

Icd 9 Coding Guidelines 2013

Learn to code more efficiently and effectively with Carol J. Buck's 2013 ICD-9-CM for Physicians, Volumes 1 & 2 - Standard Edition. Combining Netter's Anatomy artwork and the Official Guidelines for Coding and Reporting (OGCR) with a format designed by coders for coders, this handy reference helps you easily access the information you need to stay up to date and ensure the most accurate billing and optimal reimbursement in physician-based coding. Plus, you can take this resource into your certification exams for enhanced testing support! Exclusive focus on ICD-9-CM, Volumes 1 and 2 provides clear, concise coverage of physician-based and outpatient coding essentials. UNIQUE! Full-color Netter's Anatomy artwork clarifies complex anatomic information to help you appropriately code related procedures. Use Additional Digit(s) symbol in the index identifies codes that require an additional digit to remind you to check the tabular. The Official Guidelines for Coding and Reporting (OGCR) are listed within the lists of codes and in a separate index for fast, easy access to the coding rules when you need them. Items provide detailed information on common diseases and conditions, helping you code more effectively. Symbols throughout the text alert you to new, revised, and deleted codes and clearly identify codes that require special consideration before assigning symbols, including Not First-Listed Diagnosis, Unspecified Code, Includes and Excludes, and Use Additional. Additional hints, tips and definitions within specific codes provide extra guidance in coding anatomy, pathophysiology, or other coding directions. References to the American Hospital Association's Coding Clinics® help you find expanded information about specific codes and their usage. Omit and Code First codes highlight government text needing special attention. Coding updates on the companion codingupdates.com website keep you informed of changes to ICD codes.

Elsevier and the American Medical Association have partnered to co-publish this ICD-9-CM reference by Carol J. Buck! Maximize your efficiency and effectiveness with Carol J. Buck's 2013 ICD-9-CM for Physicians, Volumes 1 & 2 — Professional Edition. Combining Netter's Anatomy artwork and the Official Guidelines for Coding and Reporting (OGCR) with a format designed by coders for coders, this handy, spiral-bound reference gives you easy access to the information you need to stay up to date and ensure the most accurate billing and optimal reimbursement in physician-based coding. Plus, you can take this resource into certification exams for enhanced testing support! Exclusive focus on ICD-9-CM, Volumes 1 and 2 provides clear, concise coverage of physician-based coding essentials. UNIQUE! Full-color Netter's Anatomy artwork clarifies complex anatomic information to help you appropriately code related procedures. Use Additional Digit(s) symbol in the index identifies codes that require an additional digit to remind you to check the tabular. The Official Guidelines for Coding and Reporting (OGCR) are listed within the lists of codes and in a separate index for fast, easy access to the coding rules when you need them. Items provide detailed information on common diseases and conditions, helping you code more effectively. Symbols throughout the text alert you to new, revised, and deleted codes and clearly identify codes that require special consideration before assigning symbols, including Not First-Listed Diagnosis, Unspecified Code, Includes and Excludes, and Use Additional. Additional hints, tips and definitions within specific codes provide extra guidance in coding anatomy, pathophysiology, or other coding directions. References to the American Hospital Association's Coding Clinics® help you find expanded information about specific codes and their usage. Age and Sex edits alert you to codes that are used only with patients of a specific age or sex, helping to ensure accurate reporting. Omit and Code Also codes highlight government text needing special attention. Coding updates on the companion codingupdates.com website keep you informed of changes to ICD codes.

