

Medical Coding

ICD-9-CM & ICD-10-CM

NOTE: Names in *italic* are unique to MCL-9-03M. Names in *red* are unique to MCL-10-03M. Names in *black* are only in both data sets.

General Coding Conventions & Official Guidelines

1. The ICD-9-CM algorithm tables include the Section "Index to Diseases," which identifies "Hypertension, Table," and "Neoplasms, Table," and shows in parentheses the code category for each section. "Diseases and Disorders" and "Neoplasms" are listed under "Disease and Disorders." The ICD-9-CM algorithm includes instructions to "Index to Diseases and Disorders," "Neoplasms, Table," "Table of Drugs and Chemicals," and "Index to External Causes."
2. The ICD-9-CM Tabular List includes codes 001-999.9, V codes, and E codes. The ICD-9-CM Tabular List includes all codes A-Z.
3. Always code directly from the alphabetical index. Always check the Tabular List to confirm the code is accurate and complete.
4. Codes must be reported to their highest level of specificity. When a code does not distinguish the appropriate specificity, leave the documentation; the physician should be checked for the correct report.
5. ICD-9-CM uses Roman Numerals I-VI, digits 0-9. Codes must be reported with the total number of digits required. Symbols in the Tabular List will indicate the codes where additional digits are required. ICD-9-CM codes are three to seven alphanumeric characters. Codes are also reported with the required number of zeros, indicating the seventh character, when applicable. A placeholder of the letter X is used to indicate the inclusion of the seventh character when there is no alphabetic fifth or sixth character. EX: 500.01X4 Crushing injury of right elbow, wrist and forearm
6. INCLUDES and EXCLUDES notations:
 - A. INCLUDES provides additional diagnostic statements that are included in the code definition. EX: 550 Conduction INCLUDES common duct cysts, CSD
 - B. EXCLUDES identifies conditions that are excluded as follows:
 - i. EXCLUDES 1 identifies conditions that are excluded by category. EX: 200.1 Inguinal hernia EXCLUDES protrusion, 200.3 HSI.
 - ii. EXCLUDES 2 is the same as EXCLUDES 1, ICD-9-CM, identifying you to a more appropriate code category for this condition. This means that this code and the referenced alternative code are mutually exclusive (i.e., they cannot exist at the same point at the same time). EX: 500.0 Fracture of elbow (osteoma) EXCLUDES 2 Osteoid neck, hyperostosis 500.011
 - C. EXCLUDES 3 identifies conditions that are not included in the code category. The appropriate alternative code may or may not be appropriate to report in addition to this code. EX: Q20 Venous complications and hemorroids in pregnancy EXCLUDES 3 Obstetrical puerperium, embolism Q208-1
7. NCC lists a hierarchy classification system for other codes, and appropriate terms as follows: NEC (Not Elsewhere Classified), unspecified term NEC (N) Designation, any (N) Code.
8. NCC lists alternative specified terms that the documentation does not provide even detailed terms as "Unspecified"; EX: 200.2 Amyotrophic Lateral Sclerosis Hypoalimantosis NEC.
9. Denials () indicate when two terms do not apply; abbreviations, assigned to the Tabular List. EX: 714.71 Abnormal calcification [ENAC] DO: Thyroid code Bapoptosis ()
10. Alternates () can also indicate secondary manifestation codes in the alphabetic index. EX: Diabetes, Insulin treated 250.011
11. Hierarchical brackets () appear in the alphabetic index to signal a second, mandatory code. EX: ear disease 360.1 Ear, middle () 360.11 Tympanitis (middle ear)
12. Codes with a slash (/) are listed but do not show a slash providing a repeated term code with a slash below. They are listed with each of the codes above the code.

