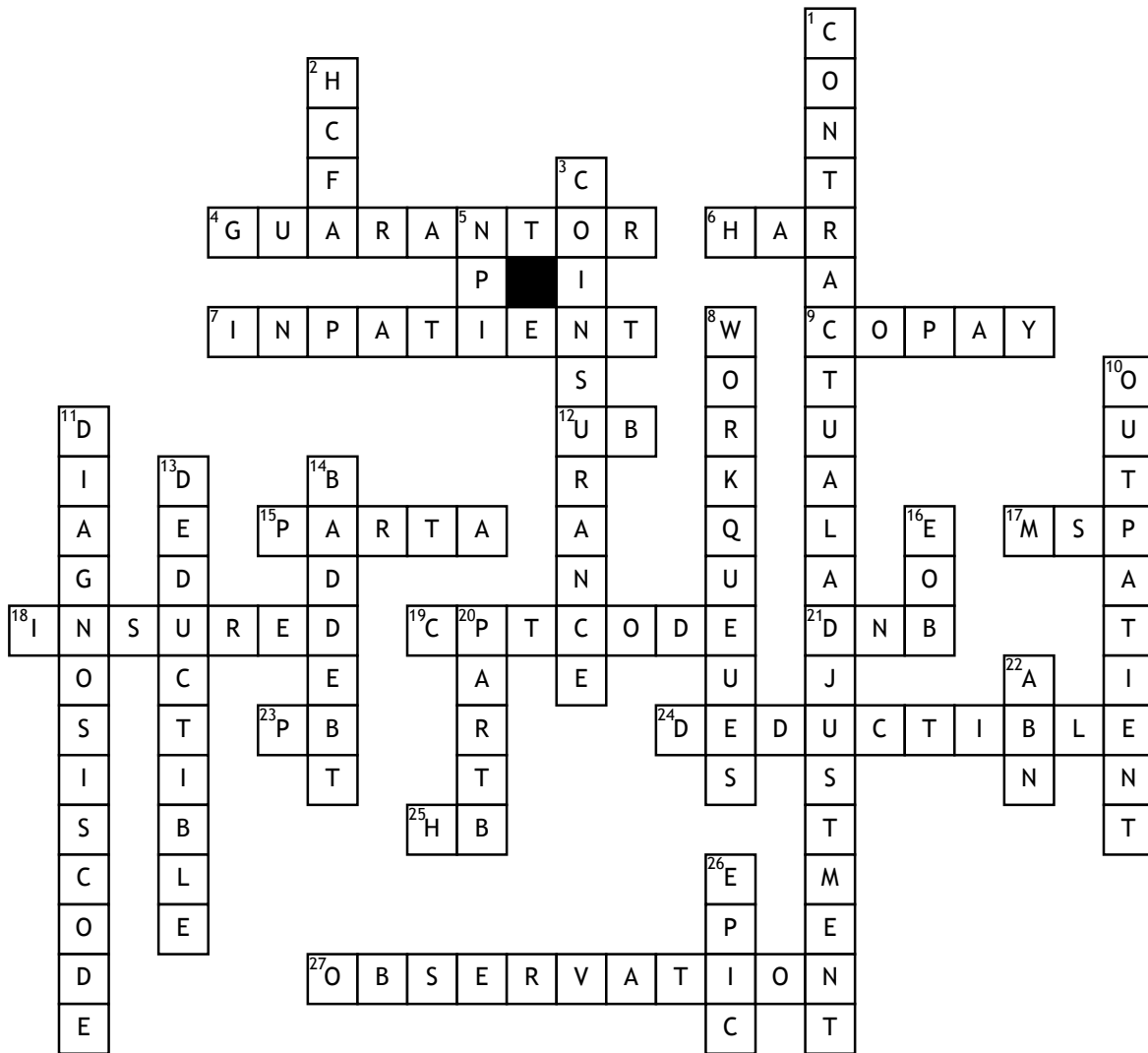


Name: \_\_\_\_\_

# Hospital Billing



## Across

4. Individual who is responsibility for the bill.

6. Hospital Account

7. Patient class in which the patient requires a higher degree of nursing and physician care.

9. A cost sharing part of the bill that is the patient's responsibility to pay.

12. A form used by hospitals to file insurance claims for medical services. Used when billing for hospital technical services.

15. Part of Medicare that usually referred to as Hospital Insurance, it helps pay for inpatient care in hospitals and hospices, as well as some skilled nursing costs.

17. Medicare Secondary Questionnaire

18. A person who is a policyholder of the insurance. Also known as the subscriber, policyholder, cardholder, or beneficiary.

19. A coding system used to describe what treatment or services were given to the patient by their provider. Used for hospital outpatient services billed on an UB and professional services billed on HCFA 1500s

21. After a patient is discharged from, the account status is changes from Open to

23. Professional Billing (abv)

24. How much cost sharing that the patient must pay for medical services often before their insurance starts to pay.

25. Hospital Billing (abv)

27. Type of service used by doctors and hospitals to decide whether a patient needs inpatient hospital care or whether they can recover at home or in an outpatient area. Usually charged by the hour.

## Down

1. A part of the bill that we must write off because of billing agreements with insurance companies.

2. Claim form used by doctors to file insurance claims for medical services. Used when billing for professional services.

3. The cost sharing part of the bill that the patients have to pay.

5. National Provider Identification

8. A holding tank for accounts that we have identified has issues or needs follow up performed

10. Any service received at a hospital or clinic that is not an inpatient status. Includes Emergency Room, Observation, and ancillary services.

11. A code used for billing that describes the patient's condition. Also called ICD-10 diagnosis code.

13. Portion of the bill, as defined by the insurance company which the patient owes.

14. A person or persons whose account that has been sent to a collection agency for further action.

16. The note received from the insurance company after getting medical services from a doctor or hospital. It tells what was billed, the payment amount approved or denied by the insurance, the amount paid, and what the patient must pay.

20. Part of medicare that helps pay for doctor services, outpatient care, and other medical services not paid for by Medicare Part A.

22. Advanced Beneficiary Notice

26. Hospital Clinic System used by WVU