

HEALTH INSURANCE CLAIM FORM

1. MEDICARE: MEDICARE <input type="checkbox"/> MEDICAID <input type="checkbox"/> CHAMPVA <input type="checkbox"/> OTHER <input type="checkbox"/> (Medicare #) (Medicaid #) (Champion's 2286) (VA/DoD #)		3. PATIENT'S BIRTH DATE: MM DD YY SEX: M <input type="checkbox"/> F <input type="checkbox"/>		5. INSURED'S POLICY NUMBER:	
2. PATIENT'S NAME (Last, First, Middle Initial)		4. PATIENT'S RELATIONSHIP TO INSURED: Self <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Other <input type="checkbox"/>		6. INSURED'S ADDRESS (Res., Street)	
7. PATIENT'S ADDRESS (Res., Street)		8. PATIENT'S STATUS: Single <input type="checkbox"/> Married <input type="checkbox"/> Other <input type="checkbox"/>		9. CITY	
10. ZIP CODE		11. EMPLOYED: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Retired <input type="checkbox"/>		12. STATE	
13. OTHER INSURED'S NAME (Last, First, Middle Initial)		14. IS PATIENT'S CONDITION RELATED TO:		15. INSURED'S POLICY GROUP OR POLICY NUMBER	
16. OTHER INSURED'S POLICY OR GROUP NUMBER		17. a. EMPLOYMENT (CURRENT OR PREVIOUS): <input type="checkbox"/> YES <input type="checkbox"/> NO		18. INSURED'S DATE OF BIRTH: MM DD YY SEX: M <input type="checkbox"/> F <input type="checkbox"/>	
19. OTHER INSURED'S DATE OF BIRTH: MM DD YY SEX: M <input type="checkbox"/> F <input type="checkbox"/>		20. b. AUTO ACCIDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO		21. EMPLOYER'S NAME OR SCHOOL NAME	
22. EMPLOYER'S NAME OR SCHOOL NAME		23. c. OTHER ACCIDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO		24. INSURANCE PLAN NAME OR PROGRAM NAME	
25. INSURANCE PLAN NAME OR PROGRAM NAME		26. IS THERE ANY OTHER HEALTH BENEFIT PLAN? <input type="checkbox"/> YES <input type="checkbox"/> NO		27. INSURANCE OR AUTHORIZED PERSON'S SIGNATURE (I authorize payment of services/benefits to the undersigned physician or supplier for services described below)	
28. SIGNED:		29. DATE:		30. SIGNED:	
31. DATE OF CURRENT BILLING (MM DD YY)		32. IF PATIENT HAS HAD SAME OR DIFFERENT ADDRESS (Last, First, Middle Initial): MM DD YY		33. DATE PATIENT BECAME TO WORK IN CURRENT OCCUPATION: MM DD YY	
34. NAME OF REFERRING PHYSICIAN OR OTHER SOURCE		35. (a) SURGEON/REFERRING PHYSICIAN		36. HOSPITAL/CLINIC NAME (RELATED TO CURRENT SERVICES): MM DD YY	
37. RESERVED FOR LOCAL USE		38. OUTSIDE LAST: <input type="checkbox"/> YES <input type="checkbox"/> NO		39. MEDICARE REDEMPTION CODE:	
40. CHARGES OR SIGNATURE OF ALIAS OR INURY (RELATE ITEM 1-4 TO ITEM 34 BY LINE)		41. ORIGINAL REF NO.		42. PRIOR AUTHORIZATION NUMBER	
43. CHARGES OR SIGNATURE OF ALIAS OR INURY (RELATE ITEM 1-4 TO ITEM 34 BY LINE)		44. CHARGES OR SIGNATURE OF ALIAS OR INURY (RELATE ITEM 1-4 TO ITEM 34 BY LINE)		45. CHARGES OR SIGNATURE OF ALIAS OR INURY (RELATE ITEM 1-4 TO ITEM 34 BY LINE)	
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**United States. National Committee on
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educators Lori Quinn and James Gordon this book will improve your skills in both documentation and clinical reasoning A practical framework shows how to organize and structure PT records making it easier to document functional outcomes in many practice settings and is based on the International Classification for Functioning Disability and Health ICF model the one adopted by the APTA Coverage of practice settings includes documentation examples in acute care rehabilitation outpatient home care and nursing homes as well as a separate chapter on documentation in pediatric settings Guidelines to systematic documentation describe how to identify record measure and evaluate treatment and therapies especially important when insurance companies require evidence of functional progress in order to provide reimbursement Workbook textbook format uses examples and exercises in each chapter to reinforce your understanding of concepts NEW Standardized Outcome Measures chapter leads to better care and patient management by helping you select the right outcome measures for use in evaluations re evaluations and discharge summaries UPDATED content is based on data from current research federal policies and APTA guidelines including incorporation of new terminology from the Guide to Physical Therapist 3 0 and ICD 10 coding EXPANDED number of case examples covers an even broader range of clinical practice areas

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

Health Care Finance Judith J. Baker,R. W. Baker,2009-12-18 This is the most practical financial management text for those who need basic financial management knowledge and a better understanding of healthcare finance in particular Using actual examples from hospitals long term care facilities and home health agencies this user friendly text includes practical information for the nonfinancial manager charged with budgeting New to the Third Edition New chapter on Operational Budgeting New chapter on The Financial Impact of Electronic Records New chapter on The Financial Impact of Information Input An expanded explanation of typical forms and terms of financing and equity New Mini Case Study A Facility s Conversion to Electronic Records covers the federally mandated transition to ICD 10 Thoroughly updated instructor supplements including PowerPoints Excel Spreadsheets and Instructor s Manual

Emergency Department Coding and Billing Duane C. Abbey,2005 Remington David B. Troy,Paul Beringer,2006 For over 100 years Remington has been the definitive textbook and reference on the science and practice of pharmacy This Twenty First Edition keeps pace with recent changes in the pharmacy curriculum and professional pharmacy practice More than 95 new contributors and 5 new section editors provide fresh perspectives on the field New chapters include pharmacogenomics application of ethical principles to practice dilemmas technology and automation professional communication medication errors re engineering pharmacy practice management of special risk medicines specialization in pharmacy practice disease state management emergency patient care and wound care Purchasers of this textbook are entitled to a new fully indexed Bonus CD ROM affording instant access to the full content of Remington in a convenient and portable format

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Healthcare Risk Adjustment and Predictive Modeling Ian G. Duncan,2011 This

text is listed on the Course of Reading for SOA Fellowship study in the Group Health specialty track Healthcare Risk Adjustment and Predictive Modeling provides a comprehensive guide to healthcare actuaries and other professionals interested in healthcare data analytics risk adjustment and predictive modeling The book first introduces the topic with discussions of health risk available data clinical identification algorithms for diagnostic grouping and the use of grouper models The second part of the book presents the concept of data mining and some of the common approaches used by modelers The third and final section covers a number of predictive modeling and risk adjustment case studies with examples from Medicaid Medicare disability depression diagnosis and provider reimbursement as well as the use of predictive modeling and risk adjustment outside the U S For readers who wish to experiment with their own models the book also provides access to a test dataset

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