

Patient Name: GUDEWICZ, LINDA
Per Medicare: GUDEWICZ LINDA L
Address: 7901 HIGH STREAM AVE
LAS VEGAS NV 89131-3551

Beneficiary ID: 7YR5J96DD83

Birth Date: 01/21/1945

Gender: F

Previous Inquiry Date: 09/03/2025

Benefit Information

Effective
Part A: 01/01/2010 -
Part B: 01/01/2010 -
Date of Death -
QMB: -

Terminated

Lifetime Psychiatric Days: 190
Lifetime Reserve Days: 60
Smoking Cessation Days: 8

ESRD Dialysis Date:
ESRD Transplant Eff. Date:
ESRD Coverage Period Date:
Initial Cessation Session Date:
Beneficiary ID Crosswalk: Data not Available

Part A/B

Part A										Part B			
		Hospital Days				SNF Days				Inpatient			
Type	First Bill	Last Bill	Full	Coins.	Base	Full	Coins.	Base	Deductible	Deductible	Physical	Occupational	Blood Pints
										Remaining	Therapy	Therapy	Part A/B
SPELL	08/22/2025 -	08/24/2025	58	30	\$ 419.00	20	80	\$ 209.50	\$0.00				
SPELL	04/06/2025 -	04/13/2025	56	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
08/22/2025	08/24/2025	Hospital	1487771812	CENTENNIAL HILLS HOSPITAL MEDICAL CENTER
04/11/2025	04/13/2025	Hospital	1487771812	CENTENNIAL HILLS HOSPITAL MEDICAL CENTER
04/06/2025	04/08/2025	Hospital	1487771812	CENTENNIAL HILLS HOSPITAL MEDICAL CENTER

Rehabilitation Sessions

Pulmonary Remaining (G0424)
Tech: 72 Prof: 72

Cardiac Applied (93797, 93798)
Tech: 0 Prof: 0

Intensive Cardiac Applied (G0422, G0423)
Tech: 0 Prof: 0

Home Health Episodes

Start Date	End Date	Earliest Billing	Latest Billing	Patient Status/Des	Interm	Provider
05/16/2025	06/14/2025	05/20/2025	06/12/2025	01 Discharged to home or self	06014	1104014794 CARE FIRST HOME CARE, LLC
04/16/2025	05/15/2025	04/16/2025	05/15/2025	30 Still patient	06014	1104014794 CARE FIRST HOME CARE, LLC
11/27/2024	12/26/2024			NOA W/O condition code 47	15004	1386643054 KINDRED AT HOME

Behavioral Services

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

Diabetes Prevention Program (MDPP)

Entitlement					Date of			Billing	
From	To	HCPCS	Ded	Coins	Service	Proc	Description	NPI	Name
09/04/2024	12/30/2025		0.00	0.00					

Provider: 297068 as of 09/04/2025 Eligibility Period: 09/04/24 - 12/30/25

Patient Name: GUDEWICZ, LINDA Beneficiary ID: 7YR5J96DD83 Birth Date: 01/21/1945 Gender: F

Provider Detail

1104014794	1386643054
CARE FIRST HOME CARE, LLC	KINDRED AT HOME
9315 W SUNSET RD. #101	9121 W RUSSELL RD STE 118
LAS VEGAS NV 89148	LAS VEGAS NV 89148

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