



Eligibility Verification Details 11/16/2022 to 11/16/2022

Verification Response ID 22320VC285 - 11/16/2022

If the Eligibility details below are not correct, please use the secure message service to send an email to Customer Service.

Once a member has met spenddown, no data will appear in the spenddown section. Remaining patient liability, if more than zero, is displayed. Claims data for members assigned to an MCO will be updated upon receipt from the MCO. To ensure you receive the most up to date information for members with both a KanCare MCO assignment and Lockin status, contact the assigned MCO.

Member Information

Member ID	Medicare ID	
00103365339		
Last Name	First Name	Middle Name
WOODS	CAYDEN	C
Birth Date	Date of Death	Gender
10/1/2012		Male

Benefit

Coverage	Effective Date	End Date	Base Deductible
TITLE XXI (CHIP)	11/16/2022	11/16/2022	

Copayment

Beneficiary is responsible for copayment. The copayment information is applicable if the member is not assigned to a KanCare MCO, or the service is not covered by the KanCare MCO.

Service Type Code Details - Covered

Service Type Code	Description	Effective Date	End Date	Copay	Coinsurance	In Plan Network
30	Health Benefit Plan Coverage	11/16/2022	11/16/2022	\$0.00	0.00 %	Yes

Service Type Code Details - Non Covered

Service Type Code	Description	Effective Date	End Date	In Plan Network
1	Medical Care	11/16/2022	11/16/2022	Yes
33	Chiropractic	11/16/2022	11/16/2022	Yes
35	Dental Care	11/16/2022	11/16/2022	Yes
47	Hospital	11/16/2022	11/16/2022	Yes
48	Hospital - Inpatient	11/16/2022	11/16/2022	Yes
50	Hospital - Outpatient	11/16/2022	11/16/2022	Yes
86	Emergency Services	11/16/2022	11/16/2022	Yes
88	Pharmacy	11/16/2022	11/16/2022	Yes
98	Professional (Physician) Visit - Office	11/16/2022	11/16/2022	Yes
AL	Vision (Optometry)	11/16/2022	11/16/2022	Yes
MH	Mental Health	11/16/2022	11/16/2022	Yes
UC	Urgent Care	11/16/2022	11/16/2022	Yes
1	Medical Care	11/16/2022	11/16/2022	No
33	Chiropractic	11/16/2022	11/16/2022	No
35	Dental Care	11/16/2022	11/16/2022	No
47	Hospital	11/16/2022	11/16/2022	No
48	Hospital - Inpatient	11/16/2022	11/16/2022	No
50	Hospital - Outpatient	11/16/2022	11/16/2022	No
86	Emergency Services	11/16/2022	11/16/2022	No
88	Pharmacy	11/16/2022	11/16/2022	No
98	Professional (Physician) Visit - Office	11/16/2022	11/16/2022	No
AL	Vision (Optometry)	11/16/2022	11/16/2022	No
MH	Mental Health	11/16/2022	11/16/2022	No
UC	Urgent Care	11/16/2022	11/16/2022	No

#### Managed Care Assignment

Service Type	Health Plan	Health Plan Phone	Primary Care Provider	Provider Phone	Effective Date	End Date
	KANCARE21	877-644-4623	SUNFLOWER HEALTH PLAN		11/16/2022	11/16/2022

#### EPSDT Well Child Service

Service Type	Last Exam Date	Next Exam Date
Routine Physical	4/4/2022	4/4/2023
Routine (Preventive) Dental	4/4/2022	4/4/2023
Routine Exam (Use for Routine Vision Exam only.)	4/4/2022	4/4/2024
Audiology Exam	4/4/2022	4/4/2025