DecisionHealth's Complete Home Health ICD-9-CM Diagnosis Coding Manual, 2013 is the only ICD-9 coding manual that's created specifically for home health coders -- and the latest edition includes updated guidelines, coding conventions, illustrations, tips and scenarios that explain how to code correctly and efficiently. You simply won't find a more all-inclusive and user-friendly ICD-9 code book for home health on the market. The Complete Home Health ICD-9-CM Diagnosis Coding Manual offers a wide range of features to help ensure accurate coding and compliance, prevent denials and help your agency secure every reimbursement dollar earned. New and unique features include: * NEW! Updated with new guidance issued throughout the year to ensure compliance and accurate coding for proper reimbursement. * NEW! Scenarios added in the V code chapter to help you practice accurately coding the most common home health patient scenarios. * NEW! Pre-printed tabs included with your manual that you can affix to your most-frequently referenced chapters. * NEW! More user-friendly Index with a color-coded Table of Drugs and Chemicals and E code Index to help you quickly find the section of the Index you're looking for so that your coding is more efficient and you're more productive. * NEW! ICD-10 disease-specific crosswalks that help familiarize you with the ICD-10 code for the most common home health ICD-9 diagnoses, such as diabetes and stasis ulcers. * DH EXCLUSIVE - 1,200 tips specific to home health that guide you, raise red flags and help you code correctly to stay in compliance and gain accurate reimbursement. * DH EXCLUSIVE - Illustrations and definitions throughout to help you identify diseases and conditions to enhance coding and critical thinking skills. * DH EXCLUSIVE - More than 200 home health coding scenarios included with their corresponding chapters. The Complete Home Health ICD-9-CM Diagnosis Coding Manual gives you all 17,000+ ICD-9 cod

This educational ICD-9-CM and HCPCS Level II code book is designed to provide a comprehensive and practical approach to accurate coding and reporting of diagnoses and services. Complete HIPAA compliant code sets. Master coding using the complete code sets and official coding guidelines for ICD-9-CM and HCPCS Level II codes.

With the expert insight of leading coding educator Carol J. Buck, this complete exam review highlights the content you'll need to master to pass the AHIMA CCS certification exam and take your coding career to the next step. CCS Coding Exam Review 2013: The Certification Step with ICD-9-CM features an easy-to-follow outline format that guides you through the anatomy, terminology, and pathophysiology for each organ system; reimbursement concepts; an overview of CPT, ICD-9-CM, and HCPCS coding; and more. Two full practice exams and a final exam modeled on the actual CCS exam simulate the testing experience and help prepare you for success. Companion Evolve website includes electronic practice exams that simulate the actual AHIMA exam experience to help you overcome test anxiety. Pre-, post-, and final exams allow you to track your learning. Answers and rationales reinforce your understanding of coding concepts. Updates, study tips, and helpful web links aid your understanding. Comprehensive CCS coverage highlights essential information for passing the AHIMA CCS exam, accompanied by detailed figures, for the most efficient exam review. Concise outline format gives you quick and easy access to content and helps you make the most of your study time. NEW! Facility-based coding activities challenge you to apply your knowledge to 35 realistic inpatient case scenarios, providing valuable practice and preparation for the CCS exam.

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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Strengthen your ability to code accurately and obtain the correct reimbursement for medical services with this helpful workbook. Specifically designed to parallel the content of Carol J. Buck's Step-By-Step Medical Coding, 2013 Edition, it provides more than 1,500 questions and terminology exercises that cover both the ICD-9 and ICD-10 diagnosis coding systems, and includes over 90 original source documents to familiarize you with the materials you'll encounter in practice. Dual coding in chapters 13-31 (where both ICD-10 and ICD-9 answers are provided for every question requiring an ICD answer) ensures you can code using the sets of both today and tomorrow. Complete coverage of the new ICD-10 code set prepares you for the eventual transition from ICD-9 to ICD-10. Three types of activities help you master key concepts and apply your knowledge: Theory: fill-in-the-blank, multiple-choice, and true/false questions Practical: line coding exercises Reports: practice coding with actual medical record documentation Consistent question format with odd numbered answers provided mirrors the format of the main text to improve your coding skills and promote critical thinking. Over 90 original source documents, cleared of all confidential information, provide real-world experience with the reports you will encounter on the job. Updated content presents the latest coding information so you can practice with the most current information available.

