Administrative MEDICAL ASSISTING

Eighth Edition

BRIEF CONTENTS

UNIT 1
PROFESSIONAL AND CAREER RESPONSIBILITIES 00

CHAPTER 1 A Career as an Administrative Medical Assistant 00

CHAPTER 2 A Career as an Administrative Medical Assistant 00

CHAPTER 3 A Career as an Administrative Medical Assistant 00

UNIT 2
PROFESSIONAL AND CAREER RESPONSIBILITIES 00

CHAPTER 3 A Career as an Administrative Medical Assistant 00

CHAPTER 4 A Career as an Administrative Medical Assistant 00

CHAPTER 5 A Career as an Administrative Medical Assistant 00

UNIT 3
PROFESSIONAL AND CAREER RESPONSIBILITIES 00

CHAPTER 3 A Career as an Administrative Medical Assistant 00

CHAPTER 4 A Career as an Administrative Medical Assistant 00

CHAPTER 5 A Career as an Administrative Medical Assistant 00

CONTENTS

Brief Contents vii
Detailed Contents ix
Comprehensive List of Procedures and Job Skills xvii
List of Tables xxiii
How to Use the Text xxv
Preface xxix
Acknowledgments xxxvi
About the Authors xxxix

1 PROFESSIONAL AND CAREER RESPONSIBILITIES 1

Chapter 1 A CAREER AS AN ADMINISTRATIVE MEDICAL ASSISTANT 2

Welcome to Administrative Medical Assisting / 4 **Customer Service-Oriented Practice /** 4 Patient Education / 5 **Career Advantages / 5 Employment Opportunities / 6** Administrative Medical Assistant / 6 Clinical Medical Assistant / 6 **Administrative Medical Assistant Job Responsibilities / 6** **Interpersonal Skills / 7** Listen and Observe / 7 Interest and Concern / 7 Respect / 7 Sensitivity to Others / 11 Empathetic and Positive Attitude / 11 Initiative and Motivation / 11 Time Management / 11 Medical Assistant's Creed / 11 Team Interaction / 11 **Understanding Work-Related Emotional and Psychological Problems / 12** Work Relationships / 12 Aggressive versus Assertive Behavior / 12 Grieving or Distressed Patients / 12 Death and Dying / 13 Stress and the Health Care Worker / 14 **Professionalism / 15** Personal Image / 16 Health and Physical Fitness / 17 **Licensure, Accreditation, Certification, and Registration / 17** **Keeping Current / 18** **Health Care Reform / 22** **Interpret and Accurately Spell Medical Terms and Abbreviations (Procedure 1-1) / 23**

Chapter 2 THE HEALTH CARE ENVIRONMENT: PAST, PRESENT, AND FUTURE 30

Welcome to Administrative Medical Assisting / 4 **Customer Service-Oriented Practice /** 4 Patient Education / 5 **Career Advantages / 5 Employment Opportunities / 6** Administrative Medical Assistant / 6 Clinical Medical Assistant / 6 **Administrative Medical Assistant Job Responsibilities / 6** **Interpersonal Skills / 7** Listen and Observe / 7 Interest and Concern / 7 Respect / 7 Sensitivity to Others / 11 Empathetic and Positive Attitude / 11 Initiative and Motivation / 11 Time Management / 11 Medical Assistant's Creed / 11 Team Interaction / 11 **Understanding Work-Related Emotional and Psychological Problems / 12** Work Relationships / 12 Aggressive versus Assertive Behavior / 12 Grieving or Distressed Patients / 12 Death and Dying / 13 Stress and the Health Care Worker / 14 **Professionalism / 15** Personal Image / 16 Health and Physical Fitness / 17 **Licensure, Accreditation, Certification, and Registration / 17** **Keeping Current / 18** **Health Care Reform / 22** **Interpret and Accurately Spell Medical Terms and Abbreviations (Procedure 1-1) / 23**

2 INTERPERSONAL COMMUNICATIONS 109

Chapter 4 THE ART OF COMMUNICATION 110

Welcome to Administrative Medical Assisting / 4 Customer Service-Oriented Practice / 4 Patient Education / 5 **Career Advantages / 5 Employment Opportunities / 6** Administrative Medical Assistant / 6 Clinical Medical Assistant / 6 **Administrative Medical Assistant Job Responsibilities / 6 Interpersonal Skills / 7** Listen and Observe / 7 Interest and Concern / 7 Respect / 7 Sensitivity to Others / 11 Empathetic and Positive Attitude / 11 Initiative and Motivation / 11 Time Management / 11 Medical Assistant's Creed / 11 Team Interaction / 11 **Understanding Work-Related Emotional and Psychological Problems / 12** Work Relationships / 12 Aggressive versus Assertive Behavior / 12 Grieving or Distressed Patients / 12 Death and Dying / 13 Stress and the Health Care Worker / 14 **Professionalism / 15** Personal Image / 16 Health and Physical Fitness / 17 **Licensure, Accreditation, Certification, and Registration / 17 Keeping Current / 18 Health Care Reform / 22 Interpret and Accurately Spell Medical Terms and Abbreviations (Procedure 1-1) / 23**

Chapter 5 RECEPTIONIST AND THE MEDICAL OFFICE ENVIRONMENT 144

Welcome to Administrative Medical Assisting / 4 Customer Service-Oriented Practice / 4 Patient Education / 5 **Career Advantages / 5 Employment Opportunities / 6** Administrative Medical Assistant / 6 Clinical Medical Assistant / 6 **Administrative Medical Assistant Job Responsibilities / 6 Interpersonal Skills / 7** Listen and Observe / 7 Interest and Concern / 7 Respect / 7 Sensitivity to Others / 11 Empathetic and Positive Attitude / 11 Initiative and Motivation / 11 Time Management / 11 Medical Assistant's Creed / 11 Team Interaction / 11 **Understanding Work-Related Emotional and Psychological Problems / 12** Work Relationships / 12 Aggressive versus Assertive Behavior / 12 Grieving or Distressed Patients / 12 Death and Dying / 13 Stress and the Health Care Worker / 14 **Professionalism / 15** Personal Image / 16 Health and Physical Fitness / 17 **Licensure, Accreditation, Certification, and Registration / 17 Keeping Current / 18 Health Care Reform / 22 Interpret and Accurately Spell Medical Terms and Abbreviations (Procedure 1-1) / 23**

