

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 it 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 ICD-9-CM is 30 years old, has outdated and obsolete terminology, uses outdated codes that produce inaccurate and limited data, and is inconsistent with current medical practice.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.

MULTIAXIAL

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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Speedy Study Guides Speedy Publishing, 2014-07-16 Every known illness, disease, and condition has a specific number that goes along with the word describing the person's medical problem. Every physician and their office staff must know medical codes for the sake of billing purposes. If the doctor and office staff does not code a specific illness, condition, or disease correctly, the insurance company may not pay for treatment, medication, in-hospital stays, outpatient treatment, and a number of surgical and other procedures performed for the patient, making it impossible for the patient to receive the proper treatment. Common illnesses, diseases, and conditions listed in a pamphlet would enable the medical student to become familiar and able to memorize with the more common medical codes. The bottom line for using proper ICD codes is money reimbursement for the medical community and patient. *Medical Coding Speedy Study Guides* Speedy

Publishing, 2014-07-15 Medical coding is a process where you enter abbreviations on medical charts. A pamphlet can be helpful in learning the words and the abbreviations for those words. The abbreviations can be written on index cards so that the student can study for quizzes. Students learn the medical lingo seen on charts where medical coding is used, such as a doctor's office or a hospital. **Medical Coding: Icd-10-Pcs Speedy Study Guides** Speedy Publishing, 2014-07-16 ICD 10 PCS is a kind of medical coding that is used to identify what kinds of treatment a patient received and used for billing a patient. Medical coding requires a person to get an education and there is a huge amount of information a person needs to know in order to get a coding certification. One great way to learn the 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** Speedy Publishing LLC, 2014-07-18 ICD 10 PCS is a kind of medical coding that is used to identify what kinds of treatment a patient received and used for billing a patient. Medical coding requires a person to get an education and there is a huge amount of information a person needs to know in order to get a coding certification. One great way to learn the

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