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Insurance handbook for the medical office

Medical Office Policy and Procedure Manual
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M-1 This handbook is the Summary Plan Description (SPD) for the ConocoPhillips health and welfare plans. Additionally if you are enrolled in a plan that's insured and provides you an insurance contract and Certificate of Coverage, that insurance contract and the Certificate of Coverage will be considered a part of the SPD for that insured plan.

Employee Benefits HANDBOOK - ConocoPhillips
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WORKBOOK FOR INSURANCE HANDBOOK FOR THE MEDICAL OFFICE, 10th Edition is an essential learning resource that will enhance and improve your study of Fordney's Insurance Handbook for the Medical Office.

A complete guide to insurance billing and coding, Insurance Handbook for the Medical Office, 13th Edition covers all the plans that are most commonly encountered in clinics and physicians' offices. Its emphasis on the role of the medical insurance specialist

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includes areas such as diagnostic coding, procedural coding, Medicare, HIPAA, and bill collection strategies. Learning to fill in the claim form accurately is made easier by the use of icons for different types of payers, lists of key abbreviations, and numerous practice exercises. This edition provides the latest on hot topics such as ICD-10, healthcare reform, the new CMS-1500 form, and electronic claims. Trusted for more than 30 years, this proven reference from Marilyn Fordney prepares you to succeed as a medical insurance professional in any outpatient setting. Emphasis on the business

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of running a medical office highlights the importance of the medical insurance specialist in filing clean claims, solving problems, and collecting overdue payments. Key terms and key abbreviations are defined and emphasized, reinforcing your understanding of new concepts and terminology. Detailed tables, boxes, and illustrations call out key points and main ideas. Unique! Color-coded icons clarify information, rules, and regulations for different payers. An Evolve companion website enhances learning with performance checklists, self-assessment quizzes, and the

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(PQRS) Incentive Program, Meaningful Use, and CPT 2013. Updated ICD-10 coding information prepares you for the October 2014 ICD-10 implementation date. Updated content on claim forms includes block-by-block explanations and examples for the new CMS-1500 Claim Form. Updated guidelines for the filing and submission of electronic claims include sample screenshots and prepare you for the future of the medical office.

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in accurately filling out claim forms. This new edition also features expanded coverage of ICD-10, electronic medical records, electronic claims submission, and the HIPAA 5010 keeping you one step ahead of the latest practices and protocols of the profession. Key terms are defined and emphasized throughout the text to reinforce understanding of new concepts and terminology. Separate chapter on HIPAA Compliance in Insurance Billing, as well as Compliance Alerts throughout the text highlights important HIPAA compliance issues to ensure readers are compliant with the latest regulations. Emphasis on the business

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of running a medical office and the importance of the medical insurance specialist details the importance of the medical insurance specialist in the business of the medical office. Increased focus on electronic filing/claims submission prepares readers for the industry-wide transition to electronic claims submission. Separate chapter on documentation in the medical office covers the principles of medical documentation and the rationales for it. "Service to Patient" features in most chapters offer examples of good customer service. User resources on the Evolve companion website feature performance

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INSURANCE HANDBOOK FOR THE MEDICAL OFFICE is a key text for medical administrative assisting, medical front office programs, or those who wish to become insurance billing specialists, claims assistance professionals, or electronic claims processors for physicians' practices and hospital outpatient clinics. Those already practicing in this area will also find this text beneficial, as will health claims examiner programs. The goal of this extremely up-to-date text is to increase efficiency and streamline administrative procedures for the most exasperating aspect of the doctor's office

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edition of the Fordney text is full colour (and is the first text in this discipline to use this format). This full-color format will help the students identify each insurance payer with a specific color and icon, thus making the learning process more effective. The text has been updated to reflect recent changes in procedural coding for government programs and the private sector. Also in this edition, the text has been completely rewritten by the author to emphasize procedural (CPT and HCPCS) and diagnostic (ICD-9-CM) coding and documentation which are the keystones to obtaining maximum

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Trusted by medical insurance specialists for more than 30 years, Insurance Handbook for the Medical Office helps you excel at all aspects of insurance billing for a full range of today's health care plans. This edition helps you keep pace with industry changes, featuring the latest information on HIPAA regulations, diagnostic coding, procedural coding, office and insurance collection strategies, Medicare, and more. The accompanying Student Workbook with CD-ROM (sold separately) lets you practice "real

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world" billing with patient simulations using Altapoint and the Student Software Challenge. Procedural (CPT and HCPCS) and diagnostic (ICD-9-CM) coding and documentation are emphasized, since they are the keystones to obtaining maximum reimbursement. Key terms are bolded at first mention, explained within the context of the discussion, and defined in the glossary. Separate chapters on Electronic Data Interchange and HIPAA Compliance and Privacy in Insurance Billing provide essential knowledge of electronic claims filing, informing you of submission guidelines used in the majority of medical

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offices today. Icons clearly identify each insurance payer with a specific color and graphic, making specific information easy to locate. Compliance features located at appropriate points throughout most chapters offer tips to ensure compliance with correct billing and coding practice, particularly HIPAA and OIG. A separate chapter on documentation in the medical office describes how proper documentation can prevent penalties and refund requests, and help you prove compliance in the case of an audit or review. Detailed examples and samples of completed insurance forms show you how to

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apply knowledge in the real world. Emphasis on the business of running a medical office highlights the importance of the medical insurance specialist's role in filing clean claims, solving problems that do occur, and collecting overdue payments. Service to Patient feature throughout the chapters focuses on ways to provide quality service to the patient as well as your co-workers. All content has been reviewed by industry experts and meticulously updated to reflect recent changes in insurance claim filing. In addition to the list of key terms at the beginning of each chapter, a separate list of

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key abbreviations clarifies common terms identified in the field primarily by their abbreviations. Key points at the end of each chapter briefly summarize important chapter content to help you better understand the subject matter.

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and Workbook for Insurance Handbook for the Medical Office by Marilyn Fordney. For further information on each individual product, please click on the links provided below.

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this edition includes all the new regulations, such as the latest information on HIPAA, diagnostic coding, procedural coding, bill collection strategies, and Medicare. Meticulously reviewed by a panel of industry experts. Emphasis on the business of running a medical office highlights the importance of the medical insurance specialist's role in filing clean claims, solving problems, and collecting overdue payments. Key terms are bolded at first mention, explained within the context of the discussion, and defined in the glossary. Key points summarize important chapter content.

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Block-by-block explanations and examples demonstrate the correct way to complete the CMS-1500 claim form. Completed sample insurance forms apply concepts to real life. Unique payer icons clarify CMS claim form completion. Form icons and Computer icons ease the transition from paper to electronic filing. Special HIPAA Alerts ensure compliance with governmental privacy regulations. Guidelines for the filing and submission of electronic claims include the do's and don'ts for the electronic environment. Service to Patient features discuss ways to provide quality service to

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