

B	I	N	G	O
Referral	Appeal process	Coding error	Policy number	In-network provider
Claim number	Prior authorization	Out-of-network provider	Billing statement	Primary insurer
Claim adjustment	Denied claim	FREE	EOB (Explanation of Benefits)	Premium
Eligibility verification	Patient responsibility	Covered services	Medical necessity	Coordination of benefits
Claim filing deadline	Claim form	Medical records request	Claim status	Out-of-pocket maximum

B	I	N	G	O
Reimbursement	Pre-existing condition	Patient responsibility	Out-of-network provider	Premium
Claim filing deadline	Claim form	Out-of-pocket maximum	Medical necessity	Claim number
Medical records request	Billing statement	FREE	Denied claim	Appeal process
In-network provider	Referral	Secondary insurer	Claim status	Claim adjustment
Policy number	Co-pay	EOB (Explanation of Benefits)	Coding error	Covered services

B	I	N	G	O
Medical records request	Claim number	Patient responsibility	Out-of-pocket maximum	Co-pay
Billing statement	Secondary insurer	Coding error	Reimbursement	Provider ID
Claim status	Premium	FREE	Eligibility verification	Policy number
Appeal process	Claim form	Medical necessity	EOB (Explanation of Benefits)	Deductible
Referral	Claim adjustment	Primary insurer	Claim filing deadline	Prior authorization