LIST OF TABLES

1-1 Certification and Registration
2-1 Highlights of Medical History
2-2 Summary of Managed Care Plan Requirements Including In- and Out-of-Network Physician Stipulations, Copayment versus Deductible Options, Payment Methods, and Authorization Requirements
2-3 Medical Specialties and Administrative Medical Assisting Job Requirements
2-4 Abbreviations for Physician Specialists and Health Care Professionals
3-1 New Physician Licensing Requirements
4-1 Types of Defense Mechanisms
4-2 Things to Avoid When Communicating
5-1 Fire Extinguisher Types and Uses
6-1 Telephone Decision Grid
6-2 Telephone Triage Levels and Risk Factors
6-3 Telephone Triage Response Guide
6-4 International Communications Telephone Aid
7-1 Appointment and Patient Care Abbreviations
8-1 Records Retention Schedule
8-2 Methods of Recycling and Disposing of Protected Health Information
9-1 Core-Set and Menu-Set Electronic Objectives for Eligible Providers
9-2 List of Body Areas and Organ Systems for Purposes of Examination
9-3 Internal Medical Record Review
9-4 Examples of Documents Found in a Medical Record
10-1 Five Schedules of Controlled Substances
10-2 Drug Routes
10-3 Common Prescription Abbreviations and Symbols
10-4 Common Errors and Dangerous Abbreviations to Avoid
10-5 Drug Classifications and Their Functions
11-1 Words Commonly Misspelled in Medical Office Correspondence
11-2 Common Writing Rules
11-3 Copier Problems with Possible Causes and Solutions
12-1 Typical Daily Mail in a Physician's Office and Its Distribution
12-2 Recommended Address Formats for Conventional and OCR Processing
12-3 Common Address Abbreviations
12-4 Two-Letter Abbreviations for the United States and Its Territories and Canadian Provinces
13-1 Summary of Individual State Time Limits in Years
(Statute of Limitations on Civil Actions) for Judgments and Collection of Oral/Written Contracts
13-2 Collection Abbreviations
15-1 Explanation of Debits and Credits
15-2 Bookkeeping Abbreviations and Definitions
16-1 Major Classifications of Medicare Part A Benefits: Hospital Insurance-Covered Services for 2012
16-2 Major Classifications of Medicare Part B Benefits: Medical Insurance-Covered Services for 2012
16-3 State Disability Information Summary for Five States and Puerto Rico
17-1 Sections of the *Current Procedural Terminology*
Codebook with Code Ranges
17-2 Selection of E/M Codes for Office/Other Outpatient and Inpatient Services
17-3 Code Selection Criteria for Consultations
17-4 *Current Procedural Terminology* Modifier Codes
17-5 Chapter Outline of Volumes 1 and 2 of the *International Classification of Diseases, 10th Revision, Clinical Modification* (*ICD-10-CM*), 2012 Official Draft Code Set
18-1 Recommended Contents of an Employee Handbook (Not All-Inclusive)
18-2 Front-Office Procedures Manual Assignment Headings
18-3 Types of Performance Evaluations with Definitions and Examples
19-1 Federal Insurance Contribution Act (FICA), 2011 Dollar Figures and Percentage Tax Rates Withheld from Salaries

PREFACE

The seventh edition of *Administrative Medical Assisting* features numerous content updates and additions as well as an expanded index to help locate terms and topics covered within the text. Discussions about **health care reform** legislation have been added to applicable chapters with an icon for identification; a timeline with implementation dates can be found in Chapter 21. This *textbook* was awarded the William Holmes McGuffey Award in Life Science in 2004 by the Text and Academic Authors Association for its excellence and longevity. It focuses on competencies for medical assisting programs outlined by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) and the Accrediting Bureau of Health Education Schools (ABHES) as well as certification test parameters set forth by the American Association of Medical Assistants (AAMA) and the American Medical Technologists (AMT). An emphasis has been placed on step-by-step procedures for various job skills and the development of critical thinking presented in real-life scenarios to help with the development of problem-solving skills.

The textbook material is designed for the learner who plans to work as an administrative (front-office) medical assistant in a private physician's office, single- or multiple-specialty clinic, or hospital setting; however, the skills presented also apply to other technicians and assistants who perform clerical functions similar to those of an administrative medical assistant. The book can be used in community colleges, vocational and commercial educational institutions, welfare-to-work programs, and in-service training in the private medical office. It is an appropriate textbook for a one- or two-semester course. It may be used for self-study if no formal classes are available in the community or if a medical assistant wants to increase his or her skills but is unable to attend classes. Finally, the book serves as a reference for the working medical assistant, featuring the most up-to-date methods of performing medical office tasks.

The *textbook* and *Workbook* chapters are arranged to better facilitate learning with legal and computer information integrated throughout. The chapters are divided into seven units that progress from professional and career responsibilities, interpersonal communications, records management, written communications, financial administration, and managing the medical office to the final unit, where the learner prepares for employment.

CONTENT FEATURES

New features are preceded by an asterisk (*).

- **Chapter content** is updated to reflect changes in competency requirements, technology, job responsibilities, insurance regulations, legal directives, and compliance mandates.
- **Objectives** are divided into (1) Learning Objectives that state chapter goals, (2) Performance Objectives in the *textbook* that contain a numbered list of step-by-step procedures, and (3) Performance Objectives for the *Workbook* containing a numbered list of Job Skills, provided as an opportunity for practice.
- **Customer service** is emphasized at the beginning of each chapter in a section titled *Heart of the Health Care Professional*.
- *__Key terms__ introduce the student to basic terminology at the beginning of each chapter and are listed throughout the chapter in bold, colored type, with expanded definitions in the

glossary at the end of the textbook. To listen to pronunciations, students are directed to go to the Merriam-Webster online dictionary.

- **Italicized terms* have been added throughout the text to emphasize additional terms that are routinely used in the health care profession and competency language. These terms are also listed in the index to help ease finding key topics.
- **Photographs** visually support textual content and give the learner a better perspective of the office duties and situations mentioned.
- ***Icons** give quick reference to Customer Service applications, Compliance issues, Patient Education boxes, Procedures, Stop and Think Case Scenarios, Summary of Certification Topics, Exam-Style Review Questions, Workbook Assignments, Computer Assignments, and Resources. An icon for Health Care Reform has been added within the chapter material for this edition to help the reader locate new federal laws that have been and will be implemented.
- ***Compliance issues** mandated by the federal government are emphasized by a color screened box with an icon for quick identification. Many cite HIPAA regulations and titles have been added to help locate important legal information; these are listed in the index.
- ***Patient Education boxes** describe how the medical assistant should keep the patient informed and titles have been added to help locate various types of educational situations; these are listed in the index.
- **Figures, tables,** and **examples**, enhanced in full color, present information in a succinct, easy-to-understand format. Examples are titled and indexed and each of these components is numbered for easy reference. These aids are referred to throughout each chapter to clarify concepts, illustrate graphics, and depict realistic scenarios.
- ***Chapter 3**, *Medicolegal and Ethical Responsibilities*, has new legal topics added, Stop and Think exercises, and multiple new *Workbook* Job Skills to satisfy competencies; this chapter was reviewed by a medical malpractice attorney for accuracy.
- ***Chapter 4**, *The Art of Communication*, has multiple procedures and *Workbook* Job Skills added to reinforce the concepts presented.
- ***Chapter 5**, *Receptionist and the Medical Office Environment*, covers the new topic of emergency preparedness and disaster planning. Multiple new *Workbook* Job Skills are added to educate students about office and community safety.
- ***Chapter 9**, *Medical Records*, was revised to include the latest language, technology, and trends in electronic medical record (EMR) management in an outpatient setting.
- ***New Chapters 16 and 17**. Chapter 16, *Health Insurance Systems and Claim Submission*, has been divided into two chapters. Now, all coding information including step-by-step directions to code diagnoses using *ICD-10-CM* is provided in Chapter 17, *Procedural and Diagnostic Coding*. These two chapters have been extensively revised to include the latest information in the insurance industry and can now be used as "stand-alone" chapters to teach a medical insurance billing and coding class. They can also be used as an adjunct for separate courses in this subject area.
- ***Chapter 20** (formerly Chapter 19), *Seeking a Position as an Administrative Medical Assistant*, has been moved to the Cengage Learning website (http://www.CengageBrain.com). It can now be downloaded and printed to use for instruction, assigned for extra credit, or obtained as an adjunct to a Career Development course.
- ***New Chapter 21**, *Summary and Future Health Care Trends*, provides a new short ending to the text and addresses global, cultural, environmental, political, and socioeconomic influences on health care, as well as future trends and goals to improve health care internationally. A health care reform timeline gives a quick glance at up-to-date legislation with implementation dates and an outlook into the job market and the student's externship.