Build or assign procedure codes accurately with Carol J. Buck's 2013 ICD-10-PCS Draft Manual. Using Netter's Anatomy illustrations along with the ICD-10-PCS Official Guidelines for Coding and Reporting, this handy reference simplifies the procedure coding system by giving you the information and tables you need to ensure accurate billing and optimal reimbursement for hospital-based medical services. Coverage of ICD-10-PCS codes prepares you for the new code set replacing ICD-9-CM Volume 3 for hospital-based, inpatient procedures. UPDATED 2013 Official Draft Code set includes the ICD-10 codes needed for inpatient procedure coding. ICD-10-PCS Official Guidelines for Coding and Reporting are included in full for fast, easy access to coding rules when you need them. UNIQUE! 32 full-color Netter anatomy images are included in the front of the book and cross referenced within the coding tables, helping you understand anatomy and how it affects coding. Age and Sex edits identify the codes associated with age and sex limitations in the Definition of Medicare Code Edits, so you can accurately detect inconsistencies between a patient's age and sex and any diagnosis or procedure on the patient's record. New, full color tables make it easier to build the proper code.

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.

This product will be available for shipment in December 2012. This all-in-one resource contains all the coding information you need for your specialty. Plain English descriptions of each CPT code, coding tips, CPT to ICD-9-CM crosswalks and other valuable information to make specialty coding easier and more efficient than ever. This is the code book you'll be reaching for again and again for use on a daily basis. * New for 2013 ICD-10-CM Diagnosis Codes -- The most common ICD-10-CM diagnoses are crosswalked for each procedure. These codes are listed along with ICD-9-CM diagnosis codes so that this resource can be used for the entire calendar year. * The MOST detailed illustrations of any specialty reference -- gives you visual clarification of anatomy and key procedural elements for coding purposes * 2013 CPT, ICD-9-CM, and ICD-10-CM codes relevant to each respective specialty to speed up your coding * Plain English Descriptions of all CPT codes for the specialty -- guides your code selection and verification and explains associated conditions or medical indications * CPT, HCPCS, and ICD-9-CM Alphabetic Index -- identify references to each index * Powerful crosswalks -- identify medical necessity with CPT to ICD-9-CM crosswalks * NCCI edits -- helps identify which codes are bundled and which codes can be billed separately * Code-specific RVUs -- determine code sequencing and calculate reimbursement or fees * Global days, assistant-at-surgery and prior approval at a glance * Pub 100 references -- find out the regulations and guidelines for Medicare's covered services * Modifier rules -- identify which modifier rules apply for each code and find the right codes quickly Format: Spiralbound CPT is a registered trademark of the American Medical Association.

The ICD-10-CM and ICD-10-PCS Coding Handbook, 2013 edition, has been updated to incorporate the 2012 revisions of the diagnosis and procedure codes as well as the 2012 Official Coding Guidelines. More than 800 new or revised diagnosis codes and 3,000 new or revised procedure codes have been examined for this revision. An expanded introduction describes the major differences between ICD-9-CM and ICD-10-CM/PCS. This edition introduces new illustrations of surgical procedures and a new appendix on reimbursement methodologies. The Handbook contains more than 260 case-summary exercises (no answers are provided).

Permits the coding of all neoplasms by topography, histology (morphology) and behavior.

Offering a comprehensive tool for self-assessment, the 2013 CODING CASE STUDIES WORKBOOK enables coders to practice skill building using all code sets--ICD-9-CM, ICD-10-CM, ICD-10-PCS, CPT and HCPCS--in all settings. This comprehensive workbook provides a variety of exercises applicable to physician offices, ambulatory care, and hospital settings. Written as short case studies, exercises emphasize official coding guidelines and include clinical concepts that reflect coding examples from current practice. The rich assortment of application exercises range from basic to the intermediate/advanced level. The detailed rationale for answers allows for a more thorough understanding of the code sets, while answers to the ICD-10-CM exercises highlight the key differences between ICD-9-CM and ICD-10-CM. Special Coding Insights features provide further guidance to support the coding decision-making process. Important Notice: Media content referenced within the product description or the product text may not be available in the ebook version.

This edition of ICD-O, the standard tool for coding diagnoses of neoplasms in tumour and cancer registrars and in pathology laboratories, has been developed by a working party convened by the International Agency for Research on Cancer / WHO. ICD-O is a dual classification with coding systems for both topography and morphology. The book has five main sections. The first provides general instructions for using the coding systems and gives rules for their implementation in tumour registries and pathology laboratories.

