

Patient Name: NGUYEN, MATHEW

Beneficiary ID: 2JX5A85EN97

Birth Date: 01/07/1950

Gender: M

Per Medicare: NGUYEN MATHEW

Address: 511 BLACKBIRD KNOLL CT

N LAS VEGAS NV 89084-1313

Previous Inquiry Date: 09/04/2025

Benefit Information											
Effective	Terminated	Lifetime Psychiatric Days: 190				ESRD Dialysis Date:					
Part A: 04/01/2017	-	Lifetime Reserve Days: 60				ESRD Transplant Eff. Date:					
Part B: 01/01/2015	-					ESRD Coverage Period Date:					
Date of Death	-	Smoking Cessation Days: 8				Initial Cessation Session Date:					
QMB: 03/01/2024	-	- NV QMB Plan				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		Base	SNF Days		Inpatient	Deductible	Physical	Occupational	
			Full	Coins.		Full	Coins.	Base	Deductible	Remaining	Therapy	Therapy
SPELL	08/16/2025 -	08/17/2025	59	30	\$ 0.00	20	80	\$ 0.00				
SPELL	09/20/2024 -	09/22/2024	58	30	\$ 0.00	20	80	\$ 0.00				
BASE	01/01/2025	12/31/2025	60	30	\$ 0.00	20	80	\$ 0.00			\$ 0.00	\$ 0.00
BASE	03/01/2024	12/31/2024	60	30	\$ 0.00	20	80	\$ 0.00		\$ 0.00	\$ 0.00	\$ 0.00
BASE	01/01/2024	02/29/2024	60	30	\$ 408.00	20	80	\$ 204.00	\$ 1,632.00	\$ 0.00	\$ 0.00	\$ 0.00

Part A/B Hospital SNF Stay					
Start Date	End Date	Type	Billing NPI	Billing Provider	
08/16/2025	08/17/2025	Hospital	1487771812	CENTENNIAL HILLS HOSPITAL MEDICAL CENTER	
09/20/2024	09/22/2024	Hospital	1487771812	CENTENNIAL HILLS HOSPITAL MEDICAL CENTER	

QMB		
Start	End	Plan Description
03/01/2024		NV QMB Plan

Part D					
Effective	Terminated	Plan Code	Payer Name/Address	Plan Name/Website	Phone
07/01/2016	-	S5884-112	HUMANA INSURANCE COMPANY 1100 Employers Boulevard De Pere WI 54115	Humana Basic Rx Plan www.humana.com/medicare	(800) 448-6262

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?
09/23/2024	N	06/02/2024	N	04/02/2024	N		
07/01/2024	N	05/02/2024	N				

Home Health Episodes							
Start Date	End Date	Earliest Billing	Latest Billing	Patient Status/Des	Interm	Provider	
10/23/2024	11/21/2024	10/25/2024	11/05/2024	01 Discharged to home or self	06014	1366442345	THE VALLEY HEALTH HOME CARE
09/23/2024	10/22/2024	09/23/2024	10/22/2024	30 Still patient	06014	1366442345	THE VALLEY HEALTH HOME CARE
09/19/2024	09/19/2024	09/19/2024	09/19/2024	06 Discharged or transferred to	15004	1386643054	KINDRED AT HOME

Behavioral Services											
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Behavioral Services

HCPCS	Description	Tech Date	Prof Date	Deductible Base	Deductible Remaining	Coinsurance Percent
G0444	Adult Depression Screening	01/01/2015	01/01/2015			
G0442	Alcohol Misuse Screening		01/01/2015			
G0446	Cardiovascular Disease Counseling	01/01/2015	01/01/2015			
G0447	Obesity Counseling	01/01/2015	01/01/2015			
G0473	Obesity Counseling	01/01/2015	01/01/2015			
G0445	STIs Screening/Counseling	01/01/2015	01/01/2015			

Diabetes Prevention Program (MDPP)

Entitlement From	To	HCPCS	Ded	Coins	Date of Service	Proc	Description	Billing NPI	Name
09/05/2024	12/31/2025		0.00	0.00					

Provider Detail

1366442345	1386643054
THE VALLEY HEALTH HOME CARE	KINDRED AT HOME
5010 S DECATUR BLVD STE A	9121 W RUSSELL RD STE 118
LAS VEGAS NV 89118-4935	LAS VEGAS NV 89148

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

The following sections were suppressed: Preventive Services