MEDICAL CODING ICD-10-PCS

ICD-10-PCS MEDICAL PROCEDURE CODES

The ICD-10 Procedure Coding System (ICD-10-PCS) is a system of medical classification used for procedural codes. The National Center for Health Statistics (NCHS) received permission from the World Health Organization (WHO), the body responsible for publishing the International Classification of Diseases to create the ICD-10-PCS as a successor to Volume 3 of ICD-9-CM and a clinical modification of the original ICD-10. The original draft was completed in 2000, and is has been updated for 2009. It will follow the same implementation as ICD-10-CM.

The new procedure coding system uses 7 alpha or numeric digits. The current system, ICD-9-CM volume 3 (International Classification of Diseases, 9th Edition, Clinical Modification, does not provide the necessary detail on either patients' medical conditions or on procedures performed on hospitalized patients. ICD-9-CM is 30 years old, has outdated and obsolete terminology, uses outdated codes that produce inaccurate and limited data, and is inconsistent with current medical practice. It cannot accurately describe the diagnoses and inpatient procedures of care delivered in the 21st century. ICD-10-PCS will make the US current with the rest of the developed world. The development of ICD-10-PCS had as its goal the incorporation of four major attributes.

COMPLETENESS

There should be a unique code for all substantially different procedures. In Volume 3 of ICD-9-CM, procedures on different body parts, with different approaches, or of different types are sometimes assigned to the same code.

EXPANDABILITY

As new procedures are developed, the structure of ICD-10-PCS should allow them to be easily incorporated as unique codes.

NULTIAXIAL

ICD-10-PCS codes should consist of independent characters, with each individual axis retaining its meaning across broad ranges of codes to the extent possible.

STANDARDIZED TERMINOLOGY

ICD-10-PCS should include definitions of the terminology used. While the meaning of specific words varies in common usage, ICD-10-PCS should not include multiple meanings for the same term, and each term must be assigned a specific meaning.

If these four objectives are met, then ICD-10-PCS should enhance the ability of health information coders to construct accurate codes with minimal effort. Within the development of ICD-10-PCS, several general principles were followed:

DIAGNOSTIC INFORMATION IS NOT INCLUDED IN PROCEDURE DESCRIPTION.

When procedures are performed for specific diseases or disorders, the disease or disorder is not contained in the procedure code. There are no codes for procedures exclusive to aneurysms, cleft lip, strictures, neoplasms, hernias, etc. The diagnosis codes, not the procedure codes, specify the disease or disorder.

NOT OTHERWISE SPECIFIED (NOS) OPTIONS ARE RESTRICTED

ICD-9-CM often provides a "not otherwise specified" code option. Certain NOS options made available in ICD-10-PCS are restricted to the uses laid out in the ICD-10-PCS draft guidelines. A minimal level of specificity is required for each component of the procedure.

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information is with the use of a study pamphlet The pamphlet can be used to learn the basic information and can keep a student focused on what they need to learn Medical Coding Study Guide Speedy Publishing, 2014-11-26 Individuals who are preparing to take medical coding exams should note that study guides can help them earn the competitive score they want This is the case for several reasons including the fact that these study guides tend to incorporate a lot of helpful material including medical and anatomy terminology reviews testing techniques for the exam questions that parallel the CPC certification exam practical examples review questions designed to test the student's knowledge of important coding concepts and many more Medical Coding ICD-9 (Speedy Study Guides) Speedy Publishing, 2014-07-03 A medical coding ICD 9 book or software program contains detailed information concerning a variety of health conditions along with a numerical set of numbers Each disease or health condition is assigned a specialized code that is used for identification purposes when submitting documents to insurance carriers for reimbursement Health care employees such as medical coders and secretaries require a medical coding ICD 9 as part of their job while working in medical facilities including physician s offices hospitals and nursing homes Step-by-Step Medical Coding, 2015 Edition - E-Book Carol J. Buck, 2014-11-18 Take your first step toward a successful career in medical coding with in depth coverage from the most trusted name in coding education From Carol J Buck Step by Step Medical Coding 2015 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 fully covers ICD 10 CM in preparation for the transition to ICD 10 No other text on the market so thoroughly covers all coding sets in one source A step by step approach makes it easier to build skills and remember the material Dual coding addresses the transition to ICD 10 by providing coding answers for both ICD 10 and ICD 9 Over 500 illustrations include medical procedures and conditions that help you understand the services being coded and images from Carol J Buck's professional ICD and HCPCS manuals that familiarize you with the format of professional coding manuals 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 transition to ICD 10 A workbook corresponds to the textbook and offers review and practice with more than 1 500 questions activities and terminology exercises to reinforce your understanding of medical coding Available separately Official Guidelines for Coding and Reporting boxes allow you to read the official wording for inpatient and outpatient coding alongside in text explanations Four coding question variations develop your coding ability and critical thinking skills including one code or multiple code answer blanks From the Trenches Coding Shots Stop Caution Check This Out and CMS Rules boxes offer valuable tips and helpful advice for working in today s medical coding field Coder's Index makes it easy to quickly locate specific codes Appendix with sample EHR Electronic Health Record screenshots provides examples similar to the EHRs you will encounter in the workplace Exercises Quick

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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 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

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