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Two NDCs billed for a single HCPCS code example:

NDC – 00703301812 – ADRUCIL 50 MG/ML VIAL

NDC – 00703301513 – ADRUCIL 50 MG/ML VIAL

24. A. DATE(S) OF SERVICE						B.	C.	D. PROCEDURES, SERVICES, OR SUPPLIES				E.	F.	G.	H.	I.	J.
From To						PLACE OF	EMG	(Explain Unusual Circumstances)				DIAGNOSIS	\$ CHARGES	DATE OR	UNIT	QTY	RENDERING
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																MP	

Prior to NPI Implementation with Medicaid provider number

Ndc Code On Cms 1500

Debra P. Ferenc

A red circular graphic with a gradient, appearing as a semi-circle or a partial circle, located to the right of the author's name.

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Understanding Hospital Billing and Coding Debra P. Ferenc, 2013-02-26 Updated Claim Forms chapter covers the UB 04 claim form Updated information covers diagnosis and procedural coding with guidelines and applications Updated claim forms and names are used throughout **PROP - Coding Systems Custom E-Book** Anthem, 2014-04-25 PROP Coding Systems Custom E Book *The Code of Federal Regulations of the United States of America*, 2006 The Code of Federal Regulations is the codification of the general and permanent rules published in the Federal Register by the executive departments and agencies of the Federal Government Code of Federal Regulations, 2003 **Handling the Medical Claim** Catherine Cochran, 2017-07-27 When a doctor sees a patient how does the doctor's office get paid If a claim for a service or procedure provided is denied how does the doctor's office get the patient's insurance company to pay Handling the Medical Claim An 8 Step Guide on How To Correct and Resolve Claim Issues explains from beginning to end how to bill and collect on claim Code of Federal Regulations Railroad Retirement Board (RRB) Staff, 2005-06 The Code of Federal Regulations is a codification of the general and permanent rules published in the Federal Register by the Executive departments and agencies of the United States Federal Government Fordney's Medical Insurance and Billing - E-Book Linda M. Smith, 2024-08-07 Gain the skills you need to succeed in insurance coding and billing Fordney's Medical Insurance and Billing 17th Edition helps you master the insurance billing specialist's role and responsibilities in areas such as diagnostic coding procedural coding HCPCs coding medical documentation billing and collection Using clear explanations this book covers all types of insurance coverage commonly encountered in hospitals physicians offices and clinics Step by step guidelines lead you through the submission of electronic claims and paper claims as well as the job search and professional advancement Written by coding specialist and educator Linda M Smith this market leading text is a complete guide to becoming an efficient insurance billing specialist NEW HCPCs Coding chapter covers ambulance billing supply billing and certificates of medical necessity NEW Content on professionalism includes customer service conflict management diversity awareness leadership and other competencies to help you become an effective engaged and highly functioning employee NEW Additional content on medical decision making helps you select the appropriate evaluation and management codes under the current documentation guidelines NEW Additional examples of CMS claims include those from Blue Shield and Automobile Insurance NEW Updates to credentialing include those specific to Medicare Medicaid and Workers Compensation Coverage of medical documentation diagnostic coding and procedural coding provides you with the foundation and skills needed to work in a physician's office as well as ambulatory and inpatient settings Coverage of the role and responsibilities of the insurance billing specialist emphasizes advanced job opportunities and certification Chapter on HIPAA compliance as well as Compliance Alerts highlight important HIPAA compliance issues and the latest regulations Step by step procedures detail common responsibilities of the insurance billing specialist and coder Key terms and abbreviations are

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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

Code of Federal Regulations, Title 20, Employees' Benefits, Pt. 1-399, Revised As of April 1 2012 ,2012-05-29

The Code of Federal Regulations is a codification of the general and permanent rules published in the Federal Register by the Executive departments and agencies of the United States Federal Government This volume contains Office of Workers Compensation Programs and Railroad Retirement Board regulations

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