Workbook

The *Workbook* is an essential resource available for use with this text. A realistic approach is experienced as the student assumes that he or she is employed by two physicians who are married to each other and who share a professional corporation. Through job skill exercises, the student, assuming the role of the administrative medical assistant, performs a variety of duties that are a realistic part of the day-by-day activities in the joint office of a general practitioner and a family practitioner. Following is a list of features. New features are preceded by an asterisk (*).

ACKNOWLEDGMENTS

With this edition, we celebrate 30 years in publication! The founding authors, Marilyn T. Fordney and Joan J. Follis, had a vision; it was developed right in their classrooms at Ventura Community College, Ventura, California. They pursued this vision with great dedication, perseverance, an abundance of hope, and plenty of enthusiasm, which made this textbook what it is today. I feel blessed to have grown from a contributing author, to a coauthor, and now a primary author. It is my desire to continue this vision into the future. Many students, physicians, friends, colleagues, and instructors have contributed valuable suggestions and interesting material throughout the years and I wish to express my thanks to all of them.

I am indebted to many individuals on the staff of Delmar Cengage Learning for encouragement and guidance. I express particular appreciation to Sarah Prime, senior product manager, who answered questions and helped motivate me along the way. I want to thank Rhonda Dearborn, executive editor, who allowed me to "fly solo" on this project and whose insight and vision I greatly admire. Special thanks go to Brooke Baker, content project manager, for overseeing the production process, and Jack Pendleton, senior art director for the beautiful color and unique design. In our transient environment, it is a rare occurrence to work with the same four key people on both the sixth and seventh editions; I feel very fortunate—thank you!

I would also like to express my gratitude to Cindy Correa, who shared her expertise of the Medical Office Simulation Software and developed exercises to incorporate the computerized medical office into the *Workbook* so students will be trained in both hands-on skills and computerized skills.

I also wish to state my deepest gratitude to the people and organizations who so willingly and enthusiastically contributed to the contents of this book. For this edition, independent reviewers were sought out for individual chapters. Each works in the field and offered extensive subject-area expertise. I take great pride in listing the following people who acted as consultants and assisted in reviewing various parts of the manuscript. Without their expertise, comments, and suggestions, this work would not be as complete as it is.

I would also like to express my gratitude to Cindy Correa, who shared her expertise of the Medical Office Simulation Software and developed exercises to incorporate the computerized medical office into the *Workbook* so students will be trained in both hands-on skills and computerized skills.

I also wish to state my deepest gratitude to the people and organizations who so willingly and enthusiastically contributed to the contents of this book. For this edition, independent reviewers were sought out for individual chapters. Each works in the field and offered extensive subject-area expertise. I take great pride in listing the following people who acted as consultants and assisted in reviewing various parts of the manuscript. Without their expertise, comments, and suggestions, this work would not be as complete as it is.

I would also like to express my gratitude to Cindy Correa, who shared her expertise of the Medical Office Simulation Software and developed exercises to incorporate the computerized medical office into the *Workbook* so students will be trained in both hands-on skills and computerized skills.

INDEPENDENT REVIEWERS AND CONTRIBUTORS

Jan Allen
Claims & Accounts Receivable Manager
In-Office Systems Support
Internal Medicine
Santa Paula, California

Holly M. Angel
Santa Barbara Bank & Trust
Santa Barbara, California

Steve P. Benich
Account Representative
Golden State Copiers and Mailing Systems
Camarillo, California

Barbara Britt
Human Resource Specialist
Port Hueneme, California

Cheryl L. Cabral
California Certified Shorthand Reporter
Electronic Medical Records
Ventura County Urology Medical Group
Ventura, California

Kara Chang
Medical Insurance Biller
Workers' Compensation Specialist
Ventura, California

William Clinkenbeard
Clinkenbeard, Ramsey & Spackman, LLP
Attorneys at Law
Santa Barbara, California

Monica Cristorean, NRCMA, CPC
Medical Billing Instructor
Career Colleges of America
South Gate, California

Allison Fedrick, MA
Educator and Career Services Associate
Santa Barbara Business College
Rancho Mirage, California

Amal Ghishan, CPC, ACS-EM
Practice Manager
Northridge Emergency Medical Group
Northridge, California

Carolyn Godfrey, RN
Community Memorial Hospital
Ventura, California

Jose V. Gonzalez
Assistant Bank Manager
Santa Barbara Bank & Trust
Santa Barbara, California

Laura Hernandez
Soteria Emergency Management Services
Ventura, California

Cynthia Hotta
Former Executive Senior Managed Care
Representative
GlaxoSmithKline
Inglewood, California

Margaret Kirby, CMA (AAMA)
Ventura Ear, Nose, & Throat Medical Group
Ventura, California

Janet LaMacchia
Travel Consultant
Oxnard, California

Karen Levein, CPC, CPC-I
Medical Office Procedures Instructor
Burbank Adult School
Duarte, California

Don Lyman, MBA, EA/IRS
Adjunct Professor of Accounting and Finance
University of Phoenix
Ventura, California

Terry Mesa, Clerk
United States Postal Services
Camarillo, California

Charline Rambaud, CPC, CPMA
AccuQuik Billing Service
Specialists in Medical Billing & Receivables
Management
Oak Park, California

Holly Scheaffer, CPC
Business Manager
Ventura, California

John Skovmand, Pharmacist
Seebers Pharmacy
Santa Paula, California

David Stork
Founder, Brain Injury Center

Unit 1

PROFESSIONAL AND CAREER RESPONSIBILITIES

1 A Career As an Administrative Medical Assistant 2

2 The Health Care Environment: Past, Present, and Future 30

3 Medicolegal and Ethical Responsibilities 62

CHAPTER 1

A CAREER AS AN ADMINISTRATIVE MEDICAL ASSISTANT

LEARNING OBJECTIVES

After reading this chapter and learning step-by-step procedures to gain job skills,* you should be able to:

- Demonstrate how customer service skills are applied in the medical office.
- Describe the variety of career advantages, employment opportunities, and areas of specialization open to those trained as administrative medical assistants.
- Itemize 10 job responsibilities of an administrative medical assistant.
- List interpersonal skills needed to be an administrative medical assistant.
- Establish priorities and implement time management principles to organize and perform clerical duties.
- Compare and contrast assertive and aggressive behavior.
- Discuss patient reactions to health problems and your role when interacting with a distressed patient or family member.
- Explain various patient reactions to death and name the stages of dying.
- Define stress and identify strategies to reduce stress and burnout.
- State various components in professionalism.
- Understand the importance of and opportunities for certification or registration in your area of study.
- Relate how a health care professional can keep current in medical knowledge, policies, procedures, and the latest trends in the medical community.

PERFORMANCE OBJECTIVES (PROCEDURES) IN THIS TEXTBOOK

- Interpret and accurately spell medical terms and abbreviations (Procedure 1-1).

