



Horizon Blue Cross Blue Shield of New Jersey

Home Health Revenue Code to HCPCS Code Crosswalk

The chart below provides a detailed crosswalk for corresponding revenue codes and HCPCS codes when obtaining home health service authorizations through Horizon Blue Cross Blue Shield of New Jersey's online Utilization Management Request Tool (CareAffirm).

Facility claim form (UB-04)	Revenue Code	HCPCS Code	Unit
Registered Nurse (RN)	551	S9123	1= visit
Licensed Practical Nurse (LPN)	551	S9124	1= visit
Physical Therapy	421	S9131	1= visit
Occupational Therapy	431	S9129	1= visit
Speech Therapy	441	S9128	1= visit
Medical Social Worker	551	S9127	1= visit
Certified Home Health Aid (CHHA)	571	S9122	1= visit
CHHA	572	S9122	1= hour
Registered Dietitian	580	S9470	1= visit
Professional claim form (CMS-1500)	Revenue Code	HCPCS Code	Unit
Private Duty Nursing - RN	Not Applicable	S9123 ¹	1= hour
Private Duty Nursing - LPN	Not Applicable	S9124 ¹	1= hour

¹For Private Duty Nursing, please use HCPCS codes billable on a CMS-1500.

(Continued)

Revenue Code Hcpcs Crosswalk

Jill Giddens

A red circular graphic with a gradient, appearing as a partial circle or a thick arc, located to the right of the name bar.

Revenue Code Hcpcs Crosswalk:

Federal Register ,2013-12 **Medicare Hospital Manual** ,1989 **Medicare and Medicaid Guide** ,1969

Insurance Handbook for the Medical Office Marilyn Fordney,2015-11-26 Stay up on the latest in insurance billing and coding with Marilyn Fordney s Insurance Handbook for the Medical Office 14th Edition Trusted for more than 30 years this market leading handbook equips you to succeed as medical insurance specialist in any of today s outpatient settings Coverage emphasizes the role of the medical insurance specialist in areas such as diagnostic coding procedural coding Medicare HIPAA and bill collection strategies As with previous editions all the plans that are most commonly encountered in clinics and physicians offices are incorporated into the text as well as icons for different types of payers lists of key abbreviations and numerous practice exercises that assist you 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 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 checklists self assessment quizzes the Student Software Challenge with cases on different payer types and an interactive CMS 1500 02 12 form to fill in NEW Expanded coverage of ICD 10 prepares users to code ICD 10 with the planned effective date of October 2015 NEW Added information on the electronic medical record and electronic claims submission including information on the HIPAA 5010 equips users for the transition between paper and electronic methods of medical records and links the CMS 1500 02 12 form to the electronic submissions process NEW SimChart for the Medical Office SCMO application activities on the companion Evolve website adds additional functionality to the insurance module on the SCMO roadmap **Management in Laboratory Medicine** John R. Snyder,David S. Wilkinson,1998 Textbook on organizational theory and practice as applied to clinical laboratory management [Insurance Handbook for the Medical Office - E-Book](#) Marilyn Fordney,2015-12-08 Stay up on the latest in insurance billing and coding with Marilyn Fordney s Insurance Handbook for the Medical Office 14th Edition Trusted for more than 30 years this market leading handbook equips you to succeed as medical insurance specialist in any of today s outpatient settings Coverage emphasizes the role of the medical insurance specialist in areas such as diagnostic coding procedural coding Medicare

HIPAA and bill collection strategies As with previous editions all the plans that are most commonly encountered in clinics and physicians offices are incorporated into the text as well as icons for different types of payers lists of key abbreviations and numerous practice exercises that assist you 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 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 checklists self assessment quizzes the Student Software Challenge with cases on different payer types and an interactive CMS 1500 02 12 form to fill in NEW Expanded coverage of ICD 10 prepares users to code ICD 10 with the planned effective date of October 2015 NEW Added information on the electronic medical record and electronic claims submission including information on the HIPAA 5010 equips users for the transition between paper and electronic methods of medical records and links the CMS 1500 02 12 form to the electronic submissions process NEW SimChart for the Medical Office SCMO application activities on the companion Evolve website adds additional functionality to the insurance module on the SCMO roadmap

AMA HCPCS 2007 American Medical Association,2006-12 Your guide to Medicare s National Level II codes Organized for efficiency and accuracy with enhanced icons detailed illustrations quick flip color tabs and dictionary style headings Additional features include All HCPCS 2007 codes modifiers and deleted codes Includes the most up to date information found in the HCPCS MPFS and OPFS files DMEPOS icon alerts Feel confident and save time by knowing exactly what supplies should be submitted APC status indicators Aids in learning which codes are payable under OPFS Age and sex edit icons AHA s Coding Clinic for HCPCS ASC designation symbols National Coverage Manual references and excerpts Expanded table of drugs

APC Training and Implementation Manual Jill Giddens,2001

CPT Outpatient Services Grace M. Kotowicz,2005-05 An annotated version of CPT prepared for hospitals ambulatory surgery centres and outpatient hospital and provider based office settings This book offers a singular reference that uses symbols to provide instruction for reporting each CPT code under Medicare s Outpatient Prospective Payment System OPFS

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The 1st edition of *Error Reduction and Prevention in Surgical Pathology* was an opportunity to pull together into one place all the ideas related to errors in surgical pathology and to organize a discipline in error reduction This 2nd edition is an opportunity to refine this information to reorganize the book to improve its usability and practicality and to include topics that were not previously addressed This book serves as a guide to pathologists to successfully avoid errors and deliver the best diagnosis possible with all relevant information needed to manage patients The introductory section includes general principles and ideas that are necessary to understand the context of error reduction In addition to general principles of error reduction and legal and regulatory responsibilities a chapter on regulatory affairs and payment systems which increasingly may be impacted by error reduction and improvement activities was added This later chapter is particularly important in view of the implementation of various value based payment programs such as the Medicare Merit Based Incentive Payment System that became law in 2015 The remainder of the book is organized in a similar manner to the 1st edition with chapters devoted to all aspects of the test cycle including pre analytic analytic and post analytic The 2nd Edition of *Error Reduction and Prevention in Surgical Pathology* serves as an essential guide to a successfully managed laboratory and contains all relevant information needed to manage specimens and deliver the best diagnosis **2005**

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