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Insurance Chapter 7

# Understanding Health Insurance Chapter 7

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Step 7. Assign the applicable code number and any add-on (+) or additional codes needed to accurately classify the statement being coded. Concurrent Care. Provision of similar services, such as hospital inpatient visits, to the same patient by more than one provider on the same day.

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Gravity. Created by.

saraelizabeth12034. Terms in

this set (47) Uncertainty.

whether any events might

affect a particular

individual; in general there

is a high level of

uncertainty as to whether a

particular person will

become sick or injured ...

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Answers The next matter to consider is going to be your own way of life and what features are necessary within a health proper care plan. It is definitely a wise course of action to generate your car loan broker aware of the

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imagine getting the good future. But, it's not

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Prohibits plans or insurance  
carriers from requiring and  
individual to pay a higher  
premium or contribution than  
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Recognizing the artifice  
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of here and check out the  
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Health Insurance today:

Chapter 7 Multiple Choice.

An organized, interrelated  
system of pe... individuals  
belonging to a managed

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The two most common types of MCOs are. A specific provider who oversees an HMO... Network. Enrollees. HMOs and PPOs. Primary care physician (PCP)

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NOTE: Code 771.7 is assigned during the first 28 days of the patient's life, and code 112.9 is assigned if the patient is older than 28 days. (This exercise does not indicate the patient's age. Therefore, either code is acceptable. In practice, review the medical record to determine the patient's age to assign the correct code.)

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*SECTION II Answer Keys to  
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Refer to the CPT coding manual to answer each of the following items. Assign code(s) to well-child care of a 5-year-old established patient that includes the administration of DTaP and polio (DTap-IPV) vaccine,

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### Intramuscularly.

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Coinsurance: The amount of money you owe to a medical provider once the deductible has been paid. Coinsurance is usually a predetermined

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percentage of the total bill. If the policy's co-insurance is set at 15% and the bill comes to \$100, the policy-holder owes \$15 in co-insurance.

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