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necessity, and common health insurance plans. The eleventh edition has been updated to include new legislation that affects healthcare, ICD-10-CM coding, implementing the electronic health record, the Medical Integrity Program (MIP), medical review

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Problems stemming from the misuse and abuse of alcohol and other drugs are by no means a new phenomenon, although the face of the issues has changed in recent years. National trends

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indicate substantial increases in the abuse of prescription medications. These increases are particularly prominent within the military, a population that also continues to experience long-standing issues with alcohol abuse. The problem of substance abuse within the

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military has come under new scrutiny in the context of the two concurrent wars in which the United States has been engaged during the past decade--in Afghanistan (Operation Enduring Freedom) and Iraq (Operation Iraqi Freedom and Operation New



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Dawn). Increasing rates of alcohol and other drug misuse adversely affect military readiness, family readiness, and safety, thereby posing a significant public health problem for the Department of Defense (DoD). To better understand this problem, DoD requested that the

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Institute of Medicine (IOM) assess the adequacy of current protocols in place across DoD and the different branches of the military pertaining to the prevention, screening, diagnosis, and treatment of substance use disorders (SUDs).  
Substance Use Disorders in the U.S.

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Armed Forces reviews the IOM's task of assessing access to SUD care for service members, members of the National Guard and Reserves, and military dependents, as well as the education and credentialing of SUD care providers, and offers specific recommendations to

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DoD on where and how improvements in these areas could be made.

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the National  
Healthcare

Association (NHA)  
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A report on  
recommended clinical



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preventive services that should be provided to patients in the course of routine clinical care, including screening for vascular, neoplastic and infectious diseases, and metabolic, hematologic, ophthalmologic and ontologic, prenatal, and musculoskeletal

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disorders. Also, mental disorders and substance abuse, counseling, and immunizations/chemoprophylaxis. Tables.

Hearings on National Defense Authorization Act for Fiscal Year 1999--H.R. 3616, and Oversight of Previously Authorized Programs Before the Committee on

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National Security,  
House of  
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Hundred Fifth  
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The Medicare

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Insurance

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Billing, 7th  
edition,

utilizes a step-

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by-step  
approach to  
provide  
instruction  
about the  
completion of  
health  
insurance  
claims. The  
objectives of  
this edition  
are to 1)  
introduce

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information  
about major  
third party  
payers, 2)  
provide up-to-  
date  
information  
about federal  
health care  
regulations, 3)  
clarify coding  
guidelines and  
provide

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application  
exercises for  
each coding  
system, 4)  
introduce  
reimbursement  
issues, 5)  
emphasize the  
importance of  
coding for  
medical  
necessity, and  
6) help users

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develop the skill to complete claims accurately.. Case studies and review exercises provide users with numerous opportunities to apply knowledge and develop skills



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in completing  
CMS-1500 claims  
accurately. The  
textbook CD-ROM  
and  
accompanying  
workbook  
provide  
additional  
exercises and  
practice in  
completing  
CMS-1500 claims

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electronically.  
Current  
information is  
provided on  
CPT-5 and  
ICD-10-CM  
coding systems.  
The appendices  
include  
information  
about  
processing the  
UB-92

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(CMS-1450) and  
dental claims.

The United States has the highest per capita spending on health care of any industrialized nation but continually lags behind other nations

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in health care  
outcomes

including life  
expectancy and  
infant  
mortality.

National health  
expenditures  
are projected  
to exceed \$2.5  
trillion in  
2009. Given  
healthcare's

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direct impact on the economy, there is a critical need to control health care spending.

According to The Health Imperative: Lowering Costs and Improving Outcomes, the

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costs of health care have

strained the federal budget, and negatively affected state governments, the private sector and individuals.

Healthcare expenditures have restricted

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the ability of state and local governments to fund other priorities and have contributed to slowing growth in wages and jobs in the private sector. Moreover, the number of

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uninsured has risen from 45.7 million in 2007 to 46.3 million in 2008. The Health

Imperative:

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identifies a number of

factors driving



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expenditure  
growth  
including  
scientific  
uncertainty,  
perverse  
economic and  
practice  
incentives,  
system  
fragmentation,  
lack of patient  
involvement,

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and under-  
investment in  
population  
health. Experts  
discussed key  
levers for  
catalyzing  
transformation  
of the delivery  
system. A few  
included  
streamlined  
health

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insurance  
regulation,  
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simplification  
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clarification  
and quality and  
consistency in  
treatment. The  
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throughout, as  
well as  
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soft skills,  
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programs.



