

Benefit Information

Effective	Terminated	Lifetime Psychiatric Days: 190	ESRD Dialysis Date:
Part A: 09/01/1997 -		Lifetime Reserve Days: 60	ESRD Transplant Eff. Date:
Part B: 10/01/1997 -			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		SNF Days		Inpatient		Deductible	Physical	Occupational		
			Full	Coins.	Base	Full	Coins.	Base	Deductible	Remaining	Therapy	Therapy	
SPELL	12/26/2024 -	12/28/2024	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
12/26/2024	12/28/2024	Hospital	1770626426	ST. ROSE DOMINICAN HOSPITAL, SIENA CAMPUS

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
02/01/2025	03/02/2025	02/06/2025	02/27/2025	01	Discharged to home or self	06014	1295129559 ENCOMPASS HOME HEALTH OF NEV.
01/02/2025	01/31/2025	01/02/2025	01/31/2025	30	Still patient	06014	1295129559 ENCOMPASS HOME HEALTH OF NEV.

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 -

Diabetes Prevention Program (MDPP)

Entitlement From	To	HCPCS	Ded	Coins	Date of Service	Proc	Description	Billing NPI	Name
08/14/2024	12/09/2025		0.00	0.00					

Provider Detail

1295129559
ENCOMPASS HOME HEALTH OF NEVADA
8905 S PECOS RD STE 24A
HENDERSON NV 89074

Provider: 297068 as of 08/14/2025 Eligibility Period: 08/14/24 - 12/09/25

Patient Name: INOUE, MARIO Beneficiary ID:3RH1V72AF00 Birth Date: 09/05/1932 Gender:F

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, Part D, 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."

The information for this report was generated from a request dated 08/14/2025 01:51 PM, and is not a guarantee of coverage. Actual benefits are determined only when the claim is received by Medicare. Printed by Julia Koerber.