PERFORMANCE OBJECTIVES (JOB SKILLS) IN THE WORKBOOK

- Interpret and accurately spell medical terms and abbreviations (Job Skill 1-1).
- Use the Internet to look up key terms and hear pronunciations (Job Skill 1-2).
- Prioritize a task list to practice time management skills (Job Skill 1-3).
- Use the Internet to obtain information on certification or registration (Job Skill 1-4).

*This textbook and the accompanying Workbook meet the educational components for entry-level administrative and general competencies outlined by CAAHEP and ABHES.

- Use the Internet to obtain information on certification or registration (Job Skill 1-4).
- Use the Internet to test your knowledge of anatomy and physiology or medical terminology (Job Skill 1-5).
- Use the Internet to obtain information on certification or registration (Job Skill 1-4).

CHAPTER OUTLINE

Welcome to Administrative Medical Assisting 4

Customer Service–Oriented Practice 4
Patient Education 5

Career Advantages 5

Employment Opportunities 6
Administrative Medical Assistant 6
Clinical Medical Assistant 6

Administrative Medical Assistant Job Responsibilities 6

Interpersonal Skills 7
Listen and Observe 7
Interest and Concern 7
Respect 7
Sensitivity to Others 11
Empathetic and Positive Attitude 11
Initiative and Motivation 11
Time Management 11
Medical Assistant's Creed 11
Team Interaction 11

Understanding Work-Related Emotional and Psychological Problems 12
Work Relationships 12
Aggressive versus Assertive Behavior 12
Grieving or Distressed Patients 12
Death and Dying 13
Stress and the Health Care Worker 14

Professionalism 15
Personal Image 16
Health and Physical Fitness 17

Licensure, Accreditation, Certification, and Registration 17

Keeping Current 18

Health Care Reform 22

Interpret and Accurately Spell Medical Terms and Abbreviations (Procedure 1-1) 23

KEY TERMS

Pronunciation: Go to: http://www.Merriam-Webster.com, type in the term, click on the sound symbol, and listen to the pronunciation.

accreditation
administrative medical assistant
aggressive
American Association of Medical Assistants (AAMA)
American Medical Technologists (AMT)
assertive
burnout
certification
Certified Medical Administrative Specialist (CMAS)
Certified Medical Assistant (CMA [AAMA])
clinical medical assistant
continuing education units (CEUs)
empathy
flextime
hospice
interpersonal skills
licensure
National Center for Competency Testing (NCCT)
National Certified Medical Assistant (NCMA)
National Certified Medical Office Assistant (NCMOA)
professionalism
recertification
Registered Medical Assistant (RMA)
registration
stress
sympathy

WELCOME TO ADMINISTRATIVE MEDICAL ASSISTING

Welcome to *Administrative Medical Assisting*. You have taken the first step into a world that will stimulate your mind, motivate your curiosity for learning, energize your work ethic, and enliven your spirit so that you will want to contribute something good to today's society.

A typical day in a medical office might include expediting an appointment so an anxious mother can bring in her ill infant, building rapport with a teenager who is afraid to tell the doctor about her promiscuous behavior, calming down a patient who is angry about a bill, reassuring a pregnant mother who is experiencing morning sickness for the first time, or offering a listening ear to a patient who has just received a problematic diagnosis. Every day is different and exciting, and each day offers challenges and opportunities for personal growth and advancement. It is an ever-changing, dynamic field, one where fascinating breakthroughs are taking place in patient care and technology and one in which the rewards always outweigh the task at hand.

Whether you are learning clerical skills to perform as an administrative medical assistant, pharmacy technician, massage therapist, or other type of health care professional, this book will help you learn step-by-step procedures needed to perform a full range of activities to master job skills that will enable you to demonstrate customer service, educate patients, and call upon your newly learned knowledge. As you become proficient in medical terminology and learn guidelines and laws, they will help you manage patient care and create a safe environment to promote healing. You will play an integral role in a medical office as you work closely with physicians or pharmacists and become a lifeline to many patients who rely upon you to educate and assist them. "The versatility of a well prepared medical assistant is what the physician practices are looking for and need to stay afloat in today's global market."*

HEART OF THE HEALTH CARE PROFESSIONAL

Service

Motto: "Think with empathy, act through service."

The heart of the health care professional should be directed at serving patients. Regardless of your duties, your approach should be service oriented because service is woven into all areas of medical assisting.

CUSTOMER SERVICE–ORIENTED PRACTICE

A vibrant medical practice is a service-oriented practice where the elements of customer service are demonstrated by the physician, management team, and all employees. Satisfied patients are the key to a health care provider's success. A willingness to serve patients is an attribute that all health care professionals need—those who do not have this attitude are in the wrong career. Serving means putting someone else's needs before your own. Patients often interrupt daily work routines, so it is imperative to continually remind yourself that serving the needs of patients is the reason for going into this profession (Figure 1-1).

Within the "Heart of the Health Care Professional," as shown at the beginning of each chapter, is a variety of ways to serve patient needs. As you work your way through this text and study the step-by-step procedures that will help you perform new job skills, you will be able to determine different ways that you can provide good customer service. Remember, each employee and patient may have a different idea about what "good" service means. All employees are customer service personnel at the same time they are performing other duties. Any time you have contact with a patient, it has an effect. Always put the patient above your own needs and routine duties. As you learn new job skills, the following questions will help you determine where customer service occurs:

- Has the patient's confidentiality been protected and physical safety ensured?
- Has the patient been dealt with in a courteous, respectful, and caring manner?
- How is the task that you are performing beneficial to the patient?
- How can this task be accomplished efficiently?
- Are you observing patient interactions, and are you aware if there is patient involvement or problems?
- What is the desired outcome for the patient?
- Have the patient's expectations been met?
- Have you seized every opportunity to educate the patient?

*Medical Assisting Education Review Board (MAERB) Report, Spring 2009.

Some of these career options offer specialized certifications. Although the terms *medical assistant* and *administrative medical assistant* are used primarily in this text, many of the job functions are similar to the clerical duties performed by other allied health professionals specializing in these areas.

Administrative Medical Assistant

A career as an administrative medical assistant offers the satisfaction of helping others as well as the opportunity to serve on a health care team. As the population continues to grow, so will the need for health care and the demand for workers in this field. Employment opportunities for those with clerical skills are available in physicians' offices (both solo and group practices), clinics, hospitals, dental offices, foundations, research institutes, public school health service departments, prisons, the armed services, insurance companies, public health departments, medical departments of large companies, Medicare agencies, managed care organizations, offices of nurse practitioners, outpatient facility centers, laboratories, pharmaceutical companies, and medical instrument and supply firms. Employment opportunities are also available in the fields of manufacturing, publishing, and teaching; and in freelancing, for example, as a self-employed insurance biller or medical transcriptionist, now known as a *medical language specialist* (MLS) or *speech recognition technician* (SRT).

COMPLIANCE

Privacy Officer

To adhere to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), a medical practice must have an appointed privacy official who drafts privacy policies and procedures and implements a program to educate and train physicians and all employees to the mandates of HIPAA. This person could be the OM. These policies and procedures become part of the office procedure manual.