IHC: IHC: nonspecific abnormal findings at:
 - Epitheliopharynx
 - Larynx/voicebox/supraglottis (schwann)
 - Cervical esophagus

13. *Reproductive Clones* should be assigned a nonessential modifier (such as "optional" or "tentative") that may or may not be included in the documentation. **EX: 322.51** (Constructive of tendon transfer). **R04** (Tendon transfer of infant to adult)
14. Signs and symptoms should only be reported with separate codes when there is no documentation of a confirmed diagnosis that includes those signs and symptoms.
15. Communicable diseases (e.g., codes that report two diagnoses, a diagnosis with a carrier status, or a disease with a less developed form of the virus in preference to multiple findings, unless specified). **EX: 042.00** (0) Acute infectious disease with communicable agent. **EX: 042.00** (0) Acute infectious disease with communicable agent. **EX: 042.00** (0) Acute infectious disease with communicable agent.
16. Communicable codes do not preclude the use of additional codes to report additional details about the condition if they are not provided by the communicable code.
17. Each diagnosis code may only be reported once per encounter. This applies to bilateral conditions and codes that are reported with the same code.
18. The word and should be translated as "and/or."
19. The word with alternates "due to," "as well as," "associated with,"
20. When the alphabetic index directs you to use or use first, it is provide guidance

[illegible]

Phlebotomus — see Anisophteiidae
Phlebotomus — see also Phlebotomus, right
GULAG

- [illegible]

Chapter-Specific Official Guidelines

Information on the availability of the book can be found at <http://www.elsevier.com/locate/locate/locate>

1. Infectious and Parasitic Diseases (IDP) (1-399)
NOTE: Coding instructions for "Latin America" and "underdeveloped areas" are given in the Introduction, at 1.1.1.1.1.1.1.

- INCLUDES diseases generally recognized as communicable or zoonotic, as well as a few diseases of uncertain but possibly infectious origin
- CLASSIFIED acute respiratory infections (A00-A09), acute or suspected cases of infectious mononucleosis (A01-A02.9), certain localized infections, and a few sexually transmitted diseases (A50-A59)

1. Capabilities, Information, and Perceptions Dimensions

- **USCIBS** processes primarily recognized as communicative or nonverbal.
- New additional code to identify resistance to antiretroviral drugs (245)
- **DOCLONES** variable limited infections less body system-related disorders, infectious and parasitic

discusses socialization among youth, childhood, and the playground (2008), and childhood and other issues and concerns (2008a, 2008b, 2009).

- [illegible]

Conclusions

On 27 February, a revised model of the 2009 H1N1 influenza epidemic in Hong Kong was published, which predicted 100,000 cases and 1000 deaths.

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- Patient with code 000 by ICD-9 has 3450 infections
- Code only confirmed cases
- Select on and sequencing of HIV codes
 - Patient diagnosed for HIV-related condition
 - Patient with HIV disease admitted for unrelated condition
 - Unrelated HIV patient is newly diagnosed
 - Acute diagnosis, follow-up or monitoring after
 - Patient never had HIV related condition

Previously discharged H1N1-related cases.
H1N1 infection, its management, risk factors, and other parameters.

Row 1: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

Information agents are the objects which sources classified to

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Large standing water bodies, such as the Great Lakes, are also important for wildlife, especially waterfowl, and provide habitat for many species of fish and aquatic plants.

- [illegible]

