

Patient Name: MENELEY, JEAN

Beneficiary ID:1C01NR9JM90

Birth Date: 06/20/1937

Gender:F

Per Medicare: MENELEY JEAN W

Address: 1701 DOUBLE ARROW PL

LAS VEGAS NV 89128-8227

Previous Inquiry Date: N/A - new inquiry*

Benefit Information											
Effective	Terminated	Lifetime Psychiatric Days: 190				ESRD Dialysis Date:					
Part A: 06/01/2002 -		Lifetime Reserve Days: 60				ESRD Transplant Eff. Date:					
Part B: 06/01/2004 -						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
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
01/01/2018 -		S5884-175	HUMANA INSURANCE CO. & HUMANA INSURANCE CO.				Humana Premier Rx Plan				(800) 448-6262
			1100 Employers Boulevard				www.humana.com/medicare				
			De Pere WI 54115								

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	Deductible	Coinsurance		
							Base	Remaining	Percent		
G0444	Adult Depression Screening				10/14/2011	11/01/2024	- waived -	-	- waived -		
G0443	Alcohol Misuse Counseling					11/29/2023	- waived -	-	- waived -		
G0442	Alcohol Misuse Screening					11/01/2024	- 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 -		

MSP											
Effective	Terminated	Policy / Group #		Insurer				Type			
07/05/2017 -		000		CSAA INSURANCE EXCHANGE				Other or Additional Payor			
				MAILSTOP W280 3055 OAK RD				14 - Medicare Secondary, No-fault Insurance			
				WALNUT CREEK CA 945972098				including Auto is Primary			
Last Maintenance:		11/03/2017									
Diagnosis Codes		ORM - Y									
Source Code:		Source Code- 22-11122-MIR Non-Group Health Plan									
Patient Relation:		Patient Relationship- 01-Patient is insured									

Diabetes Prevention Program (MDPP)											
Entitlement											
From	To	HCPCS	Ded	Coins	Date of Service	Proc	Description	Billing NPI	Name		
01/29/2025	05/26/2026		0.00	0.00							

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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, PPS Episodes, Medicare Advantage, Home Health Certification
The following sections were suppressed: Preventive Services

The information for this report was generated from a request dated 01/29/2026 06:41 PM, and is not a guarantee of coverage. Actual benefits are determined only when the claim is received by Medicare. Printed by Cassidy Cortez.