Clinical Medical Assistant

The **clinical medical assistant** performs back-office or clinical duties, such as assisting during physical examinations, maintaining treatment rooms, sterilizing instruments, assisting with minor surgery, giving injections, performing electrocardiograms (ECGs), obtaining vital signs, performing phlebotomy, and doing laboratory procedures. Some states allow medical assistants to take x-rays without licensure; others require that the assistant be licensed.

Those who want active involvement and a great variety of duties can become medical assistants performing both administrative and clinical duties. (Online Chapter 20 has information on finding a job.)

The clinical duties mentioned, however, are beyond the scope of this book.

ADMINISTRATIVE MEDICAL ASSISTANT JOB RESPONSIBILITIES

The position of **administrative medical assistant** requires medical knowledge, organizational and business skills, and the ability to meet accepted performance standards of health care workers. Managed care has had an impact on the way in which medical assistants perform their jobs, and additional paperwork must be completed for preauthorization of tests or surgeries. Patients must be greeted, either on the telephone or on their arrival at the office. Appointments must be carefully scheduled for efficient use of every working moment. Written correspondence involves composing or transcribing dictated letters, and a medical assistant should have a good command of the English language—and sometimes additional languages. Insurance forms need to be completed and submitted either electronically or manually. The mail must be screened for security, opened, sorted, and acted on. Patients' chart notes must be typed or keyed into an electronic medical record system to record the progress of the patient. Medical records must be filed, photocopied for recordkeeping, or faxed to other facilities. Medical and office supplies have to be ordered and an inventory kept. The medical assistant oversees the reception room, making certain that furniture and magazines are in order and plants are fed and watered.

The administrative medical assistant is also in charge of collecting fees, billing patients, maintaining records on accounts receivable, and collecting overdue accounts, so basic mathematic skills are necessary. When invoices arrive, there are checks to be written for payment and records to be maintained on accounts payable. Banking and payroll may be two more of the medical assistant's functions.

Computer technology is now routinely found in the medical office, and medical assistants need to know computer programs to maintain electronic medical

role in wellness. A medical assistant with a positive attitude may act as a role model and may help encourage patients who are naturally negative or *pessimistic*.

Initiative and Motivation

Initiative and high *motivation* indicate job satisfaction to the employer, who is, of course, pleased with employees who are content and productive. An ambitious medical assistant also impresses patients. It is easy to spot a medical assistant who takes pleasure in performing office tasks and serving patient needs.

Time Management

Being able to manage time well is an attribute that can be learned while in the classroom. With effective time management an efficient medical assistant with good organizational abilities can often take over chores that free the physician to spend more time with patients. The medical assistant should be able to prioritize and perform multiple tasks. Each day a task list should be created and every job that needs to be done prioritized. Using self-discipline by self-imposing deadlines aids in overcoming indecision, vacillation, and procrastination. Remembering that patients come first will help set goals for the day instead of doing each task as it appears. The physician or office manager can help by giving an outline of priorities in the office setting.

Medical Assistant's Creed

Perhaps nothing states personal qualifications better than the Medical Assistant's Creed, which was adopted in 1996 by the American Association of Medical Assistants House of Delegates. It reads:

> *I believe in the principles and purposes of the profession of medical assisting. I endeavor to be more effective. I aspire to render greater service. I protect the confidence entrusted to me. I am dedicated to the care and well-being of all people. I am loyal to my employer. I am true to the ethics of my profession. I am strengthened by compassion, courage, and faith.*

EXAMPLE 1–1

Empathetic Phrases

"You seem to be upset."

"That must have been painful."

"How disturbing."

"What a frustration."

Team Interaction

Working as a medical assistant requires a *team effort*. The assistant should view every task as important and no job as too small or insignificant to do. You should establish a good working relationship with coworkers, treating them with respect and support. It is also important to get along with supervisors, accept criticism, and show regard for their authority. Those who can join in doing their part, no matter how small, are viewed as a vital part of a team. An assistant should reinforce effective rather than ineffective behavior and, instead of complaining about problems, focus on finding solutions. More staff members lose their positions because of an inability to get along with coworkers than because of an inability to perform office duties. Positive relations are further fostered by handling the special needs of people who are disabled with kindness and courtesy and by remaining composed when dealing with people who are unruly or inconsiderate.

UNDERSTANDING WORK-RELATED EMOTIONAL AND PSYCHOLOGICAL PROBLEMS

Even though there is a spirit of interdependence and teamwork among medical office staff, some frictions and irritations may arise. The medical assistant who is aware of types of behavior and conditions that may cause negative reactions, stress, and burnout, and who understands those reactions can attempt to head off problems before they become a matter of concern and affect productivity.

Work Relationships

Coworkers come in many shapes with a variety of personalities. As you strive to build good working relationships you will discover that some behaviors require action and some do not. For instance, the office *gossip* may distract you while conveying personal secrets or talking about others. The rule is to never tell anything that you do not want repeated. The *disruptor* may interrupt you with something trivial. Try to tell them politely but directly that you are busy and need to get your work done. The *credit hog* wants to take all the glory and usually does so in front of the supervisor. Most likely you will not have to do or say a thing because the credit

issues, and emotionally upset patients on a daily basis can cause stress for the health care worker. A fast-paced office, demands of the physician, emergency situations, lack of private time or space, and interactions with coworkers and other professionals can all add to the pressure and tension that are felt by the medical assistant. Also, personal circumstances such as financial obligations, relationship problems, or the illness or death of a loved one contribute to the emotional overload that sometimes occurs. Even positive events such as marriage, pregnancy, moving, or a promotion can add stress to the mix.

Ongoing stress can be overwhelming and a barrier to communication. As mentioned, events and situations, both positive and negative, can cause physical and psychological tension. The less control you have over the event or situation, the more you feel stress. Both physical and mental changes occur when stress levels increase. Symptoms such as aching muscles, difficulty concentrating, forgetfulness, loss of appetite, restless sleep, stomach pain, shortness of breath, a nervous tic, or a complete sense of exhaustion can appear. It is considered a contributing factor to many disorders society experiences today such as depression, headaches, hormonal changes, hypertension, and lowered resistance to disease. Some emotional components are crying, shouting, drinking alcohol, taking drugs, sleeping more than necessary, and becoming angry.

Coping with Stress

Occasionally people say, "a little bit of stress is good for you" or "there is good stress and bad stress." However, stress is often confused with challenges. A challenge will energize you, both physically and psychologically, as it motivates and pushes you to perform at a high level. A relaxed and satisfied feeling is realized once the challenge is met. Stress, on the other hand, can cause tension and create negative physical and emotional responses. Different people can cope with different amounts of stress.

