

# [Hipaa properly process the claims. coding conveys the](https://assignbuster.com/hipaa-properly-process-the-claims-coding-conveys-the/)

HIPAAand Medical Billing YacaraDisla AsaCollege ALH205-M01 ProfessorTetyana Usenko Fall2017       HIPAAand Medical Billing                       HIPAA (The HealthInsurance Portability and accountability act of 1996) is a legislationproclaimed on August 3, 1996, its primary goal was to remove the healthcondition from health insurance considerations to upgrade and refineportability and continuity of the amount of protection given by healthinsurance and combat misuse, fraud, and abuse in health insurance andhealthcare distribution. Thelegislation was split up into seven titles:·        Title I – Health care access, portability, and renewability.·        Title II – Stop Health care fraud andmisuse, administrative simplification, and medical liability reform·        Title III – Tax-related health provisions·        Title IV – Group health plan requirementsapplication and enforcement.               HIPAA ensures the protection scopeof laborers after they lose or change their activity, it secures the protectionof patients’ therapeutic data, builds up principles for electronic therapeuticexchanges, and sets up the disciplines for fake therapeutic revealingpractices. HIPAAinstitutionalized medicinal codes and set up the Electronic Data Interchangeframe that we utilize to send asserts electronically; this EDI has variouswritings, each of which compares to a specific type of exchange between asupplier and a payer.               The act states that themotivation of Title II, Administrative Simplification, is to advance theMedicare and Medicaid plans and the effectiveness of the health care system bysupporting the development of a health information system via the establishmentof standards and requirements for the electronic transmission of certain healthinformation.

Medical Billing               Is the operation of procuringpayments for services that healthcare providers give to patients. The majorityof the US population have some form of health insurance that will pay, to acertain extent, part of the medical bill. The healthcare provider submits theinvoice to the insurance institution for payment.

Most medical bills, nowadays, are sent electronically, in which case, the provider sends the needed informationin a pre-defined format that the insurance institution requires. When theinsurance company receives a claim, it can either deny it, settle it or retainit for further information.               Another important entity in themedical billing business is the medical coder, who audits the patient’s recordsto summarize and codify the services that the doctors supply to patients tomake sure that they send accurate codes to insurance institutions and that theyproperly process the claims. Coding conveys the entire billing process.                In conclusion, HIPAA helps withthe privacy of patient information, as Medical Billing follows up on the claimsmade by the insurers of the services they have already done. both are importantin the health industry.

ReferencesHIPAAand Medical Billing (2018, January). Retrieved from http://www. medicalbillingandcoding. org/section-3-review/Medical Billing (2018, January). Retrieved from https://en. wikipedia. org/wiki/Medical\_billing