## **Eligibility Coverage Detail Report**

LUCEY, JAMES

Provider: 297068 as of 09/25/2025 Eligibility Period: 09/25/24 - 01/20/26

Patient Name: LUCEY, JAMES Beneficiary ID: 5ND5HA0DN81 Birth Date: 08/31/1937 Gender: M

Per Medicare: LUCEY JAMES W
Address: 3135 SENTIMENTAL CT

NORTH LAS VEGAS NV 89031-3531 Previous Inquiry Date: N/A - new inquiry\*

**Benefit Information** 

Effective Terminated Lifetime Psychiatric Days: 190 ESRD Dialysis Date:
Part A: 08/01/2002 - Lifetime Reserve Days: 60 ESRD Transplant Eff. Date:
Part B: 08/01/2002 - 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			
		Hospital Days				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
BASE	01/01/2025	12/31/2025	60	30	\$ 419.00	20	80	\$ 209.50	\$1,676.00	\$ 0.00	\$ 399.32	\$ 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

#### **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 Hea	lth E	pisodes
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Start Date	End Date	Earliest Billing	Latest Billing	Patie	ent Status/Des	Interm	Provider	
05/05/2025	06/03/2025	05/09/2025	05/21/2025	01	Discharged to	home or self06014	1124577127	EXECUTIVE CARE HOME HEALTH
04/05/2025	05/04/2025	04/12/2025	05/04/2025	30	Still patient	06014	1124577127	EXECUTIVE CARE HOME HEALTH
03/06/2025	04/04/2025	03/07/2025	04/04/2025	30	Still patient	06014	1124577127	EXECUTIVE CARE HOME HEALTH
02/04/2025	03/05/2025	02/04/2025	03/05/2025	30	Still patient	06014	1124577127	EXECUTIVE CARE HOME HEALTH

## **Behavioral Services**

				Deductible Deductible	Coinsurance
HCPCS	Description	Tech Date	Prof Date	Base Remaining	Percent
G0444	Adult Depression Screening	10/14/2011	10/01/2022	- 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	01/27/2022	- waived -	- waived -
G0473	Obesity Counseling	01/01/2015	01/27/2022	- waived -	- waived -
G0445	STIs Screening/Counseling	11/08/2011	11/08/2011	- waived -	- waived -

## **Diabetes Prevention Program (MDPP)**

Entitlement			Date of				Billing	Billing		
From	To	HCPCS	Ded Coins	Service	Proc	Description		NPI	Name	

09/25/2024 01/20/2026 0.00 0.00

#### **Provider Detail**

1124577127 EXECUTIVE CARE HOME HEALTH 1771 E FLAMINGO RD SUITE 119B LAS VEGAS NV 89119-5155

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

Help Document Link

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Caring Nurses, Inc

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The following sections were suppressed: Preventive Services

<sup>\*</sup> Previous requests must be within 90 days to be used for change comparison. Requests after 90 days are considered "new."