To deal with stress you first need to be aware of what causes it. When the requirements of a job do not match the capabilities, resources, or needs of the worker, stress occurs. The multiple duties of the health care worker and changes in the work environment or home situation are common causes. Frustration may build, anger sets in, and before you know it, you are stressed out. After you identify its root, evaluate the situation to see if you can eliminate some of the sources that are the cause. Confront the problem directly and work toward a solution so you feel as if you have some control over the situation. Cultivate healthy relationships, take regular breaks at work, and schedule fun outings to help take your mind off the more serious side of life. Another way to cope with stress is to *adapt* (change) your behavior in response to stress. Use the following guidelines to adapt and help manage stress in the workplace:

- Go to bed and get up early to allow yourself plenty of sleep and more time before going to work.
- Notice what kind of day it is. Enjoy the environment, whether it is a bird singing, rain cleansing the earth, or a beautiful flower in the garden.
- Take your full lunch break and avoid discussing business. Eat slowly and enjoy your food by dining with an enthusiastic, good-natured staff member.
- Prepare to handle the responsibilities of your job by practicing skills. Accept your limitations and do not be afraid to acknowledge when you do not know how to do something. Instead, ask for help, get adequate instruction, and accept advice.
- Learn organizational skills, plan ahead, and prioritize tasks.
- Set realistic goals and remember there are always choices even when you feel otherwise.
- Practice relaxation techniques, such as deep breathing or focusing on something entirely different.
- Exercise your sense of humor; laughter is the best cure for tension.
- Do not overreact to problematic situations, instead be creative in exercising problem-solving skills and talk over difficult work situations with

PATIENT EDUCATION

Hospice

Hospice, a term used in the Middle Ages to signify a place where weary pilgrims could stop, rest, and refresh themselves before continuing on with their journey, has become a worldwide movement symbolizing a new kind of care for the terminally ill. In 1967, a British physician, Cicely Saunders, founded St. Christopher's Hospice in a London suburb and now, in the United States alone, there are over 1,500 hospice programs serving over 100,000 patients a year affiliated with the National Hospice Organization. Hospice information pamphlets are available for educational purposes, and the professional staff promotes comfort, safety, meaningful living, and closure for patients and families.

TABLE 1-1 Certification and Registration *(continues)*

Title and Abbreviation	Description to Obtain Certification or Registration	Professional Association Mailing Address and Telephone Number	Web Site and E-Mail Addresses
Certified in Healthcare Privacy and Security (CHPS)	Eligibility requirements and pass privacy (CHP) and security (CHS) examinations	American Health Information Management Association (AHIMA) 233 N. Michigan Ave., 21st Floor Chicago, IL 60601-5809 (800) 335-5535	http://www.ahima.org info@ahima.org
Certified Information Systems Security Professional (CISSP)	Pass examination and submit endorsement form	International Information Systems Security Certification Consortium, Inc. (ISC) 1964 Gallows Rd., Ste. 210 Vienna, VA 22182 (866) 462-4777	http://www.isc2.org
Certified Medical Assistant (CMA [AAMA])	Graduate from accredited medical assisting program; apply to take national certifying examination	American Association of Medical Assistants 20 North Wacker Dr., Ste. 1575 Chicago, IL 60606 (800) 228-2262	http://www.aama-ntl.org visit Web site for e-mail address
Certified Medical Biller (CMB)	Pass 2-hour examination written for physician's office billers and other outpatient facilities	American Association of Medical Billers PO Box 44614 Los Angeles, CA 90044-0614	http://www.billers.com/aamb AAMB@aol.com
Certified Medical Billing Specialist (CMBS)	Pass 3-hour examination	Medical Association of Billers 2620 Regatta Dr., Ste. 102 Las Vegas, NV 89128 (702) 240-8519	http://www.physicianswebsites.com mailroom@physicianswebsites.com
Certified Medical Manager (CMM)	Minimum of 3 years' experience Twelve college credit hours 200 multiple-choice questions	Professional Association of Health Care Office Managers 1576 Bella Cruz Dr., Ste. 368 Lady Lake, FL 32159-9712 (800) 451-9311	http://www.pahcom.com cmm@pahcom.com
Certified Medical Practice Executive (CMPE)	Two years' experience managing a medical practice	Medical Group Management Association, American College of Medical Practice Executives (affiliate) 104 Inverness Terrace East Englewood, CO 80112 (877) 275-6462	http://www.mgma.com/acmpe support@mgma.com
Certified Medical Reimbursement Specialist (CMRS)	Self-study program; successfully pass 18 sections of examination	American Medical Billing Association 2465 E. Main Davis, OK 73030 (580) 369-2700	http://www.ambanet.net/cmrs.htm larry@brightok.net

© Cengage Learning 2013

PROCEDURE 1-1

Interpret and Accurately Spell Medical Terms and Abbreviations

OBJECTIVES: To enhance knowledge of medical terminology, interpret abbreviations, and accurately spell medical terms while reading patients' chart notes.

EQUIPMENT/SUPPLIES: One sheet of white 8½" by 11" paper and pen or pencil.

DIRECTIONS: Follow these step-by-step directions, which include rationales, to learn this procedure. Job Skill 1-1 and additional exercises entitled "Abbreviation and Spelling Review" are presented at the beginning of each chapter of the Workbook so that you can practice this skill.

1. Read a patient's medical record.
2. Identify unfamiliar medical terms.
3. Use a medical dictionary to locate and learn the meanings of each medical term.
4. Break the term apart into word components (i.e., root, prefix, suffix) and memorize the spelling of each medical term.
5. Find abbreviations in each chart or progress note that you do not understand or appear unfamiliar to you.
6. Decode and define each abbreviation (see Part IV of the Workbook).

STOP AND THINK CASE SCENARIO

Listen and Observe

SCENARIO: A patient who is usually cheerful comes into the office and sits in the corner not talking to anyone. She looks grumpy and her posture is one of dejection.

CRITICAL THINKING: What would you think and say to her?

_____

_____

_____

_____

your supervisor. Always be open to share ideas and receive suggestions.

- Create and rely on a good support system. Whether it be family, friends, or coworkers, share your feelings and talk over your problems without complaining.
- Think positive and strive for a wholesome balance in your life. Monitor your own health by getting regular checkups, eating a balanced diet, resting adequately, exercising consistently, and relaxing regularly. Take quiet time to be alone, reflect, and reenergize your batteries.
- If you are not able to adapt, seek help from professionals or support groups.

By recognizing stress, understanding its common causes, and learning to apply techniques to reduce it, you can learn to cope with it, reduce its effects on your life, and live a healthier, happier life. You can also help educate patients about stress management.

Networking with peers at workshops and conventions is an additional way to keep in tune with the medical environment outside your office. By building relationships with other office personnel, you can share ideas, increase your knowledge, and receive support when implementing new laws and regulations that are mandated by the government.

HEALTH CARE REFORM*

The government has been trying to reform our health care system for decades. Health care reform was listed as a priority in the Truman, Nixon, and Carter administrations—but no reforms were passed. During the Clinton administration, legislation for the Health Security Act of 1993 was introduced but also failed to pass.

As this textbook is published, health care reform continues to be debated in the news and in households across America.

FOCUS ON CERTIFICATION*

CMA Content Summary

- Medical terminology
- Death and dying
- Defense mechanisms
- Professionalism
- Empathy/sympathy
- Understanding emotional behavior
- Internet services
- Time management

RMA Content Summary

- Medical terminology
- Abbreviations and symbols
- Licensure, certification, registration
- Credentialing requirements
- Professional development and conduct
- Interpersonal skills and relations
- Instructing patients

CMAS Content Summary

- Medical terminology
- Professionalism
- Continuing education

REVIEW EXAM-STYLE QUESTIONS

1. Among a medical assistant's interpersonal skills, the most important personality trait is:
   a. dedication
   b. consideration and respect for others
   c. displaying a sense of warmth and sensitivity
   d. liking people and being able to get along with other individuals
   e. dedication to the profession of medical assisting

2. Being able to put yourself in the patient's situation is commonly referred to as:
   a. sympathy
   b. empathy
   c. having a positive attitude
   d. identification
   e. commiseration

3. The Medical Assistant's Creed was adopted in:
   a. 1954
   b. 1966
   c. 1996
   d. 1998
   e. 2000

4. Being assertive means to:
   a. respect others and reflect professional confidence
   b. be aggressive in your approach with people
   c. convince and manipulate
   d. concentrate on your own agenda
   e. confront with a righteous attitude

5. Grieving or distressed patients tend to be:
   a. subdued or quiet
   b. talkative or inquisitive
   c. loud and volatile
   d. distraught
   e. all of the above

6. Although patients do not always go through the stages of dying in the order presented, the fourth stage is usually:
   a. anger
   b. bargaining
   c. depression
   d. acceptance
   e. denial

*This textbook and the accompanying Workbook meet the entry-level administrative and general competencies for the CMA outlined by the AAMA Examination Content Outline and Occupational Analysis and for the RMA and CMAS outlined by the AMT Competencies, Construction Parameters, and Examination Specifications (see Competency Grids in Appendix B).

