

Patient Name: AMUNDSON, RITA

Beneficiary ID:3NJ0V09AQ18

Birth Date: 12/19/1929

Gender:F

Per Medicare: AMUNDSON RITA M

Address: 2147 BENSLEY ST

HENDERSON NV 89044-0156

Previous Inquiry Date: N/A - new inquiry*

Benefit Information											
Effective		Terminated	Lifetime Psychiatric Days: 190				ESRD Dialysis Date:				
Part A: 12/01/1994		-	Lifetime Reserve Days: 60				ESRD Transplant Eff. Date:				
Part B: 12/01/1994		-					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			
Type	First Bill	Last Bill	Hospital Days		SNF Days		Inpatient		Deductible	Physical	Occupational	Blood Pints	
			Full	Coins.	Base	Full	Coins.	Base	Deductible	Remaining	Therapy	Therapy	Part A/B
SPELL	07/07/2025 -	07/18/2025	55	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	Type	Billing NPI	Billing Provider	
07/15/2025	07/18/2025	Hospital	1538566765	MIDMICHIGAN MEDICAL CENTER-WEST BRANCH	
07/07/2025	07/09/2025	Hospital	1902841414	MIDMICHIGAN MEDICAL CENTER-MIDLAND	

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 Certification							
Process Date	Is Recert?	Process Date	Is Recert?	Process Date	Is Recert?	Process Date	Is Recert?
05/02/2022	N						

Home Health Episodes						
Start Date	End Date	Earliest Billing	Latest Billing	Patient Status/Des	Interm	Provider
07/11/2025	08/09/2025			NOA W/O condition code 47	06001	1083341168

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		Date of		Billing					
From	To	HCPCS	Ded Coins	Service	Proc	Description	NPI	Name	
08/18/2024	12/13/2025		0.00 0.00						

Provider: 297068 as of 08/18/2025 Eligibility Period: 08/18/24 - 12/13/25

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Provider Detail			

1083341168
Provider detail not available.

The following sections had no data available: Hospice, Medicare Advantage, MSP, Part D
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 08/18/2025 05:46 PM, and is not a guarantee of coverage. Actual benefits are determined only when the claim is received by Medicare. Printed by Julia Koerber.

