

False



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falseThe exchange of data in a standardized format through computer connections is known as electronic data interchange. trueEncrypted data often look like gibberish to unauthorized usersFalseEven if a physician's office does not bill Medicare and does not submit transactions electronically directly or through a third party the practice is still subject to HIPAA transaction rulesFALSEwhen submitting a claim to Medicare the name of the insured is required not situationalTrueA Medicare claim must include standard code sets such as CPT and ICD\_9-CM codesFALSEconfidential data should be stored only in the computer's hard drive. TrueAn installed firewall and antivirus software help maintain computer securityTRUEPractice management systems can be rented from practice management systems over the internetTRUEFor insurance claims to be submitted electronically a signed agreement by the physician with the carriers involved is necessaryTRUEclearinghouse always charge a flat fee for claim processingbatchA group of insurance claims sent at the same time from time from on facility is known as a entity that receives transmission of insurance claims separate the claims and sends one electronically to the correct insurance payer a clearinghouse is a two weeks or less insurance claim transmitted electronically are usually paid in accounts receivableThe most important function of a practice management system is the internal Revenue ServiceThe employer's identification number is assigned by transmits claims to the insurance payer performs software edits separates claim by carrier all the above a clearinghouse a before the service is rendered during the time the service is rendered after the service is rendered

al the above insurance claims form data are gathered away from the  
 office. Back up copies of office records should be stored directly when a  
 medical practice has its own computer and transmits claims electronically  
 directly to the insurance carrier this system is known as an insurance billing  
 worksheet. A computer printout that is used to look for errors before an  
 insurance claim is transmitted electronically is called an interactive  
 transaction. Back and forth communication between user and computer that  
 occur during online real time is called responsible  
 accountability  
 electronic  
 signature  
 question  
 administrative  
 technical  
 physician encrypted  
 password  
 backup  
 electronic remittance advice (ERA) encrypted assigning a code to represent  
 data is known as a password a combination of letter numbers or symbols that  
 each individual is assigned to access the computer system is called  
 a/an backup when keying data it is wise to -----x----- frequently to save  
 information electronic remittance advice (ERA) an online transaction  
 concerning the status of an insurance claim is called a/an responsible and  
 accountability employees who have access to patients medical records must  
 have a high degree of electronic a status report of claims is  
 received signature for assignment of benefits each patients question a screen  
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prompt is administrative safeguard or security measure internal audit  
that review who has access to PHI is administrative safeguard automatic  
logout that prevents unauthorized users from accessing a computer is  
a physician safeguard how the physician office handles the retention  
removal and disposal of paper records is a daily Post payments is practice  
management system weekly note any problematic claim and resolve  
outstanding files weekly Batch scrub edit and transmit claims send month review  
all claim rejection reports daily audit claims batched and transmitted with  
confirmation reports weekly make follow up calls to resolve reasons for  
rejections daily review clearing house payer transmission reports daily correct  
rejections and resubmit claim end of the month update practice management  
system with payer information research unpaid claims weekly ON FALSE  
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