RESOURCES

Certification Review Books

American Association of Medical Assistants CMA Practice Exams:
Anatomy and Physiology and Medical Terminology
Web site: http://aama-ntl.org/
Go to: CMA (AAMA) Exam, Prepare for the CMA (AAMA) Exam, select:
1. Study Resource
2. Exam Outline
3. Practice Exam

American Medical Technologist
Practice Exams
(800) 354-9706
Web site: http://www.amt1.com

Comprehensive Medical Assisting Exam Review: Preparation for the CMA, RMA, and CMAS Exams,
3rd edition, 2011
J.P. Cody
Delmar Cengage Learning
(800) 354-9706
Web site: http://www.cengagelearning.com

Medical Assisting Exam Review Online, 1st edition
Delmar Cengage Learning
Web site: http://www.cengage.com/community/maexamreview

*Prentice Hall's Health Question and Answer Review for the Medical Assistant,*7th edition
Tom Palko, Hilda Palko
© 2006 Prentice Hall
(800) 922-0579
Web site: http://www.pearsoned.com

Internet

AAMA E-Learning Center
Articles—go to: E-Learning Center
Web site: http://www.aama-ntl.org

Center for Professional Well Being
Web site: http://www.cpwb.org

Death with Dignity National Center
Web site: http://www.oregon.gov/DHS

Health Care Reform
Web site: http://www.whitehouse.gov/healthreform

National Center for Health Statistics
Centers for Disease Control and Prevention
Web site: http://www.cdc.gov/nchs

Online Dictionary
Computer, Law, Legal, and Medical
Web site: http://www.online-medical-dictionary.org
Medical, Regular, Spanish/English, and Thesaurus
Web site: http://www.m-w.com (Merriam-Webster)
Acronyms and Abbreviations
Web site: http://www.acronymfinder.com

Newsletters

Conomikes Reports on Medical Practice Management (monthly newsletter)
Conomikes Associates, Inc.
(800) 421-6512
Web site: http://www.conomikes.com

The Doctor's Office (monthly newsletter)
HCP, Inc.
(800) 650-6787
Web site: http://www.hcpro.com

National Institutes of Health Newsletter
U.S. Department of Health and Human Services
Web site: http://www.nih.gov

Professional Magazines

Advance (biweekly-free)
Merion Matters
(800) 355-5627
Web site: http://www.advanceweb.com
Select your area of interest.

Professional Organizations

American Academy of Professional Coders
2480 South 3850 West, Suite B
Salt Lake City, UT 84120
(800) 626-CODE (2633)
Web site: http://www.aapc.com

American Association of Medical Assistants, Inc.
20 North Wacker Drive, Suite 1575
Chicago, IL 60606
(800) 228-2262
Web site: http://www.aama-ntl.org

American Health Information Management Association
233 North Michigan Avenue, 21st Floor
Chicago, IL 60601-5809

APPENDIX A

The following instructions contain information needed to complete the CMS-1500 claim form (08/05) using optical character recognition (OCR) guidelines for commercial payers, Medicare (Medicare/Medicaid, Medicare/Medigap, and Medicare Secondary Payer), and TRICARE programs. Information on specific coverage guidelines, program policies, and practice specialties is not included. Consult your local intermediary or commercial insurance carrier for detailed instructions.

When generating paper claims from a computer, some software programs insert the commercial carrier's name and address in the top right corner of the CMS-1500 claim form; however, guidelines state that this area is to be left blank. When completing a claim form for the *Workbook* exercises, insert this information to indicate where the claim is to be sent.

When generating paper claims from a computer, some software programs insert the commercial carrier's name and address in the top right corner of the CMS-1500 claim form; however, guidelines state that this area is to be left blank. When completing a claim form for the *Workbook* exercises, insert this information to indicate where the claim is to be sent.

When generating paper claims from a computer, some software programs insert the commercial carrier's name and address in the top right corner of the CMS-1500 claim form; however, guidelines state that this area is to be left blank. When completing a claim form for the *Workbook* exercises, insert this information to indicate where the claim is to be sent.

When generating paper claims from a computer, some software programs insert the commercial carrier's name and address in the top right corner of the CMS-1500 claim form; however, guidelines state that this area is to be left blank. When completing a claim form for the *Workbook* exercises, insert this information to indicate where the claim is to be sent.

When generating paper claims from a computer, some software programs insert the commercial carrier's name and address in the top right corner of the CMS-1500 claim form; however, guidelines state that this area is to be left blank. When completing a claim form for the *Workbook* exercises, insert this information to indicate where the claim is to be sent.

When generating paper claims from a computer, some software programs insert the commercial carrier's name and address in the top right corner of the CMS-1500 claim form; however, guidelines state that this area is to be left blank. When completing a claim form for the *Workbook* exercises, insert this information to indicate where the claim is to be sent.

When generating paper claims from a computer, some software programs insert the commercial carrier's name and address in the top right corner of the CMS-1500 claim form; however, guidelines state that this area is to be left blank. When completing a claim form for the *Workbook* exercises, insert this information to indicate where the claim is to be sent.

When generating paper claims from a computer, some software programs insert the commercial carrier's name and address in the top right corner of the CMS-1500 claim form; however, guidelines state that this area is to be left blank. When completing a claim form for the *Workbook* exercises, insert this information to indicate where the claim is to be sent.

When generating paper claims from a computer, some software programs insert the commercial carrier's name and address in the top right corner of the CMS-1500 claim form; however, guidelines state that this area is to be left blank. When completing a claim form for the *Workbook* exercises, insert this information to indicate where the claim is to be sent.

GLOSSARY

The number in parentheses after each term is the chapter in which the term is discussed in depth.