Medical Coding Icd 9 Icd 10 Cm Quick Study Guide

Carol J. Buck



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Step-by-Step Medical Coding, 2013 Edition - E-Book Carol J. Buck, 2012-12-14 Take your first step toward a successful career in medical coding with comprehensive coverage from the most trusted source in the field Step by Step Medical Coding 2013 Edition is the practical easy to use resource that shows you exactly how to code using all of today's coding systems In depth step by step explanations of essential coding concepts are followed by practice exercises to reinforce your understanding In addition to coverage of reimbursement ICD 9 CM CPT HCPCS and inpatient coding the 2013 edition offers complete coverage of the ICD 10 CM diagnosis coding system in preparation for the eventual transition No other text on the market so thoroughly prepares you for all coding sets in one source Dual coding in Units 4 and 5 where both ICD 10 and ICD 9 answers are provided for every exercise chapter review and workbook question ensures you can code using the systems of both today and tomorrow Complete coverage of the new ICD 10 code set in Unit 2 prepares you for the eventual transition from ICD 9 to ICD 10 Official Guidelines for Coding and Reporting boxes in Units 2 3 and 5 present the official outpatient and inpatient guidelines alongside text discussions Concrete real life coding examples help you apply important coding principles and practices to actual scenarios from the field Over 500 total illustrations of medical procedures or conditions help you understand the services being coded Four coding question variations develop your coding ability and critical thinking skills One answer blank for coding questions that require a one code answer Multiple answer blanks for coding questions that require a multiple code answer Identifiers next to the answer blank s to guide you through the most difficult coding scenarios Answer blanks with a preceding symbol 3 interlocking circles indicates that the user must decide the number of codes necessary to correctly answer the question In text exercises Quick Checks and Toolbox features reinforce coding rules and concepts emphasize key information and test your retention and understanding From the Trenches Coding Shots Stop Caution Check This Out and CMS Rules boxes offer valuable up to date tips and advice for working in today's medical coding field Coder's Index makes it easy to instantly locate specific codes Practice activities on the companion Evolve website reinforce key concepts from the text Updated content presents the latest coding information so you can practice with the most current information available **Step-By Step Medical Coding 2011 Edition - E-Book** Carol J. Buck, 2011-02-11 Updated content reflects the latest coding developments so you can practice with the most current information available New ICD 10 CM chapters prepare you for the upcoming 2013 transition ICD 10 CM Official Guidelines for Coding and Reporting boxes contain excerpts of the actual guidelines presenting the official wording alongside in text discussions to help you better understand upcoming changes **Step-by-Step Medical Coding, 2014 Edition - E-Book** Carol J. Buck, 2013-12-13 Take your first step toward a successful career in medical coding with in depth coverage from the most trusted name in coding education Carol J Buck's Step by Step Medical Coding 2014 Edition is a practical easy to use resource that shows you exactly how to code using all current coding systems Explanations of coding concepts are followed

by practice exercises to reinforce your understanding In addition to coverage of reimbursement ICD 9 CM CPT HCPCS and inpatient coding this edition provides complete coverage of the ICD 10 CM diagnosis coding system in preparation for the upcoming ICD 10 transition No other text on the market so thoroughly covers all coding sets in one source Over 500 illustrations of medical procedures and conditions help you understand the services being coded Real life coding reports simulate the reports you will encounter as a coder and help you apply coding principles to actual cases Complete coverage of ICD 10 CM prepares you for the upcoming transition to ICD 10 Dual coding addresses the transition to ICD 10 by providing coding answers in both ICD 9 and ICD 10 Official Guidelines for Coding and Reporting boxes allow you to read the official wording for inpatient and outpatient coding alongside in text explanations From the Trenches Coding Shots Stop Caution Check This Out and CMS Rules boxes offer valuable up to date tips and advice for working in today s medical coding field Exercises Quick Checks and Toolbox features reinforce coding rules and concepts and emphasize key information Four coding question variations develop your coding ability and critical thinking skills Coder s Index makes it easy to quickly locate specific codes Updated content includes the latest coding information available promoting accurate coding and success on the job New appendix with sample Electronic Health Record EHR screenshots provides examples similar to the EHRs you will encounter in the workplace