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and CMAS from  
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CCMA and CMAA  
from the  
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NCMA from the  
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for Competency  
Testing; and  
CMAC from the  
American  
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Association.  
Emphasis on  
anatomy and  
physiology –  
along with  
pathology,  
signs/symptoms,  
diagnostic  
procedures, and  
treatments –  
enables you to  
meet key  
competencies.

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Strong focus on  
medical  
terminology  
includes  
feature boxes  
that highlight  
chapter-related  
medical  
terminology to  
help you learn  
word parts,  
pronunciation,  
and

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definitions.

Math exercises  
embedded

throughout the  
text challenge  
you to sharpen  
your math  
skills.

Procedures are  
mapped to  
CAAHEP and  
ABHES

accreditation

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standards down  
to the step,

offer

rationales for  
each step, and

can be

conveniently  
performed in

the classroom.

Customer

Service boxes

in appropriate

chapters help

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you develop the soft skills that employers seek when hiring Medical Assistants.

Applied learning approach introduces a case scenario at the beginning of

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each chapter  
and then  
revisits it  
throughout the  
chapter to help  
you understand  
new concepts as  
they are  
presented.

Chapter  
learning tools  
include  
vocabulary with



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definitions,  
critical  
thinking  
applications,  
and content  
that ties  
directly to the  
order of  
learning  
objectives.

Pharmacology  
glossary of the  
top 100-150

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most common over-the-counter

and

prescription

medications

gives you quick

access to

pronunciation

guides, generic

and trade

names, and drug

classification.

Increasingly

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over the past  
five years,  
uncertainty  
about  
reimbursement  
for routine  
patient care  
has been  
suspected as  
contributing to  
problems  
enrolling  
people in

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clinical  
trials.

Clinical trial  
investigators  
cannot  
guarantee that  
Medicare will  
pay for the  
care required,  
and they must  
disclose this  
uncertainty to  
potential

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participants

during the

informed

consent

process. Since

Medicare does

not routinely

"preauthorize"

care (as do

many commercial

insurers) the

uncertainty

cannot be

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dispelled in advance. Thus, patients considering whether to enter trials must assume that they may have to pay bills that Medicare rejects simply because they

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have enrolled  
in the trial.

This report  
recommends an  
explicit policy  
for  
reimbursement  
of routine  
patient care  
costs in  
clinical  
trials. It  
further

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recommends that HCFA provide additional support for selected clinical trials, and that the government support the establishment of a national clinical trials



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registry. These policies (1)

should assure that

beneficiaries would not be denied coverage merely because they have volunteered to participate in a clinical trial; and (2)

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would not  
impose  
excessive  
administrative  
burdens on  
HCFA, its  
fiscal  
intermediaries  
and carriers,  
or  
investigators,  
providers, or  
participants in

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clinical  
trials.

Explicit rules  
would have the  
added benefit  
of increasing  
the uniformity  
of  
reimbursement  
decisions made  
by Medicare  
fiscal  
intermediaries

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and carriers in different parts of the country. Greater uniformity would, in turn, decrease the uncertainty about reimbursement when providers and patients embark on a

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clinical trial.  
Kinn's The

Medical

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Book

The Promise of  
Assistive

Technology to  
Enhance

Activity and  
Work

Participation

CHAMPUS

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Kinn's Medical

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Fundamentals

Calendar Year

... Report

Total Force

Subcommittee

Hearings on

Title

IV--military

Personnel

Authorizations;

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Title

V--military

Personnel

Policy; Title V

I--compensation

and Other

Personnel

Benefits; Title

VII--health

Care Provisions

: Hearing Held

March 12, 13,

19, 27, April

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clinics and  
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role of the  
medical  
insurance  
specialist  
includes areas  
such as  
diagnostic  
coding,  
procedural  
coding,

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and bill  
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strategies.

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in the claim  
form accurately  
is made easier  
by the use of  
icons for  
different types  
of payers, lists  
of key  
abbreviations,

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setting.

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business of  
running a  
medical office  
highlights the

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importance of the medical insurance specialist in filing clean claims, solving problems, and collecting overdue payments. Key terms and key abbreviations are defined and emphasized,

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regulations for  
different  
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abbreviations,

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implementation  
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forms includes  
block-by-block

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explanations and  
examples for the

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claims include  
sample  
screenshots and  
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the medical  
office.

