

Medical Coding Guidelines 2013

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. 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.

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.

With comprehensive, practical coverage of ICD-10-CM and ICD-10-PCS medical coding, ICD-10-CM/PCS Coding: Theory and Practice, 2014 Edition provides a thorough understanding of diagnosis coding in physician and hospital settings. It combines basic coding principles, clear examples, challenging exercises, and the ICD-10-CM and ICD-10-PCS Official Guidelines for Coding and Reporting to ensure coding accuracy using the latest codes. From leading medical coding authorities Karla Lovaasen and Jennifer Schwerdtfeger, this 'learn by doing' resource will help you succeed whether you're learning to code for the first time or preparing for the transition to ICD-10! ICD-10-CM/PCS codes are included for all coding exercises and examples, in preparation for the October 2014 implementation of ICD-10. ICD-10-CM and ICD-10-PCS Official Guidelines for Coding and Reporting (OCGR) provide fast, easy access to the latest codes as well as examples of proper application. MS-DRG documentation and reimbursement details guide you through this key component of the coding process. Numerous coding exercises and examples in each chapter break key content into manageable segments and challenge you to apply chapter concepts. Disease coverage, including illustrations and coding examples, helps you understand how commonly encountered conditions relate to ICD-10-CM coding. Integrated medical record coverage provides a context for coding and familiarizes you with documents you will encounter on the job. Updated content includes the icd-10 code revisions released in Spring 2013, ensuring you have the latest coding information available.

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.

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 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.

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.

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.

A New York Times bestseller/Washington Post Notable Book of 2017/NPR Best Books of 2017/Wall Street Journal Best Books of 2017 "This book will serve as the definitive guide to the past and future of health care in America."—Siddhartha Mukherjee, Pulitzer Prize-winning author of *The Emperor of All Maladies* and *The Gene* At a moment of drastic political upheaval, *An American Sickness* is a shocking investigation into our dysfunctional healthcare system - and offers practical solutions to its myriad problems. In these troubled times, perhaps no

institution has unraveled more quickly and more completely than American medicine. In only a few decades, the medical system has been overrun by organizations seeking to exploit for profit the trust that vulnerable and sick Americans place in their healthcare. Our politicians have proven themselves either unwilling or incapable of reining in the increasingly outrageous costs faced by patients, and market-based solutions only seem to funnel larger and larger sums of our money into the hands of corporations. Impossibly high insurance premiums and inexplicably large bills have become facts of life; fatalism has set in. Very quickly Americans have been made to accept paying more for less. How did things get so bad so fast? Breaking down this monolithic business into the individual industries—the hospitals, doctors, insurance companies, and drug manufacturers—that together constitute our healthcare system, Rosenthal exposes the recent evolution of American medicine as never before. How did healthcare, the caring endeavor, become healthcare, the highly profitable industry? Hospital systems, which are managed by business executives, behave like predatory lenders, hounding patients and seizing their homes. Research charities are in bed with big pharmaceutical companies, which surreptitiously profit from the donations made by working people. Patients receive bills in code, from entrepreneurial doctors they never even saw. The system is in tatters, but we can fight back. Dr. Elisabeth Rosenthal doesn't just explain the symptoms, she diagnoses and treats the disease itself. In clear and practical terms, she spells out exactly how to decode medical doublespeak, avoid the pitfalls of the pharmaceuticals racket, and get the care you and your family deserve. She takes you inside the doctor-patient relationship and to hospital C-suites, explaining step-by-step the workings of a system badly lacking transparency. This is about what we can do, as individual patients, both to navigate the maze that is American healthcare and also to demand far-reaching reform. *An American Sickness* is the frontline defense against a healthcare system that no longer has our well-being at heart.

Learning advanced medical coding concepts is easy with Carol J. Buck's proven, step-by-step method! *The Next Step: Advanced Medical Coding and Auditing*, 2013 Edition provides an in-depth understanding of physician-based medical coding and coding services such as medical visits, diagnostic testing and interpretation, treatments, surgeries, and anesthesia. Patient cases reflect actual medical records - with personal details changed or removed - and give you real-world experience coding from physical documentation with advanced material. Enhance your clinical decision-making skills and learn to confidently pull the right information from documents, select the right codes, determine the correct sequencing of those codes, properly audit cases, and prepare for the transition to ICD-10-CM with the help of Carol J. Buck! Auditing cases in every chapter offer realistic experience with auditing coded reports. **UNIQUE!** Evaluation and Management (E/M) Audit Forms, developed to determine the correct E/M codes, simplify the coding process and help you ensure accuracy. Dual Coding prepares

you for the switch to ICD-10 by accompanying all ICD-9 answers with corresponding codes from ICD-10-CM. Realistic patient cases simulate the professional coding experience by using actual medical records (with personal patient details changed or removed), allowing you to practice coding with advanced material. UNIQUE! Netter anatomy plates in each chapter help you understand anatomy and how it affects coding. From the Trenches boxes in each chapter highlight real-life medical coders and provide practical tips, advice, and encouragement. More than 175 illustrations and a full-color design make advanced concepts more accessible and visually engaging. Stronger focus on auditing cases prepares you to assign correct codes to complicated records, as well as audit records for accuracy. 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.

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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.

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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.

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.

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.

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

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.

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.

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.