Section two includes the numerical list of topography codes, which remain unchanged from the previous edition. The numerical list of morphology codes is presented in the next section, which introduces several new terms and includes considerable revisions of the non-Hodgkin lymphoma and leukaemia sections, based on the WHO Classification of Hematopoietic and Lymphoid Diseases. The five-digit morphology codes allow identification of a tumour or cell type by histology, behaviour, and grade. Revisions in the morphology section were made in consultation with a large number of experts and were finalised after field-testing in cancer registries around the world. The alphabetical index gives codes for both topography and morphology and includes selected tumour-like lesions and conditions. A guide to differences in morphology codes between the second and third editions is provided in the final section, which includes lists of all new code numbers, new terms and synonyms added to existing code definitions, terms that changed morphology code, terms for conditions now considered malignant, deleted terms, and terms that changed behaviour code.

CPT 2017 Professional Edition is the definitive AMA authored resource to help health care professionals correctly report and bill medical procedures and services. The AMA publishes the only CPT codebook with the official CPT guidelines.

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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.

Specially designed to parallel the material in ICD-10-CM/PCS Coding: Theory and Practice, 2nd Edition, this helpful workbook provides in-depth study and review of ICD-10-CM/PCS coding concepts. Engaging, interactive exercises reinforce your understanding of text content and challenge you to apply your knowledge to real-world scenarios. Hands-on application activities and case studies help you master text concepts by applying them to actual health records and case scenarios. All coding examples and exercises (including answer keys) show ICD-10-CM/ICD-10-PCS codes to prepare you for the proposed October 2014 implementation. ICD-10 Official Guidelines for Coding and Reporting in each coding chapter help you further understand how to code diagnoses. Matching exercises, multiple-choice questions, coding questions, and case scenarios with MS-DRG assignment reinforce key content from the text. Companion Evolve website for the text offers convenient online access to updates, partial answer keys, and coding guidelines. UPDATED! Includes the latest ICD-10 code revisions to ensure you have the most up-to-date information available.

Take charge of ICD-10 documentation requirements The implementation of ICD-10 brings with it new documentation requirements that will have a significant impact on the work of your CDI team. The higher degree of specificity of information needed to code accurately will have a direct correlation to reimbursement and compliance. CDI specialists need a firm understanding of the new code set, and the rules that govern it, to obtain the appropriate level of documentation from physicians. The Clinical Documentation Improvement Specialist's Guide to ICD-10 is the only book that addresses ICD-10 from the CDI point of view. Written by CDI experts, it explains the new documentation requirements and clinical indicators of commonly reported diagnoses and the codes associated with those conditions. You'll find the specific documentation requirements to appropriately code conditions such as heart failure, sepsis, and COPD. Learn from your peers The Clinical Documentation Improvement Specialist's Guide to ICD-10 includes case studies from two hospitals that have already begun ICD-10 training so you can use their timelines as a blue print to begin your organization's training and implementation. ICD-10 implementation happens in 2013. It's not too soon to start developing the expertise and comfort level you'll need to manage this important industry change and help your organization make a smooth transition. Benefits: * Tailored exclusively for CDI specialists * Side-by-side comparison of what documentation is necessary now v. what will be required starting October 1, 2013 * Timelines to train physicians in new documentation requirements to ensure readiness by implementation date * Strategies and best practices to ensure physician buy-in

A basic guide to hospital billing and reimbursement, Understanding Hospital Billing and Coding, 3rd Edition helps you understand, complete, and submit the UB-04 claim form that is used for all Medicare and privately insured patients. It describes how hospitals are reimbursed for patient care and services, showing how the UB-04 claim form reflects the flow of patient data from the time of admission to the time of discharge. Written by coding expert Debra P. Ferenc, this book also ensures that you understand the essentials of ICD-10-CM and develop skills in both inpatient coding and outpatient/ambulatory surgery coding. UB-04 Claim Simulation on the companion Evolve website lets you practice entering information from source documents into the claim form. Over 300 illustrations and graphics bring important concepts to life. Detailed chapter objectives highlight what you are expected to learn. Key terms, acronyms, and abbreviations with definitions are included in each chapter. Concept Review boxes reinforce key concepts. Test Your Knowledge exercises reinforce lessons as you progress through the material. Chapter summaries review key concepts. Practice hospital cases let you apply concepts to real-life scenarios. UPDATED content reflects the most current industry changes in ICD-10, MR-DRGs, PPS Systems, and the Electronic Health Record. NEW Hospital Introduction chapter includes a department-by-department overview showing how today's hospitals really work NEW Health Care Payers and Reimbursement section follows the workflow of the hospital claim by including successive chapters on payers, prospect payment systems, and accounts receivable management.

