcare Value Script go.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

Home Health Episodes							
Start Date	End Date	Earliest Billing	Latest Billing	Patient Status/Des		Interm	Provider
03/08/2025	04/06/2025	03/12/2025	03/28/2025	01	Discharged to home or self	06014	1235247792 CARING NURSES, INC.
02/06/2025	03/07/2025	02/14/2025	03/07/2025	30	Still patient	06014	1235247792 CARING NURSES, INC.
01/07/2025	02/05/2025	01/13/2025	02/05/2025	30	Still patient	06014	1235247792 CARING NURSES, INC.
12/08/2024	01/06/2025	12/08/2024	01/06/2025	30	Still patient	06014	1235247792 CARING NURSES, INC.

Behavioral Services							
HCPCS	Description	Tech Date	Prof Date	Deductible Base	Deductible Remaining	Coinsurance Percent	
G0444	Adult Depression Screening	10/14/2011	10/14/2011	- waived -	-	- waived -	
G0442	Alcohol Misuse Screening		10/14/2011	- waived -	-	- waived -	
G0446	Cardiovascular Disease Counseling	11/08/2011	11/08/2011	- waived -	-	- waived -	
G0447	Obesity Counseling	11/29/2011	11/29/2011	- waived -	-	- waived -	
G0473	Obesity Counseling	01/01/2015	01/01/2015	- waived -	-	- waived -	
G0445	STIs Screening/Counseling	11/08/2011	11/08/2011	- waived -	-	- waived -	

Provider: 297068 as of 08/05/2025 Eligibility Period: 08/05/24 - 11/30/25

Patient Name: SHERMAN, SANDRA Beneficiary ID:1VR4JJ8MG77 Birth Date: 06/03/1943 Gender:F
Diabetes Prevention Program (MDPP)

Entitlement		HCPCS	Ded	Coins	Date of Service	Proc	Description	Billing	
From	To							NPI	Name
08/05/2024	11/30/2025		0.00	0.00					

Provider Detail

1235247792
CARING NURSES, INC.
2968 E RUSSELL RD
LAS VEGAS NV 89120-2453

Immunizations

Part B Status:
Part B Date:
Part B Deductible
Part B Coinsurance

HCPCS	Description	Vaccination Date	Rendering NPI	Rendering Name
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The following sections had no data available: Hospice, Medicare Advantage, MSP, Home Health Certification
The following sections were suppressed: Preventive Services

