

Medical Billing and Insurance: Chapter 2

Workbook questions

To provide continuous insurance coverage for workers and their insured dependents when they change or lose jobs assistant-✓What is the primary purpose of HIPAA Title I: Insurance Reform?

Title II, Administrative Simplification-✓The focus on the health care practice setting and reduction of administrative costs and burdens are the goals of which part of HIPAA?

Clearinghouse-✓An independent organization that receives insurance claims from the physician's office, perform edits, and transmits claims to insurance carriers is known a/an _____.

HCPCS-✓Drugs and supplies (standard code sets)

ICD-10-PCS-✓Inpatient procedures (standard code sets)

ICD-10-CM-✓Diagnosis Coding (standard code sets)

covered entity-✓Under HIPAA guidelines, a health care coverage carrier, such as Blue Cross/ Blue Shield, that transmits health information in electronic form in connection with a transactions called a/an _____.

business associate-✓Dr. John Doe contracts with an outside billing company to manage claims and accounts receivable. Under HIPAA guidelines, the billing company is considered a/an _____ of the provider.

PO (privacy officer or privacy official)-✓An individual designated to assist the provider by putting compliance policies and procedures regarding privacy and confidentiality in place and training office staff is known a/an _____ under HIPAA guidelines.

disclosure-✓If you give, release, or transfer information to another entity, it is known as _____.

PHI (Protected Health Information)-✓Any information that identifies an individual and describes his or her health status, age, sex, ethnicity, or other demographic characteristics, transmitted by electronic media.

Medical Insurance Chapter 2

A Gutmann



Medical Insurance Chapter 2:

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