ICD-9-CM Coding: Theory and Practice with ICD-10, 2013/2014 Edition - E-Book Karla R. Lovaasen, Jennifer Schwerdtfeger, 2012-08-20 Learn to code effectively with ICD 9 CM medical coding and gain a thorough introduction to ICD 10 CM PCS coding with one book ICD 9 CM Coding 2013 2014 Edition combines basic coding principles with proven practical insight and the ICD 9 CM and ICD 10 CM ICD 10 PCS Official Guidelines for Coding and Reporting to prepare you for the upcoming implementation of ICD 10 CM PCS Whether you re learning to code for the first time or making the transition from ICD 9 CM to ICD 10 CM PCS leading medical coding authors Karla Lovaasen and Jennifer Schwerdtfeger deliver the fundamental understanding you need to succeed in hospital and physician settings Both ICD 9 CM codes and ICD 10 CM ICD 10 PCS codes are shown in all coding exercises and examples including answer keys Emphasis on ICD 10 CM and ICD 10 PCS coding prepares you for the upcoming implementation of ICD 10 MS DRG documentation and reimbursement details guide you through this key component of the coding process Line coding exercises and activities challenge you to apply concepts to solve problems ICD 10 Official Guidelines for Coding and Reporting OGCR are included in each coding chapter immediately following the ICD 9 CM coding guidelines Full color A P content disease coverage procedure guidelines and drug data ensure that you re familiar with key topics affecting medical coding Medical record coverage introduces the records and documents you ll encounter on the job Updated Coding Clinic references direct you to the definitive coding resource from the American Hospital Association AHA A companion Evolve website provides convenient online access to the OGCR medical and surgical root operations definitions a MS DRG list partial answer keys and more

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explaining how HIPAA could affect someone recently out of work Application exercises ask you to apply your knowledge and skills to real world situations In class projects and discussion topics enhance your understanding of specific content from the text Internet Exploration exercises in each chapter help you learn how to perform and evaluate research online Defining Chapter Terms activities help you review and understand the key terms in each chapter NEW Additional content on cybersecurity emphasizes the importance of keeping digital information private and secure NEW Information on crowdfunding for medical bills discusses how this practice affects billing NEW Interactive VST eBook provides a seamless digital experience NEW Coverage of COVID 19 explores its impact on billing reimbursement and employment *The Next Step: Advanced Medical Coding and Auditing, 2014 Edition - E-Book* Carol J. Buck, 2013-12-13 Updated content includes the latest coding information available to promote accurate coding and success on the job **Fordney's Medical Insurance and Billing - E-Book** Linda M. Smith, 2024-08-07 Gain the skills you need to succeed in insurance coding and billing Fordney's Medical Insurance and Billing 17th Edition helps you master the insurance billing specialist's role and responsibilities in areas such as diagnostic coding procedural coding HCPCs coding medical documentation billing and collection Using clear explanations this book covers all types of insurance coverage commonly encountered in hospitals physicians offices and clinics Step by step guidelines lead you through the submission of electronic claims and paper claims as well as the job search and professional advancement Written by coding specialist and educator Linda M Smith this market leading text is a complete guide to becoming an efficient insurance billing specialist NEW HCPCs Coding chapter covers ambulance billing supply billing and certificates of medical necessity NEW Content on professionalism includes customer service conflict management diversity awareness leadership and other competencies to help you become an effective engaged and highly functioning employee NEW Additional content on medical decision making helps you select the appropriate evaluation and management codes under the current documentation guidelines NEW Additional examples of CMS claims include those from Blue Shield and Automobile Insurance NEW Updates to credentialing include those specific to Medicare Medicaid and Workers Compensation Coverage of medical documentation diagnostic coding and procedural coding provides you with the foundation and skills needed to work in a physician's office as well as ambulatory and inpatient settings Coverage of the role and responsibilities of the insurance billing specialist emphasizes advanced job opportunities and certification Chapter on HIPAA compliance as well as Compliance Alerts highlight important HIPAA compliance issues and the latest regulations Step by step procedures detail common responsibilities of the insurance billing specialist and coder Key terms and abbreviations are defined and emphasized reinforcing your understanding of new concepts and terminology Color coded icons denote and clarify information rules and regulations for each type of payer Insights From The Field includes more interviews with experienced insurance billing specialists providing a snapshot of their career paths and offering advice to the new student Scenario boxes help you apply concepts to real world situations Quick Review sections

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