ICD-10-CM Coding Guidelines

- Chapter 4: Endocrine, Nutritional, and Metabolic Diseases (E00-E89) a. Diabetes mellitus
 - 6) Secondary Diabetes Mellitus

Case Study

This 34-year-old patient is being seen for ongoing management of steroidinduced diabetes mellitus which was due to the prolonged use of corticosteroids, which have been discontinued. The patient's diabetes is managed with insulin which he has been taking for the last two years

Answer:

- T38.0x5S Refer to Drug and Chemical Table, Corticosteroid, adverse effect
- E09.9 Diabetes, diabetic, (mellitus) (sugar), due to drug or chemical
- Z79.4 Long-term (current) drug therapy (use of), insulin-

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Step-By Step Medical Coding 2011 Edition - E-Book Carol J. Buck, 2011-02-11 Updated content reflects the latest coding developments so you can practice with the most current information available New ICD 10 CM chapters prepare you for the upcoming 2013 transition ICD 10 CM Official Guidelines for Coding and Reporting boxes contain excerpts of the actual guidelines presenting the official wording alongside in text discussions to help you better understand upcoming Health Insurance Today - E-Book Janet I. Beik, 2017-08-05 Learn to comprehend the complexities of health insurance Using a reader friendly approach Health Insurance Today A Practical Approach 6th Edition gives you a solid understanding of health insurance its types and sources and the ethical and legal issues surrounding it This new edition incorporates the latest information surrounding ICD 10 the Patient Protection and Affordable Care Act and other timely federal influencers as it guides you through the important arenas of health insurance such as claims submission methods the claims process coding reimbursement hospital billing and more Plus with hands on UB 04 and CMS 1500 02 12 case studies on Evolve you will come away with a clear understanding and working knowledge of the latest advances and issues in health insurance CMS 1500 02 12 software with case studies gives you hands on practice filling in a CMS 1500 02 12 form electronically What Did You Learn review questions ensure you understand the material already presented before moving on to the next section Imagine This scenarios help you understand how information in the book applies to real life situations Stop and Think exercises challenge you to use your critical thinking skills to solve a problem or answer a question Clear attainable learning objectives help you focus on the most important information and make chapter content easier to teach Chapter summaries relate to learning objectives provide a thorough review of key content and allow you to guickly find information for further review Direct conversational writing style makes reading fun and concepts easier to understand HIPAA tips emphasize the importance of privacy and following government rules and regulations NEW Updated content on the latest advances covers the most current information on Medicare Electronic Health Records Version 5010 and much more NEW Expanded ICD 10 coverage and removal of all ICD 9 content ensures you stay up to date on these significant healthcare system changes NEW UB 04 software and case studies gives you hands on practice filling out electronic UB 04 forms NEW UNIQUE SimChart for the Medical Office case studies gives you additional real world practice Insurance Today Janet I. Beik, 2013 With an emphasis on preparing and filing claims electronically Health Insurance Today 4th Edition features completely updated content on ICD 10 coding ARRA HI TECH Version 5010 electronic health records the Health Insurance Reform Act and more The friendly writing style and clear learning objectives help you understand and retain important information with review questions and activities that encourage critical thinking and practical application of key concepts Meeting the Challenges of Data Quality Management Laura Sebastian-Coleman, 2022-01-25 Meeting the Challenges of Data Quality Management outlines the foundational concepts of data quality management and its challenges