A

ABA routing number (14) Coding system developed by the American Bankers Association and used on checks to identify the location of the bank; also called bank number or transit

abstract (9) In the context of handling a medical record, to extract, or take out, specific information or to summarize from documentation in a patient's chart; often done for insurance purposes

account (15) Formal record of all transactions made on an individual's financial record, listing debits, credits, and balance; may be computerized. In a medical practice using a manual bookkeeping system, this term is referred to as a ledger or ledger card.

accounts receivable (A/R) (13) Total amount of money owed for services rendered by all parties

accounting (15) A system of recording and summarizing business and financial transactions and analyzing, verifying, and reporting the results

accounts payable (19) Amount of money due to a creditor on an account

accounts payable (A/P) ledger (15) Record book that lists detailed amounts owed to creditors for the operation of a business, such as supplies and equipment, services rendered, or facility expenses

accounts receivable (A/R) ledger (15) Record book that lists all patients' outstanding accounts showing how much each one owes for services rendered

accreditation (1) Process of meeting a state standard or being evaluated and recognized by a national organization as meeting predetermined standards

active listening (4) Giving the speaker your undivided attention, resisting urges to respond verbally, mentally focusing and concentrating on the message being relayed

add-on codes (17) *CPT* five-digit codes, indicated by a plus symbol (1), that have been designed to be used with primary procedure codes; descriptions usually start with "each additional," "list separately," or "second lesion"

adjudicate (16) To settle judicially as in a determination of payment for an insurance claim

adjuster (16) Employee of an insurance carrier to whom a case is assigned and who follows the case until it is adjusted, or settled; grants verbal authorization in workers' compensation cases for testing, procedures, surgeries, and referrals

adjustment (15) Credit entry made on an account or ledger to decrease a balance that may be due to professional discounts, courtesy adjustments (write-offs), disallowances by insurance companies, or to correct bookkeeping errors

administrative law (3) Law that governs the activities of government agencies such as the Internal Revenue Service, Medicare, and Medicaid

administrative medical assistant (1) Office personnel whose responsibilities include a variety of secretarial and clerical duties. In a physician's office, works in the front office and may perform managerial and supervisory functions, manage office personnel, and participate in service activities aimed at improving the health of the community.

Advance Beneficiary Notice (ABN) (16) Waiver of liability form provided by the physician's office and given to Medicare beneficiaries to be signed prior to services being rendered that may be deemed not medically necessary and therefore not paid by Medicare

advance directive (3) Document stating an individual's preference about treatment if the person becomes incompetent or unable to communicate with medical personnel. It may instruct physicians to withhold or withdraw life-sustaining procedures, or it may contain a request to receive all available treatment. Two types of advance directives are a living will and health care (durable) power of attorney.

agenda (18) List of items to be discussed at a staff meeting

aggressive (1) One whose behavior is belligerent, confrontational, pushy, forward, or overbearing

aging accounts (13) Analysis of accounts receivable indicating 30, 60, 90, and 120 days delinquency

alphabetical filing (8) Arrangement of names in alphabetical sequence according to filing units

American Association of Medical Assistants (AAMA) (1) National association of medical assistants, medical assisting students, and medical assisting educators with both state and local chapters; recognized by the American Medical Association

American Medical Technologists (AMT) (1) Association that features a registered medical assistant (RMA) and certified medical administrative specialist (CMAS) program and examination for certification as well as student membership

INDEX

A

Ability, 103–104, 106–108
Absenteeism, 614
Academic skills, 598, 604–606
Acceptance, by group, 102
Accommodator, conflict style, 456
Accommodators, learning style, 81–83
Accomplishments, rewarding, 115, 391
Accountability, 121–122, 421
Achievement, habit of, 118, 437
Adams, J. Stacy, 438
Adams, John Quincy, 96
Adaptation, 161
Ad hoc committees, 146
Adjourn, motion to, 288–289, 306
Adjourned meeting, defined, 282
  Administrative ability, 116
  Aesthetic values, 518
  Affective attitudes, 496
  Affective learning, 74–76
  Affective skills, 202
  Affiliation, 140, 437
    Affirmation statement, 58
    Agenda, meetings, 289, 335
    Aggressive leadership style, 62–63
    Aggressors, group discussions, 156
    Agricultural education, leadership and, 6–9, 24
Agriculture, careers in, 549–551
Alderfer, C. P., 433–434
Alessandra, Tony, 58
American flag, 18
Amendments, motion for, 278–279
Anecdoters, group discussions, 156
Anger management, 460–461
Apathy, 331
Appeal process, employment, 616–617
Appeals, motions for, 285–286
Applications, employment, 574–578
Appreciation, showing, 115
  Apprenticeship programs, 552
  Articulation, public speaking, 210
  Assertive communication style, 63–64
  Assertiveness, 526
    Assimilators, learning style, 84–86
    Atmosphere, group dynamics, 151–152
    Attitude
    behavior and, 498–500
    changing, 504–506
    defined, 98
democratic leadership and, 139
employment and, 506–508
formation of, 496–498
importance of, 494–496, 502–504
job success and, 606–608, 609
relationships and, 500–502
types of, 496
Audience, public speaking, 202–203, 207–208, 224–225
Auditory learners, 79
Authentic leaders, 14–15
Authoritarian atmosphere, 151
Authoritarian leadership, 16, 20–21, 25–29, 63
Authority, exercising, 105
Authority, respect for, 526, 613, 614–615
Autocratic leadership, 138–139, 371
Availability, of leaders, 112
Avocational job placement, 552–553
Avoidance learning, 439
Avoider, conflict style, 456

B

Ability, 103–104, 106–108
Absenteeism, 614
Academic skills, 598, 604–606
Acceptance, by group, 102
Accommodator, conflict style, 456
Accommodators, learning style, 81–83
Accomplishments, rewarding, 115, 391
Accountability, 121–122, 421
Achievement, habit of, 118, 437
Adams, J. Stacy, 438
Adams, John Quincy, 96
Adaptation, 161
Ad hoc committees, 146
Adjourn, motion to, 288–289, 306
Adjourned meeting, defined, 282
  Administrative ability, 116
  Aesthetic values, 518
  Affective attitudes, 496
  Affective learning, 74–76
  Affective skills, 202
  Affiliation, 140, 437
    Affirmation statement, 58
    Agenda, meetings, 289, 335
    Aggressive leadership style, 62–63
    Aggressors, group discussions, 156
    Agricultural education, leadership and, 6–9, 24
Agriculture, careers in, 549–551
Alderfer, C. P., 433–434
Alessandra, Tony, 58
American flag, 18
Amendments, motion for, 278–279
Anecdoters, group discussions, 156
Anger management, 460–461
Apathy, 331
Appeal process, employment, 616–617
Appeals, motions for, 285–286
Applications, employment, 574–578
Appreciation, showing, 115
  Apprenticeship programs, 552
  Articulation, public speaking, 210
  Assertive communication style, 63–64
  Ability, 103–104, 106–108
Absenteeism, 614
Academic skills, 598, 604–606
Acceptance, by group, 102
Accommodator, conflict style, 456
Accommodators, learning style, 81–83
Accomplishments, rewarding, 115, 391
Accountability, 121–122, 421
Achievement, habit of, 118, 437
Adams, J. Stacy, 438
Adams, John Quincy, 96
Adaptation, 161
Ad hoc committees, 146
Adjourn, motion to, 288–289, 306
Adjourned meeting, defined, 282
  Administrative ability, 116
  Aesthetic values, 518
  Affective attitudes, 496
  Affective learning, 74–76
  Affective skills, 202
  Affiliation, 140, 437
    Affirmation statement, 58
    Agenda, meetings, 289, 335
    Aggressive leadership style, 62–63
    Aggressors, group discussions, 156
    Agricultural education, leadership and, 6–9, 24
Agriculture, careers in, 549–551
Alderfer, C. P., 433–434
Alessandra, Tony, 58
American flag, 18
Amendments, motion for, 278–279
Anecdoters, group discussions, 156
Anger management, 460–461
Apathy, 331