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Insurance Billing/Terminology

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| **Across****5.** The amount the insurance company determines to be customary price for a service, usually less that what the provider charges?**8.** National Provider Identification**11.** Coordination of Benefits**13.** Advance Beneficiary Notice**14.** Centers for Medicare and Medicaid Services**16.** Payment for health insurance policy?**18.** Fee-For-Service**19.** Used to identify a procedure on a claim form?**20.** The primary provider who arranges for specialists or hospitalizations?**21.** A complete correct claim or a claim with no errors? | **Down****1.** Family members of the insured are called?**2.** Common for insurance to require approval for?**3.** Fixed percentages of the cost of a service paid by the patient or a second insurance?**4.** The process of establishing the need for a service?**6.** Medigap**7.** The medical insurance policy that is billed first?**9.** A provider's list of charges for services provided.**10.** Fixed amount paid by the patient at the time of service?**12.** Primary Care Provider**15.** Diagnosis Related Group**17.** Managed Care Organization |