



Common Terms

- 1. NLP (Natural Language Processing):** The field of artificial intelligence that focuses on the interaction between computers and human languages, enabling machines to understand, interpret, and generate human-like text.
- 2. Medical Coding:** The process of assigning standardized codes to medical procedures and diagnoses for the purpose of insurance claims and billing. Common coding systems include ICD-10 (International Classification of Diseases, 10th Edition) and CPT (Current Procedural Terminology).
- 3. Clearinghouse:** A third-party entity that facilitates the electronic exchange of healthcare information between healthcare providers and insurance payers. It helps streamline the billing process by validating and formatting claims before they are submitted to insurers.
- 4. Insurance Billing Automation:** The use of technology, such as clearinghouse connections, to automate the submission and processing of insurance claims. This helps reduce errors, accelerate reimbursement, and improve overall efficiency in the billing workflow.
- 5. Patient Billing Automation:** The overall process of automating the billing and communication with patients. This may involve sending invoices, payment reminders, and other financial communications through SMS and email channels.
- 6. ICD-10 and CPT:** A system of alphanumeric codes used to classify and code various health conditions and diseases. It is widely used for medical coding in healthcare settings.
- 7. Health Information Exchange (HIE):** A system that enables the electronic sharing of patient health information among different healthcare providers and organizations.
- 8. Revenue Cycle Management (RCM):** The financial process that healthcare organizations use to track patient care episodes from registration and appointment scheduling through the final payment of a balance.
- 9. Compliance Standards:** Regulations and standards, such as HIPAA (Health Insurance Portability and Accountability Act), that govern the privacy and security of patient information. Ensuring compliance is crucial in the healthcare industry.
- 10. EHR (Electronic Health Record):** A digital version of a patient's paper chart, containing their medical history, diagnoses, medications, treatment plans, immunization dates, allergies, radiology images, and laboratory test results.
- 11. Claim Adjudication:** The process of reviewing and determining the payment or denial of an insurance claim based on the policy's coverage, medical necessity, and other factors.