Eligibility Coverage Detail Report

ESRD Coverage Period Date:

ZELE, FRANK

Discrepancy: M

Provider: 297068 as of 08/08/2025 Eligibility Period: 08/08/24 - 12/03/25

Patient Name: ZELE, FRANK Beneficiary ID:9WG1P88YF28 Birth Date: 08/25/1940 Gender: F

Per Medicare: ZELE FRANK

Address: 6165 CROMWELL AVE

LAS VEGAS NV 89107-2527 Previous Inquiry Date: N/A - new inquiry*

Benefit Information

Effective Terminated Lifetime Psychiatric Days: 190 ESRD Dialysis Date:
Part A: 08/01/2005 - Lifetime Reserve Days: 60 ESRD Transplant Eff. Date:

Part B: 08/01/2005 -

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

QMB: - Beneficiary ID Crosswalk: Data not Available

Q. D. Solonou, 7 12 Grossmann Suita not mana

Part A/B

	Part A												
			Hospi	tal Day	/S	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
SPELL	06/25/2025	07/15/2025	40	30	\$ 419.00	20	80	\$ 209.50	\$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	Туре	Billing NPI	Billing Provider
06/30/2025	07/15/2025	Hospital	1063796688	MOUNTAINVIEW HOSPITAL REHAB UNIT
06/25/2025	06/30/2025	Hospital	1104870187	MOUNTAINVIEW HOSPITAL

Part D

EffectiveTerminatedPlan CodePayer Name/AddressPlan Name/WebsitePhone01/01/2025 -S5921-410UNITEDHEALTHCARE INS. CO. & UHC INS. CO. OF NY AARP Medicare Rx Preferred from UHC(866) 460-8854

185 Asylum Street

Hartford CT 061030450 AARPMedicarePlans.com

01/01/2006 - 12/31/2024 S5820-028 UNITEDHEALTHCARE INSURANCE COMPANY AARP Medicare Rx Preferred from UHC (888) 867-5575

185 Asylum Street

Hartford CT 061030450 AARPMedicarePlans.com

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:

Home Health Episodes

Start Date End Date Earliest Billing Latest Billing Patient Status/Des Interm Provider

07/21/2025 08/19/2025 NOA W/O condition code 47 06014 1750460739 DYNAMIC HOME HEALTH CARE LLC

Behavioral Services

			Deductible Deductible	Coinsurance
Description	Tech Date	Prof Date	Base Remaining	Percent
Adult Depression Screening	10/14/2011	02/01/2019	- waived -	- waived -
Alcohol Misuse Screening		10/14/2011	- waived -	- waived -
Cardiovascular Disease Counseling	11/08/2011	11/08/2011	- waived -	- waived -
Obesity Counseling	09/20/2021	09/21/2021	- waived -	- waived -
Obesity Counseling	09/20/2021	09/21/2021	- waived -	- waived -
STIs Screening/Counseling	11/08/2011	11/08/2011	- waived -	- waived -
	Adult Depression Screening Alcohol Misuse Screening Cardiovascular Disease Counseling Obesity Counseling Obesity Counseling	Adult Depression Screening 10/14/2011 Alcohol Misuse Screening Cardiovascular Disease Counseling 11/08/2011 Obesity Counseling 09/20/2021 Obesity Counseling 09/20/2021	Adult Depression Screening 10/14/2011 02/01/2019 Alcohol Misuse Screening 10/14/2011 Cardiovascular Disease Counseling 11/08/2011 11/08/2011 Obesity Counseling 09/20/2021 09/21/2021 Obesity Counseling 09/20/2021 09/21/2021	Adult Depression Screening 10/14/2011 02/01/2019 - waived - Alcohol Misuse Screening 10/14/2011 - waived - Cardiovascular Disease Counseling 11/08/2011 11/08/2011 - waived - Obesity Counseling 09/20/2021 09/21/2021 - waived - Obesity Counseling 09/20/2021 09/21/2021 - waived -

Help Document Link

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Caring Nurses, Inc

Eligibility Coverage Detail Report

ZELE, FRANK

Provider: 297068 as of 08/08/2025 Eligibility Period: 08/08/24 - 12/03/25

Patient Name: ZELE, FRANK					Beneficiary ID:9WG1P88YF28			Birth Date: 08/25/1940			Gender:F
Diabetes Prevention Program (MDPP)											
Entitlement				Date of				Billing			
From	То	HCPCS	Ded Coins	Service	Proc	Description		NPI	Name		

08/08/2024 12/03/2025 0.00 0.00

Provider Detail

1750460739 DYNAMIC HOME HEALTH CARE LLC 2865 S. JONES LAS VEGAS NV 39146

The following sections had no data available: Hospice, Medicare Advantage, MSP, Home Health Certification

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."