This book  
provides a  
comprehensive  
description of  
the screening  
and clinical  
applications of  
digital breast  
tomosynthesis  
(DBT) and offers  
straightforward,  
clear guidance

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on use of the  
technique.  
Informative  
clinical cases  
are presented to  
illustrate how  
to take  
advantage of DBT  
in clinical  
practice. The  
importance of  
DBT as a  
diagnostic tool  
for both

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screening and diagnosis is increasing rapidly. DBT improves upon mammography by depicting breast tissue on a video clip made of cross-sectional images reconstructed in correspondence

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with their  
mammographic  
planes of  
acquisition. DBT  
results in  
markedly reduced  
summation of  
overlapping  
breast tissue  
and offers the  
potential to  
improve  
mammographic  
breast cancer



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surveillance and diagnosis. This book will be an excellent practical teaching guide for beginners and a useful reference for more experienced radiologists.

Master the complexities of health insurance

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with this easy-to-understand guide! Health Insurance Today: A Practical Approach, 7th Edition provides a solid foundation in basics such as the types and sources of health insurance, the

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submission of claims, and the ethical and legal issues surrounding insurance. It follows the claims process from billing and coding to reimbursement procedures, with realistic practice on the

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This edition  
adds coverage of  
the latest  
advances and  
issues in health  
insurance,  
including EHRs,  
Medicare, and  
other types of  
carriers.

Written by  
Medical  
Assisting

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educators Janet  
Beik and Julie

Pepper, this  
resource

prepares you for  
a successful  
career as a  
health insurance  
professional.

What Did You  
Learn? review  
questions,

Imagine This!  
scenarios, and

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Stop and Think exercises ensure that you understand the material, can apply it to real-life situations, and develop critical thinking skills. Clear, attainable learning objectives

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highlight the most important information in each chapter. CMS-1500 software with case studies on the Evolve companion website provides hands-on practice with filling in a CMS-1500 form

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Evolve provides  
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cases on Evolve  
give you real-  
world practice  
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HIPAA Tips  
emphasize the  
importance of  
privacy and of  
following  
government rules  
and regulations.  
Direct,  
conversational

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writing style makes it easier to learn and remember the material. End-of-chapter summaries relate to the chapter-opening learning objectives, provide a thorough review of key content, and allow you to

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quickly find  
information for  
further review.  
Chapter review  
questions on  
Evolve help you  
assess your  
comprehension of  
key concepts NEW  
and UNIQUE!  
Patient's Point  
of View boxes  
enable you to  
imagine yourself

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on the other  
side of the  
desk. NEW and  
UNIQUE! Opening  
and closing  
chapter  
scenarios  
present on-the-  
job challenges  
that must be  
resolved using  
critical  
thinking skills.  
NEW! End-of-

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chapter review  
questions ensure

that you can  
understand and  
apply the  
material. NEW!

Clear  
explanations  
show how  
electronic  
technology is  
used in patient  
verification,  
electronic

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claims, and  
claims follow-  
up. NEW!

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Affordable Care  
Act introduces  
new and  
innovative ways  
that  
modifications to  
the ACA allow  
people to  
acquire  
healthcare

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Updated  
information  
addresses all  
health insurance  
topics,  
including key  
topics like  
Medicare and  
Electronic  
Health Records.  
NEW! More  
emphasis on  
electronic

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claims submission has been added. NEW! Updated figures, graphs, and tables summarize the latest health insurance information. A complete guide to insurance billing and coding,  
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physicians'  
offices. Its  
emphasis on the  
role of the  
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insurance

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specialist  
includes areas  
such as  
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coding,  
procedural  
coding,  
Medicare, HIPAA,  
and bill  
collection  
strategies.  
Learning to fill  
in the claim  
form accurately

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is made easier by the use of icons for different types of payers, lists of key abbreviations, and numerous practice exercises. This edition provides the latest on hot topics such as ICD-10,

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healthcare reform, the new CMS-1500 form, and electronic claims. Trusted for more than 30 years, this proven reference from Marilyn Fordney prepares you to succeed as a medical insurance professional in

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collecting  
overdue  
payments. Key  
terms and key  
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disability benefits  
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