

Patient Name: MYERS, JAMES

Beneficiary ID: 7R95GK3NH93

Birth Date: 02/20/1947

Gender: M

Per Medicare: MYERS JAMES H

Address: 88 MOREY PARK RD

NASSAU NY 12123-3104

Previous Inquiry Date: 03/22/2024

Benefit Information											
Effective			Terminated			Lifetime Psychiatric Days: 190			ESRD Dialysis Date:		
Part A: 07/01/1999			-			Lifetime Reserve Days: 60			ESRD Transplant Eff. Date:		
Part B: 07/01/2010			-						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			Blood Pints Part A/B
Type	First Bill	Last Bill	Hospital Days		SNF Days		Inpatient		Deductible	Physical	Occupational		
			Full	Coins.	Base	Full	Coins.	Base	Deductible	Remaining	Therapy	Therapy	
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
BASE	01/01/2023	12/31/2023	60	30	\$ 400.00	20	80	\$ 200.00	\$1,600.00	\$ 0.00	\$ 0.00	\$ 0.00	3

Effective	Terminated	Plan Code	Payer Name/Address	Plan Name/Type/Website	Phone
01/01/2024	-	H5521-461	AETNA LIFE INSURANCE COMPANY	Aetna Medicare Longevity Plan	(800) 624-0756
		Option C	151 Farmington Avenue	Preferred Provider Organization (PPO)	
			Hartford CT 06156	www.aetnamedicare.com	
11/01/2020	- 12/31/2023	H2292-001	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE	UHC Nursing Home Plan NY-F001	(952) 912-6668
		Option C	9800 Health Care Lane	Preferred Provider Organization (PPO)	
			Minnetonka MN 55343	UHC.com/Medicare	

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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				10/14/2011	10/14/2011	- 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	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		

Preventive Services											
HCPCS	Description				Tech Date	Prof Date	Deductible Base	Deductible Remaining	Coinsurance Percent		

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HCPCS	Description	Tech Date	Prof Date	Deductible		Coinsurance Percent
				Base	Remaining	
G0472	Adults (HCV) Screening	06/02/2014	06/02/2014	- waived -	-	- waived -
G0438	Annual Wellness Visit		07/01/2011	- waived -	-	- waived -
G0439	Annual Wellness Visit		07/01/2011	- waived -	-	- waived -
80061	Cardiovascular Disease Screening	07/01/2010	07/01/2010	- waived -	-	- waived -
82465	Cardiovascular Disease Screening	07/01/2010	07/01/2010	- waived -	-	- waived -
83718	Cardiovascular Disease Screening	07/01/2010	07/01/2010	- waived -	-	- waived -
84478	Cardiovascular Disease Screening	07/01/2010	07/01/2010	- waived -	-	- waived -
81528	Colorectal Cancer Screening	10/09/2014		- waived -	-	- waived -
G0104	Colorectal Cancer Screening	07/01/2010	07/01/2010	- waived -	-	- waived -
G0105	Colorectal Cancer Screening	07/01/2010	07/01/2010	- waived -	-	- waived -
G0106	Colorectal Cancer Screening	07/01/2010	07/01/2010	- waived -	-	20%
G0120	Colorectal Cancer Screening	07/01/2010	07/01/2010	- waived -	-	20%
G0121	Colorectal Cancer Screening	07/01/2010	07/01/2010	- waived -	-	- waived -
77078	CT Bone Density, Axial	07/01/2010	07/01/2010	- waived -	-	- waived -
82947	Diabetes Screening	07/01/2010	07/01/2010	- waived -	-	- waived -
82950	Diabetes Screening	07/01/2010	07/01/2010	- waived -	-	- waived -
82951	Diabetes Screening	07/01/2010	07/01/2010	- waived -	-	- waived -
77080	DXA Bone Density, Axial	07/01/2010	07/01/2010	- waived -	-	- waived -
77081	DXA Bone Density/Peripheral	07/01/2010	07/01/2010	- waived -	-	- waived -
82270	Fecal Occult Blood Test	07/01/2010	07/01/2010	- waived -	-	- waived -
G0328	Fecal Occult Blood Test	07/01/2010	07/01/2010	- waived -	-	- waived -
G0117	Glaucoma Screening	07/01/2010	07/01/2010	\$ 240.00		20%
G0118	Glaucoma Screening	07/01/2010	07/01/2010	\$ 240.00		20%
G0499	Infection (Hepatitis B) Screening	09/28/2016	09/28/2016	- waived -	-	- waived -
G0475	Infection (HIV) Screening	04/13/2015		- waived -	-	- waived -
G0102	Prostate Cancer Screening	07/01/2010	07/01/2010	\$ 240.00		20%
G0103	Prostate Cancer Screening	07/01/2010	07/01/2010	- waived -	-	- waived -
76977	US Bone Density Measure	07/01/2010	07/01/2010	- waived -	-	- waived -

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, MSP, Home Health Certification