The book enables data management professionals to help their organizations get more value from data by addressing the five challenges of data quality management the meaning challenge recognizing how data represents reality the process quality challenge creating high quality data by design the people challenge building data literacy the technical challenge enabling organizational data to be accessed and used as well as protected and the accountability challenge ensuring organizational leadership treats data as an asset Organizations that fail to meet these challenges get less value from their data than organizations that address them directly The book describes core data quality management capabilities and introduces new and experienced DQ practitioners to practical techniques for getting value from activities such as data profiling DQ monitoring and DQ reporting It extends these ideas to the management of data quality within big data environments This book will appeal to data quality and data management professionals especially those involved with data governance across a wide range of industries as well as academic and government organizations Readership extends to people higher up the organizational ladder chief data officers data strategists analytics leaders and in different parts of the organization finance professionals operations managers IT leaders who want to leverage their data and their organizational capabilities people processes technology to drive value and gain competitive advantage. This will be a key reference for graduate students in computer science programs which normally have a limited focus on the data itself and where data quality management is an often overlooked aspect of data management courses Describes the importance of high quality data to organizations wanting to leverage their data and more generally to people living in today s digitally interconnected world Explores the five challenges in relation to organizational data including Big Data and proposes approaches to meeting them Clarifies how to apply the core capabilities required for an effective data quality management program data standards definition data quality assessment monitoring and reporting issue management and improvement as both stand alone processes and as integral components of projects and operations Provides Data Quality practitioners with ways to communicate consistently with Beik's Health Insurance Today - E-Book Julie Pepper, 2023-09-14 Selected for Doody's Core Titles 2024 in stakeholders Managed Care Master the complexities of health insurance with this easy to understand guide Beik's Health Insurance Today 8th Edition provides a solid foundation in basics such as the types and sources of health insurance the submission of claims and the ethical and legal issues surrounding insurance It follows the claims process from billing and coding to reimbursement procedures with realistic practice on the Evolve companion website This edition adds up to date coverage of cybersecurity COVID 19 crowdfunding for medical bills and cost value calculators Making difficult concepts seem anything but this resource prepares you for a successful career as a health insurance professional Direct conversational writing style makes learning insurance and billing concepts easier Clear and attainable learning objectives with chapter content that follows the order of the objectives make learning easier for students and make chapter content easier to teach for educators Learning features include review questions scenarios and additional exercises to ensure comprehension critical thought and

application to practice Hands on practice with a fillable CMS 1500 form and accompanying case studies and unique UB 04 forms on the companion Evolve website ensure practicum and job readiness HIPAA Tips emphasize the importance of privacy and government rules and regulations ensuring a solid foundation in regulatory compliance NEW Additional content on cybersecurity emphasizes the importance of keeping digital information private and secure NEW Information on crowdfunding for medical bills discusses how this practice affects billing NEW Geographic Practice Cost Indexes Resource Based Relative Value Scale GPCI RBPVU calculators are included NEW Coverage of COVID 19 explores its impact on billing reimbursement and employment ICD-10-CM: Official Guidelines for Coding and Reporting - FY 2019 (October 1, 2018 - September 30, 2019) Centers for Medicare and Medicaid Services (CMS), National Center for Health Statistics (NCHS), U.S. Department of Health and Human Services (DHHS), 2018-08 These guidelines have been approved by the four organizations that make up the Cooperating Parties for the ICD 10 CM the American Hospital Association AHA the American Health Information Management Association AHIMA CMS and NCHS These guidelines are a set of rules that have been developed to accompany and complement the official conventions and instructions provided within the ICD 10 CM itself The instructions and conventions of the classification take precedence over quidelines. These quidelines are based on the coding and sequencing instructions in the Tabular List and Alphabetic Index of ICD 10 CM but provide additional instruction Adherence to these guidelines when assigning ICD 10 CM diagnosis codes is required under the Health Insurance Portability and Accountability Act HIPAA The diagnosis codes Tabular List and Alphabetic Index have been adopted under HIPAA for all healthcare settings **Principles of ICD-10-CM Coding** Deborah J. Grider, 2012 The transition to ICD 10 CM will impact all physician practices Smoothly and successfully make the move to ICD 10 CM with Principles of ICD 10 CM Coding Designed for both the self learner and classroom use this educational ICD 10 CM coding resource teaches the user how to make the correct decision when selecting diagnosis code s using the new coding system Written for all skill levels from basic to advanced Principles of ICD 10 CM Coding provides examples of real life chart notes to enhance understanding and provides the tools needed to confidently move from ICD 9 CM to ICD 10 CM Principles of ICD 10 CM Coding objectives Understand the purpose of ICD 10 CM and its relationship to the reimbursement process Understand and apply coding conventions when assigning codes and interpret basic coding guidelines for outpatient care Properly sequence ICD 10 CM codes and assign ICD 10 CM codes to the highest level of specificity Click here to view the Principles of ICD 10 CM Coding Basic ICD-10-CM/PCS Coding Lou Ann Schraffenberger, 2012-12 Organized to reflect the ICD 10 CM PCS errata chapters Basic ICD 10 CM PCS Coding 2013 Edition provides students and in training professionals with a balanced approach to coding In depth instruction and practical exercises build a foundation from which to apply ICD 10 CM PCS conventions and rules to everyday examples and exercises using actual case documentation New content is intended to give students a basic level of understanding of ICD 10 CM PCS that will allow them to begin the education process of transitioning to coding with ICD 10 CM PCS An instructor's guide with additional exercises an answer key background information pointers for students and PowerPoint slides for the classroom is available. The instructor's answer key provides detailed explanations of how codes are assigned in ICD 10 CM and constructed in ICD 10 PCS A companion workbook Basic ICD 10 CM Exercises fourth edition is available for purchase New with this Edition Updated to 2013 codes effective October 1 2012 Reorganized to reflect the ICD 10 chapter structure Includes ICD 10 CM coding guidelines within each chapter Key Features Chapters are organized by body systems with a step by step approach to rules rationale for use including relevant parts of the ICD 10 CM coding guidelines and review exercises plus procedure coding Each chapter in the ICD 10 CM PCS classification system is addressed with exercises to apply coding knowledge and skills Instruction is focused on critical areas such as Prospective Payment Systems and supplementary codes provides a professional perspective Online Resource includes full text of both the ICD 10 CM and ICD 10 PCS Coding Guidelines and ICD 10 PCS Reference Manual