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Completely updated to the 2017 ICD-10-CM and ICD-10-PCS coding guidelines and packed with practical applications, Bowie's UNDERSTANDING ICD-10-CM AND ICD-10-PCS Update: A Worktext, 3E delivers a comprehensive presentation of the ICD-10-CM and ICD-10-PCS diagnostic and procedural coding system. Extremely hands-on, this unique workbook offers detailed coverage that engages readers. Numerous learning tools thoroughly review and reinforce understanding of the materials presented in each chapter. Readers can immediately begin putting what they learn into real-world practice through numerous timely exercises, meaningful coding assignments, and case studies. Vivid color illustrations emphasize how knowledge of anatomy and disease processes can positively impact coding accuracy. This edition provides the ideal resource to assist today's practicing professionals and healthcare organizations smoothly transition from ICD-9-CM to ICD-10-CM and ICD-10-PCS. This updated printing of the third edition includes new 2017 ICD-10 codes. Important Notice: Media content referenced within the product description or the product text may not be available in the ebook version.

v. 1. Research findings -- v. 2. Concepts and methodology -- v. 3. Implementation issues -- v. 4. Programs, tools and products.

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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

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"Published by the United States Government in recognition of its responsibility to promulgate this classification throughout the United States for morbidity coding." Complete comparability with International classification of diseases, 9th revision. Recommended for all clinical settings; required for reporting of diagnoses and diseases in all U.S. Public Health Service and Health Care Financing Administration programs. Three volumes consist of tabular list of diseases, alphabetic index of diseases, and tabular list and alphabetic index of procedures.

ICD-10-CM DIAGNOSTIC CODING SYSTEM fully prepares current and future medical coders for the transition to the ICD-10-CM coding system that will go into effect on October 1, 2013. This comprehensive guide covers ICD-10-CM diagnostic coding, highlighting changes in terminology, functionality, guidelines, and conventions. Whether you need to understand and review the impact the transition will have on the industry, or if you need to learn to assign ICD-10 codes accurately, ICD-10-CM DIAGNOSTIC CODING SYSTEM will prepare your students for the road ahead. Important Notice: Media content referenced within the product description or the product text may not be available in the ebook version.

Reinforce your knowledge of ICD-9-CM coding concepts and apply that knowledge to realistic medical records! Corresponding to the chapters in Lovaasen and Schwerdtfeger's ICD-9-CM Coding: Theory and Practice, 2012 Edition, this practical workbook offers engaging, interactive exercises to help you transfer textbook knowledge to successful employment in medical coding. Matching exercises, multiple-choice questions, coding questions, and case scenarios with MS-DRG assignment reinforce key concepts from the textbook. Hands-on application activities and case studies help you master textbook concepts by applying them to actual health records and case scenarios. Both ICD-9-CM codes and ICD-10-CM/ICD-10-PCS codes are shown in all coding exercises and examples (including answer keys) to prepare you for the 2013 implementation of ICD-10. ICD-10 Official Guidelines for Coding and Reporting are included in each coding chapter, immediately following the ICD-9-CM coding guidelines. A companion Evolve website includes textbook updates, links to additional content, and more. Greater emphasis on ICD-10-CM and ICD-10-PCS coding prepares you for the 2013 implementation of ICD-10.

