





Title: Medical Insurance: A Revenue Cycle Process Approach, 8e

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New to This Edition —

- 1 Chapter 1—New: Thinking It Through 1.7. Revised: Thinking It Through 1.2. Updated: statistics and data in Figures 1.1 and 1.4; Compliance Guideline on ICD-10-CM implementation.
- 2 Chapter 2—New: two HIPAA/HITECH Tips on Texting and Plans Mandated; PHI on the cloud. Updated: four WWW features on HHS, Medical Notice of Privacy Practices, HHS Breach Notifications, and CMS HIPAA Enforcement. Deleted: old Figures 2.1, 2.2, and 2.6; information on the National Health Information Network.
- 3 Chapter 3—Deleted: old Figure 3.7.
- 4 Chapter 4—Updated: all ICD-10-CM codes and conventions for 2018; Figures 4.1 and 4.3; Case 4.1 in Applying Your Knowledge. Deleted: key term ICD-9-CM.





New Features You'll See in Medical Insurance, 8e

- Chapter 5—New: Billing Tips on Category III Code Sunsets and Revised Guidelines Coming; symbol for telemedicine. Updated: all CPT codes, conventions, and modifiers for 2018; WWW features on CPT Updates, AMA Vaccine Code Updates, and Category II and III Updates; all cases in Applying Your Knowledge; Tables 5.2, 5.3, and 5.6; structure of E/M section. Deleted: symbol for moderate sedation.
- 6 Chapter 6—New: image for Figure 6.3. Revised: Figures 6.1 and 6.2. Updated: Case 6.1 in Applying Your Knowledge.
- 7 Chapter 7—New: key terms 5010A1 version and Healthcare Provider Taxonomy Code (HPTC); text for 5010A1 Version and the CMS-1500. Revised: Figure 7.1; art in Cases 7.2, 7.3, and 7.4. Updated: all conventions for completing the CMS-1500 and all Item Numbers; WWW features on POS Codes, Current Taxonomy Code Set, and All Administrative Code Sets for HIPAA Transactions. Deleted: old Figures 7.2, 7.3, 7.4, 7.5, 7.6, and 7.8; old Table 7.1; Billing Tip on How Many Pointers?.
- 8 Chapter 8—New: question in Thinking It Through 8.9. Revised: Figures 8.5, 8.7, 8.9, and 8.10; Case 8.4 introduction and art. Updated: high-deductible health plan deductibles; out-of-pocket limits for metal plans in section 8.5.
- 9 Chapter 9—New: key terms Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), Medicare Beneficiary Identifier (MBI), Quality

Payment Program (QPP); Figure 9.1; WWW features on New Medicare Card Information and QPP; Medicare coverage text in section 9.3; Medicare incentives text in section 9.4. Revised: WWW feature on Beneficiary Preventive Services; Figures 9.7 and 9.9; Applying Your Knowledge introduction; Cases 9.1, 9.2, and 9.3. Updated: Billing Tips on Medicare Part A and Part B: WWW features on Medicare FFS Provider Web Pages and Medicare Physician Fee Schedule; Thinking It Through 9.8. Deleted: key terms Medicare health insurance claim number (HICN), Physician Quality Reporting System (PQRS), Value-Based Payment Modifier (VBPM); WWW feature on MPFS Online.

- 10 Chapter 10—New: Thinking It Through 10.7. Revised: Figure 10.5; Applying Your Knowledge introduction; Cases 10.1 and 10.2. Updated: Medicaid info in intro; Medicaid changes in section 10.1; WWW feature on CHIP; websites in Table 10.1; covered services in section 10.5.
 - Chapter 11—New: key terms Prime Service Area, TRICARE Select; section 11.3 on TRICARE Prime; section 11.4 on TRICARE Select; Figure 11.1. Revised: Figure 11.2; Review Questions section; Applying Your Knowledge Introduction; Cases 11.1, 11.2, and 11.3. Updated: TRICARE regions in section 11.6. Deleted: key terms catchment area, nonavailability statement (NAS), TRICARE Extra, TRICARE Prime Remote, TRICARE Reserve Select, TRICARE Standard, TRICARE Young Adult (TYA); old Figures 11.1, 11.2, 11.3; Compliance Guideline on Preauthorization.



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- Chapter 12—Revised: Figure 12.2;
 Applying Your Knowledge introduction;
 Cases 12.1 and 12.2.
- 13 Chapter 13—Revised: Figures 13.1 and 13.8; Thinking It Through 13.3 and 13.5. Updated: key term claim adjustment group code (CAGC); Medicare appeals costs in section 13.6. Deleted: question D in Case 13.2.
- Chapter 14—Revised: chart in section 14.2; Thinking It Through 14.2; Figures 14.3 and 14.4. Deleted: old Figures 14.3a, 14.3b, and 14.3c; relating statements to the PMP section.
- Chapter 15—Updated: all CPT codes, conventions, and modifiers for 2018; Updated: Patient Account Number section so students no longer assign patient chart numbers; Updated: Dates for each case study.
- **Chapter 16—***Updated:* Dates for each case study.
- 17 Chapter 17—New: Figure 17.3; WWW feature on Medicare Secondary Payer Questionnaire; NUBC information on electronic claim submission. *Updated:* Compliance Guideline on code set for hospital coding.