ICD-10-CM 2021: The Complete Official Codebook with Guidelines American Medical Association, 2020-09-20 ICD 10 CM 2021 The Complete Official Codebook provides the entire updated code set for diagnostic coding organized to make the challenge of accurate coding easier This codebook is the cornerstone for establishing medical necessity determining coverage and ensuring appropriate reimbursement Each of the 21 chapters in the Tabular List of Diseases and Injuries is organized to provide quick and simple navigation to facilitate accurate coding The book also contains supplementary appendixes including a coding tutorial pharmacology listings a list of valid three character codes and additional information on Z codes for long term drug use and Z codes that can only be used as a principal diagnosis Official coding guidelines for 2021 are bound into this codebook FEATURES AND BENEFITS Full list of code changes Quickly see the complete list of new revised and deleted codes affecting the FY 2021 codes including a conversion table and code changes by specialty QPP symbol in the tabular section The symbol identifies diagnosis codes associated with Quality Payment Program QPP measures under MACRA New and updated coding tips Obtain insight into coding for physician and outpatient settings New and updated definitions in the tabular listing Assign codes with confidence based on illustrations and definitions designed to highlight key components of the disease process or injury and provide better understanding of complex diagnostic terms Intuitive features and format This edition includes full color illustrations and visual alerts including color coding and symbols that identify coding notes and instructions additional character requirements codes associated with CMS hierarchical condition categories HCC Medicare Code Edits MCEs manifestation codes other specified codes and unspecified codes Placeholder X This icon alerts the coder to an important ICD 10 CM convention the use of a placeholder X for three four and five character codes requiring a seventh character extension Coding guideline explanations and examples Detailed explanations and examples related to application of the ICD 10 CM chapter guidelines are provided at the beginning of each chapter in the tabular section Muscle tendon translation table This table is used to determine muscle tendon action flexor

