Chapter 01: Role of an Insurance Billing Specialist Smith: Fordney's Medical Insurance and Billing, 16th Edition

MULTIPLE CHOICE

- The primary goal of an insurance billing specialist is:
 - a to manage the health care organization's billing office
 - to ensure the cash flow of a health care organization through revenue cycle management

OBJ: 2

OBJ: 2

CORD 2

to send bills to patients for services they receive

DRF: Easy

Diff: Easy

- d. to post payments received from patients and insurance carriers
- ANS: B DIF: Moderate
- 2. Facility billing includes charging for medical services provided by:
 - a. physicians

ANS: D

ANS: A

- b. laboratory services
- ambulance services
- d. ambulatory surgical centers
- 3. A claims assistance professional
 - a. works for the consumer.
 - b. works for the health care organization.
 - works for an insurance company.
 - works for the federal government.
- 4. What is "cash flow" in a medical practice?
 - The actual money available to a medical practice
 The amount of money received by a medical practice in 1 day
 - s. The amount of money received by a medical practice in 1 month
 - d. The amount of outstanding money on the accounts receivable
 - The second of the second secon
 - ANS: A DIF: Moderate OBJ: 2
- 5. Which level of education is generally required for one who seeks employment as an insurance coder?
 - College diploma
 - High school diploma
 - c. Completion of an accredited program for coding certification
 - d. No specific level of education is required
 - ANS: C DIF: Easy OBJ: 4
- 6. The amount of money an insurance billing specialist earns is dependent on which of the

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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 Handbook for the Medical Office Marilyn Takahashi Fordney, 2006 This manual has been prepared for instructors using Insurance Handbook for the Medical Office 9th ed in medical insurance classes or as a supplement in administrative medical assisting classes Student Workbook to Accompany Insurance Handbook for the Medical Office Marilyn Fordney, 2003-11 Realistic hands on exercises prepare students to work effectively in the managed care environment with all types of insurance claims Self study review questions and complete competency based tests are presented Easily removable sample practice forms are provided as well as case study information and practice exercises Available separately

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