

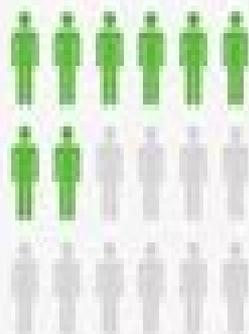
## Blue Precision HMO<sup>SM</sup>

### Health Maintenance Organization

- May have lower premium costs than PPO plans
- Your selected primary care physician (PCP) coordinates your care within the network
- Referral required to see a specialist



Premium



Choice of Doctors

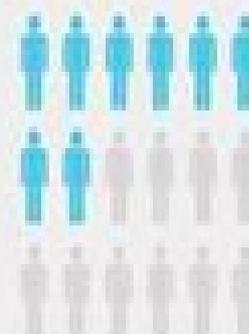
## Blue Choice PPO<sup>SM</sup>

### Blue Choice PPO Network

- May have lower premium costs than other PPO plans
- Has a choice of doctors and hospitals similar to an HMO plan
- Doesn't require you to pick a primary care physician (PCP)



Premium



Choice of Doctors

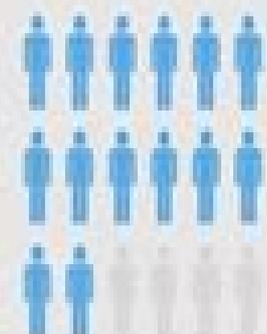
## PPO

### Participating Provider Option

- Greater freedom to choose doctors and hospitals
- May have higher premium costs than HMO plans
- Doesn't require you to pick a primary care physician (PCP)



Premium



Choice of Doctors

# Blue Choice Ppo Provider Manual Quality Improvement Program

**Sebastian Brünink**



## **Blue Choice Ppo Provider Manual Quality Improvement Program:**

**Strengthening and Improving the Medicare Program** United States. Congress. Senate. Committee on Finance, 2004

*Insurance Handbook for the Medical Office* Marilyn Takahashi Fordney, 2006 Offering guidance for all aspects of submitting tracing appealing and transmitting claims for today's full range of health plans this essential reference streamlines administrative procedures and increases office efficiency during the insurance billing process The 9th edition has been completely updated to include the latest information on essential topics such as the HIPAA regulations diagnostic coding procedural coding office and insurance collection strategies Medicare and more In addition this trusted resource of choice for medical insurance specialists is now printed in full color and contains a CD ROM that features Altapoint software that simulates the billing process and provides real world experience All content has been reviewed by industry experts and meticulously updated to reflect recent changes in insurance claim filing Procedural coding CPT and HCPCS and diagnostic coding ICD 9 CM and required documentation are emphasized as keystones to obtaining maximum reimbursement Unique color coded payer icons clarify information specific to different payers and help you understand CMS claim form completion Special HIPAA Alerts throughout the book help you comply with important governmental privacy regulations Emphasizes procedural CPT and HCPCS and diagnostic ICD 9 CM coding and documentation since they are the keystones to obtaining maximum reimbursement Block by block explanations and examples clearly demonstrate the correct way to complete the CMS 1500 claim form A wealth of completed sample insurance forms show how concepts are applied in real life Completely revised and updated to provide the most up to date information available Special HIPAA Alerts throughout the book help you comply with important governmental privacy regulations Accompanying CD ROM features AltaPoint software that simulates the billing process and provides realistic practice with patient scenarios An entire new chapter is dedicated to compliance and the e health initiative New Form icons and Computer icons throughout the text indicate the industry's current state of transition

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**Examining Pay-for-performance Measures and Other Trends in Employer-sponsored Healthcare** United States. Congress. House. Committee on Education and the Workforce. Subcommittee on Employer-Employee Relations,2005

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