This product will be available for shipment in December 2012. This all-in-one resource contains all the coding information you need for your specialty. Plain English descriptions of each CPT code, coding tips, CPT to ICD-9-CM crosswalks and other valuable information to make specialty coding easier and more efficient than ever. This is the code book you'll be reaching for again and again for use on a daily basis. * New for 2013! ICD-10-CM Diagnosis Codes -- The most common ICD-10-CM diagnoses are crosswalked for each procedure. These codes are listed along with ICD-9-CM diagnosis codes so that this resource can be used for the entire calendar year. * The MOST detailed illustrations of any specialty reference -- gives you visual clarification of anatomy and key procedural elements for coding purposes * 2013 CPT, ICD-9-CM, and ICD-10-CM codes relevant to each respective specialty to speed up your coding * Plain English Descriptions of all CPT codes for the specialty -- guides your code selection and verification and explains associated conditions or medical indications * CPT, HCPCS, and ICD-9-CM Alphabetic Index -- identify references to each index * Powerful crosswalks -- identify medical necessity with CPT to ICD-9-CM crosswalks * NCCI edits -- helps identify which codes are bundled and which codes can be billed separately * Code-specific RVUs -- determine code sequencing and calculate reimbursement or fees * Global days, assistant-at-surgery and prior approval at a glance * Pub 100 references -- find out the regulations and guidelines for Medicare's covered services * Modifier rules -- identify which modifier rules apply for each code and find the right codes quickly Format: Spiralbound CPT is a registered trademark of the American Medical Association.

Building your skills as a professional coder and auditor, E/M Auditing Step, 3rd Edition provides a thorough review of the 17 Evaluation and Management (E/M) subsections presented in the Current Procedural Terminology (CPT) manual. Real-life scenarios let you practice coding with cases taken from actual documentation. An outline format includes plenty of practice questions, making it easy to review and prepare for E/M certification exams. Written by coding author and educator Carol J. Buck, this edition covers both ICD-9 and ICD-10 code sets, and helps you gain the accuracy and proficiency you need for success in auditing records and in E/M coding. A convenient outline format provides easy-to-follow, efficient coverage of E/M coding. An introduction to E/M coding describes how to fill out the main audit form used in the book, then breaks down each of the 17 E/M CPT subsections separately. Follow-up questions and reports test your comprehension of the E/M subsections and allow you to build confidence. An examination with answers prepares you for the professional environment with 17 real-life cases covering E/M codes. 1995 and 1997 E/M Documentation Guidelines, along with an Internet Only Manual, provide a quick reference to all E/M coding variations. Useful appendices include answers to Unit 1 questions and the Unit 2 exam, blank audit forms for practice, abbreviations, and additional resources. UPDATED content lets you practice using the 2013 code sets. Dual coding includes answers for both ICD-9 and ICD-10, preparing you for the diagnosis coding sets of both today and tomorrow.

Learn to code more efficiently and effectively with Carol J. Buck's 2013 ICD-9-CM for Hospitals, Volumes 1, 2, & 3 - Standard Edition. Combining Netter's Anatomy artwork and the Official Guidelines for Coding and Reporting (OGCR) with a format designed by coders for coders, this handy reference helps you easily access the information you need to stay up to date and ensure the most accurate billing and optimal reimbursement in physician-based and inpatient coding. Plus, you can take this resource into your certification exams for enhanced testing support! Coverage of all three ICD-9-CM volumes includes both inpatient and outpatient codes. UNIQUE! Full-color Netter's Anatomy artwork clarifies complex anatomic information to help you appropriately code related procedures. Use Additional Digit(s) symbol in the index identifies codes that require an additional digit to remind you to check the tabular. The Official Guidelines for Coding and Reporting (OGCR) are listed within the lists of codes and in a separate index for fast, easy access to the coding rules when you need them. Items provide detailed information on common diseases and conditions, helping you code more effectively. Symbols throughout the text alert you to new, revised, and deleted codes and clearly identify codes that require

special consideration before assigning symbols, including Unacceptable Principal Diagnosis, Use Additional, Includes and Excludes, and Code First. Additional hints, tips and definitions within specific codes provide extra guidance in coding anatomy, pathophysiology, or other coding directions. References to the American Hospital Association's Coding Clinics® help you find expanded information about specific codes and their usage. Omit and Code Also codes highlight government text needing special attention. Coding updates on the companion codingupdates.com website keep you informed of changes to ICD codes.

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