



Horizon Blue Cross Blue Shield of New Jersey

Home Health Revenue Code to HCPCS Code Crosswalk

The chart below provides a detailed crosswalk for corresponding revenue codes and HCPCS codes when obtaining home health service authorizations through Horizon Blue Cross Blue Shield of New Jersey's online Utilization Management Request Tool (CareAffirm).

Facility claim form (UB-04)	Revenue Code	HCPCS Code	Unit
Registered Nurse (RN)	551	S9123	1= visit
Licensed Practical Nurse (LPN)	551	S9124	1= visit
Physical Therapy	421	S9131	1= visit
Occupational Therapy	431	S9129	1= visit
Speech Therapy	441	S9128	1= visit
Medical Social Worker	551	S9127	1= visit
Certified Home Health Aid (CHHA)	571	S9122	1= visit
CHHA	572	S9122	1= hour
Registered Dietitian	580	S9470	1= visit
Professional claim form (CMS-1500)	Revenue Code	HCPCS Code	Unit
Private Duty Nursing - RN	Not Applicable	S9123 ¹	1= hour
Private Duty Nursing - LPN	Not Applicable	S9124 ¹	1= hour

¹For Private Duty Nursing, please use HCPCS codes billable on a CMS-1500.

(Continued)

Revenue Code Hcpcs Crosswalk

Jill Giddens

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

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Federal Register, 2013-12 **Medicare Hospital Manual**, 1989 Insurance Handbook for the Medical Office
Marilyn Fordney, 2015-11-26 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 **Medicare and Medicaid Guide**, 1969 *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

Management in Laboratory Medicine John R. Snyder, David S. Wilkinson, 1998 Textbook on organizational theory and practice as applied to clinical laboratory management

Comparison of Second-Quarter 2010 Average Sales Prices and Average Manufacturer Prices Stuart Wright, 2011-04 This report identified a total of 25 Healthcare Common Procedure Coding System HCPCS codes with average sales prices ASP that exceeded average manufacturer prices AMP by at least 5 percent in the second quarter of 2010 Of these 25 HCPCS codes 10 had complete AMP data i e AMP data for every drug product that CMS used to establish reimbursement amounts If reimbursement amounts for all 10 codes with complete AMP data had been based on 103 percent of the AMPs during the fourth quarter of 2010 the report estimates that Medicare expenditures would have been reduced by 713 000 in that quarter alone This is a print on demand edition of an important hard to find report

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Table of Contents Revenue Code Hcpcs Crosswalk

1. Understanding the eBook Revenue Code Hcpcs Crosswalk
 - The Rise of Digital Reading Revenue Code Hcpcs Crosswalk
 - Advantages of eBooks Over Traditional Books
2. Identifying Revenue Code Hcpcs Crosswalk
 - Exploring Different Genres
 - Considering Fiction vs. Non-Fiction
 - Determining Your Reading Goals
3. Choosing the Right eBook Platform
 - Popular eBook Platforms
 - Features to Look for in an Revenue Code Hcpcs Crosswalk
 - User-Friendly Interface
4. Exploring eBook Recommendations from Revenue Code Hcpcs Crosswalk
 - Personalized Recommendations
 - Revenue Code Hcpcs Crosswalk User Reviews and Ratings
 - Revenue Code Hcpcs Crosswalk and Bestseller Lists
5. Accessing Revenue Code Hcpcs Crosswalk Free and Paid eBooks
 - Revenue Code Hcpcs Crosswalk Public Domain eBooks
 - Revenue Code Hcpcs Crosswalk eBook Subscription Services
 - Revenue Code Hcpcs Crosswalk Budget-Friendly Options
6. Navigating Revenue Code Hcpcs Crosswalk eBook Formats

- ePub, PDF, MOBI, and More
- Revenue Code Hcpcs Crosswalk Compatibility with Devices
- Revenue Code Hcpcs Crosswalk Enhanced eBook Features
- 7. Enhancing Your Reading Experience
 - Adjustable Fonts and Text Sizes of Revenue Code Hcpcs Crosswalk
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 - Interactive Elements Revenue Code Hcpcs Crosswalk
- 8. Staying Engaged with Revenue Code Hcpcs Crosswalk
 - Joining Online Reading Communities
 - Participating in Virtual Book Clubs
 - Following Authors and Publishers Revenue Code Hcpcs Crosswalk
- 9. Balancing eBooks and Physical Books Revenue Code Hcpcs Crosswalk
 - Benefits of a Digital Library
 - Creating a Diverse Reading Collection Revenue Code Hcpcs Crosswalk
- 10. Overcoming Reading Challenges
 - Dealing with Digital Eye Strain
 - Minimizing Distractions
 - Managing Screen Time
- 11. Cultivating a Reading Routine Revenue Code Hcpcs Crosswalk
 - Setting Reading Goals Revenue Code Hcpcs Crosswalk
 - Carving Out Dedicated Reading Time
- 12. Sourcing Reliable Information of Revenue Code Hcpcs Crosswalk
 - Fact-Checking eBook Content of Revenue Code Hcpcs Crosswalk
 - Distinguishing Credible Sources
- 13. Promoting Lifelong Learning
 - Utilizing eBooks for Skill Development
 - Exploring Educational eBooks
- 14. Embracing eBook Trends
 - Integration of Multimedia Elements
 - Interactive and Gamified eBooks

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