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illustrations ensures easy navigation and presents material in a unique, compelling way. Coding Shots provide tips for complicated coding scenarios and advice for entering the job market. From the Trenches quotes provide valuable, up-to-date insights from instructors and professionals in the medical coding field. Stop! notes offer a brief summary of material just covered to help ensure retention and understanding and provide a transition into the next topic. Caution! notes warn of common coding mistakes and reinforce the concept of coding as an exact science. Check This Out! boxes offer notes on accessing reference information, primarily via the Internet. Official Guidelines for Coding and Reporting boxes in Units 2 and 5 present the official outpatient and inpatient guidelines alongside text discussions. Coder's Index makes it easy to instantly locate specific codes. Practice activities and Coding Guidelines are available on the companion Evolve Resources website to help reinforce key concepts from the text and provide fast, easy access to the most up-to-date content. A free 30-day demo of SpeedECoder lets you complete cases using an actual online encoder.

The Centers for Medicare and Medicaid Services (CMS) and the National Center for Health Statistics (NCHS), two departments within the U.S. Federal Government's Department of Health and Human Services (DHHS) provide the following guidelines for coding and reporting using the International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM). These guidelines should be used as a companion document to the official version of the ICD-10-CM as published on the NCHS website. The ICD-10-CM is a morbidity classification published by the United States for classifying diagnoses and reason for visits in all health care settings. The ICD-10-CM is based on the ICD-10, the statistical classification of disease published by the World Health Organization (WHO).

The flagship title of the certification suite from the American College of Sports Medicine, ACSM's Guidelines for Exercise Testing and Prescription is a handbook that delivers scientifically based standards on exercise testing and prescription to the certification candidate, the professional, and the student. The 9th edition focuses on evidence-based recommendations that reflect the latest research and clinical information. This manual is an essential resource for any health/fitness and clinical exercise professional, physician, nurse, physician assistant, physical and occupational therapist, dietician, and health care administrator. This manual give succinct summaries of recommended procedures for exercise testing and exercise prescription in healthy and diseased patients. 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. 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 all in one text! Whether you're learning to code for the first time or beginning the transition from ICD-9-CM to ICD-10-CM/PCS, 2012 ICD-9-CM Coding Theory and Practice with ICD-10 delivers the fundamental understanding you need to succeed in hospital and physician settings and prepare for the October 2013 ICD-10-CM/PCS implementation. Leading medical coding authorities Karla Lovaasen and Jennifer Schwerdtfeger combine 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 (OCGR) to equip you for complete professional success in the changing medical coding field. Coverage of both ICD-9-CM and ICD-10-CM/PCS coding equips you for coding success today and in your future career. ICD-9-CM and ICD-10-CM/ICD-10-PCS Official Guidelines for Coding and Reporting (OCGR) provide fast, easy access to the latest codes and examples for proper application. Integrated medical record coverage familiarizes you with records and documents you'll encounter on the job. 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 chapter concepts to solve problems. A&P content in each coding chapter includes full-color illustrations and clarifies important anatomy and physiology concepts. Disease coverage details commonly encountered conditions related to ICD-9-CM coding. Updated Coding Clinics references guide you to the latest coding insights from the American Hospital Association (AHA). Procedure guidelines help you effectively apply ICD-9-CM Volume 3 codes for success in inpatient facility settings. Drug data familiarizes you with medication names you may encounter in medical records for greater coding accuracy. Companion Evolve website provides convenient online access to the Official Guidelines for Coding and Reporting (OGCR), medical and surgical root operations definitions, MS-DRG list,

and answer keys. Introduction to ICD-10-PCS chapter prepares you to code in inpatient facility settings after the October 2013 ICD-10-CM/PCS implementation date.

The annual CPT "TM" Professional Edition provides the most comprehensive and convenient access to a complete listing of descriptive terms, identifying codes, and anatomical and procedural illustrations for reporting medical services and procedures. The 1999 edition includes more than 500 code changes. To make coding easy, color-coded keys are used for identifying section and sub-headings, and pre-installed thumb-notch tabs speed searching through codes. Also includes 125 procedural and anatomical illustrations and an at-a-glance list of medical vocabulary.

Learning advanced medical coding concepts is easy with Carol J. Buck's proven, step-by-step method! The Next Step: Advanced Medical Coding and Auditing, 2013 Edition provides an in-depth understanding of physician-based medical coding and coding services such as medical visits, diagnostic testing and interpretation, treatments, surgeries, and anesthesia. Patient cases reflect actual medical records — with personal details changed or removed — and give you real-world experience coding from physical documentation with advanced material.

Enhance your clinical decision-making skills and learn to confidently pull the right information from documents, select the right codes, determine the correct sequencing of those codes, properly audit cases, and prepare for the transition to ICD-10-CM with the help of Carol J. Buck! Auditing cases in every chapter offer realistic experience with auditing coded reports. UNIQUE! Evaluation and Management (E/M) Audit Forms, developed to determine the correct E/M codes, simplify the coding process and help you ensure accuracy. Dual Coding prepares you for the switch to ICD-10 by accompanying all ICD-9 answers with corresponding codes from ICD-10-CM. Realistic patient cases simulate the professional coding experience by using actual medical records (with personal patient details changed or removed), allowing you to practice coding with advanced material. UNIQUE! Netter anatomy plates in each chapter help you understand anatomy and how it affects coding. From the Trenches boxes in each chapter highlight real-life medical coders and provide practical tips, advice, and encouragement. More than 175 illustrations and a full-color design make advanced concepts more accessible and visually engaging. Stronger focus on auditing cases prepares you to assign correct codes to complicated records, as well as audit records for accuracy. Updated content presents the latest coding information so you can practice with the most current information available.

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