

Provider: 297068

as of 01/28/2026

Eligibility Period: 01/28/25 - 05/25/26

Patient Name: KENNIS, JAY Beneficiary ID: 7D10DP8GX90 Birth Date: 05/03/1951 Gender: M
 Per Medicare: KENNIS JAY R
 Address: 14 NORTHGATE
 GOSHEN NY 10924-5716 Previous Inquiry Date: N/A - new inquiry*

Benefit Information

Effective Terminated Lifetime Psychiatric Days: 190 ESRD Dialysis Date:
 Part A: 05/01/2016 - Lifetime Reserve Days: 60 ESRD Transplant Eff. Date:
 Part B: 05/01/2016 - 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

Type	First Bill	Last Bill	Part A				Part B			Blood Pints Part A/B			
			Hospital Days		SNF Days		Inpatient	Deductible	Physical		Occupational		
			Full	Coins.	Base	Full	Coins.	Base	Deductible	Therapy	Therapy		
BASE	01/01/2026	12/31/2026	60	30	\$ 434.00	20	80	\$ 217.00	\$1,736.00	\$ 0.00	\$ 0.00	\$ 0.00	3
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

Part D

Effective	Terminated	Plan Code	Payer Name/Address	Plan Name/Website	Phone
02/01/2018 -		S5921-382	UNITEDHEALTHCARE INS. CO. & UHC INS. CO. OF NY 185 Asylum Street Hartford CT 061030450	AARP Medicare Rx Preferred from UHC AARPMedicarePlans.com	(866) 460-8854

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

Behavioral Services

HCPCS	Description	Tech Date	Prof Date	Deductible Base	Deductible Remaining	Coinsurance Percent
G0444	Adult Depression Screening	05/01/2016	10/01/2021	- waived -	-	- waived -
G0442	Alcohol Misuse Screening		05/01/2016	- waived -	-	- waived -
G0446	Cardiovascular Disease Counseling	05/01/2016	05/01/2016	- waived -	-	- waived -
G0447	Obesity Counseling	05/01/2016	05/01/2016	- waived -	-	- waived -
G0473	Obesity Counseling	05/01/2016	05/01/2016	- waived -	-	- waived -
G0445	STIs Screening/Counseling	05/01/2016	05/01/2016	- waived -	-	- waived -

Diabetes Prevention Program (MDPP)

Entitlement From	To	HCPCS	Ded	Coins	Date of Service	Proc	Description	Billing NPI	Name
01/28/2025	05/25/2026		0.00	0.00					

Immunizations

Part B Status:
 Part B Date:
 Part B Deductible
 Part B Coinsurance

HCPCS	Description	Vaccination Date	Rendering NPI	Rendering Name
-------	-------------	------------------	---------------	----------------

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

Patient Name: KENNIS, JAY

Beneficiary ID: 7D10DP8GX90

Birth Date: 05/03/1951

Gender: M

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."

[Help Document Link](#)

Page 2 of 2

The information for this report was generated from a request dated 01/28/2026 04:17 PM, and is not a guarantee of coverage. Actual benefits are determined only when the claim is received by Medicare. Printed by Cassidy Cortez.