extensor other which is a component of codes for acquired conditions and injuries affecting the muscles and tendons Index to Diseases and Injuries Shaded guides to show indent levels for subentries Appendices Supplement your coding knowledge with information on proper coding practices risk adjustment coding pharmacology and Z codes ICD-10-CM Official Guidelines for Coding and Reporting - FY 2020 (October 1, 2019 - September 30, 2020) U.S. Department of Health and Human Services DHHS, 2019-11-19 These guidelines are a set of rules that have been developed to accompany and complement the official conventions and instructions provided within the ICD 10 CM itself The instructions and conventions of the classification take precedence over guidelines These guidelines are based on the coding and sequencing instructions in the Tabular List and Alphabetic Index of ICD 10 CM but provide additional instruction Adherence to these guidelines when assigning ICD 10 CM diagnosis codes is required under the Health Insurance Portability and Accountability Act HIPAA The diagnosis codes Tabular List and Alphabetic Index have been adopted under HIPAA for all healthcare settings A joint effort between the healthcare provider and the coder is essential to achieve complete and accurate documentation code assignment and reporting of diagnoses and procedures These guidelines have been developed to assist both the healthcare provider and the coder in identifying those diagnoses that are to be reported ICD-10-CM Coding Guidelines Made Easy: 2019 Terry Tropin, 2018-09-20 This book is based on the Official Coding Guidelines effective October 1 2018 First the dense confusing guidelines are translated into plain English Then the guidelines are placed into tables for easy reference and faster more accurate coding But the book doesn't stop with just the guidelines Other material that is confusing such as MRSA MSSA and coding for sepsis are also explained This is a great book for coding students and coders already working in the ICD-10 Essentials: Applying ICD-10-CM Guidelines 2020 Optum360,2019-10 CD 10 Essentials Applying ICD 10 CM field Guidelines previously ICD 10 Essentials Determining the Diagnosis is a companion resource for ICD 10 CM that provides in depth explanations of everything from the basic format and structure of the ICD 10 CM code set to appropriate application of the coding conventions and guidelines Using coding examples and case studies correct code assignment is explained with an emphasis on application of the coding and reporting guidelines including coding of complex conditions that require multiple codes with specific sequencing requirements Illustrations decision trees and other coding tools designed to enhance understanding of ICD 10 CM and improve coding accuracy are key features in this reference Workbook for ICD-10-CM/PCS Coding: Theory and Practice, 2019/2020 Edition E-Book Elsevier Inc, 2018-07-28 Reinforce your understanding of ICD 10 CM and ICD 10 PCS medical coding with practical exercises Corresponding to the chapters in ICD 10 CM PCS Coding Theory and Practice 2019 2020 Edition this workbook lets you apply your coding knowledge to realistic medical records This edition reflects the latest updates to ICD 10 and includes hundreds of engaging interactive exercises to help you review concepts develop skills and prepare for successful employment as a medical coder UPDATED ICD 10 codes and coding guidelines revisions ensure you have the most up to date information available UPDATED codes for Pancreatitis

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Tabular List and Alphabetic Index have been adopted under HIPAA for all healthcare settings A joint effort between the healthcare provider and the coder is essential to achieve complete and accurate documentation code assignment and reporting of diagnoses and procedures These guidelines have been developed to assist both the healthcare provider and the coder in identifying those diagnoses that are to be reported The importance of consistent complete documentation in the medical record cannot be overemphasized Without such documentation accurate coding cannot be achieved The entire record should be reviewed to determine the specific reason for the encounter and the conditions treated Coding Guidelines Made Easy Terry Tropin, 2017-09-20 This book is based on the Official Coding Guidelines effective October 1 2017 First the dense confusing guidelines are translates them into plain English Then the guidelines are placed into tables for easy reference and faster more accurate coding But the book doesn't stop there In addition to the Guidelines other material that is confusing is also explained Examples are coding for MRSA MSSA and coding for Sepsis This is a great book for coding students and coders already working in the field ICD-10-CM Coding Guidelines Made Easy Terry Tropin, 2019-09-12 This book takes the confusing dense coding guidelines and translates them into plain English The guidelines are then placed into tables for easy reference It was developed by a coding instructor with many years of teaching experience who was frustrated by textbooks that printed the guidelines but didn t explain them The book is designed as a supplement to coding textbooks and as a reference for coding professionals This book includes the official coding guidelines effective October 1 2019 ICD-10-CM 2022 the Complete Official Codebook with Guidelines American Medical Association, 2021-09-20 ICD 10 CM 2022 The Complete Official Codebook provides the entire updated code set for diagnostic coding organized to make the challenge of accurate coding easier This codebook is the cornerstone for establishing medical necessity correct documentation determining coverage and ensuring appropriate reimbursement Each of the 22 chapters in the Tabular List of Diseases and Injuries is organized to provide quick and simple navigation to facilitate accurate coding The book also contains supplementary appendixes including a coding tutorial pharmacology listings a list of valid three character codes and additional information on Z codes for long term drug use and Z codes that can only be used as a principal diagnosis Official 2022 coding guidelines are included in this codebook FEATURES AND BENEFITS Full list of code changes Quickly see the complete list of new revised and deleted codes affecting the CY2022 codes including a conversion table and code changes by specialty QPP symbol in the tabular section The symbol identifies diagnosis codes associated with Quality Payment Program QPP measures under MACRA New and updated coding tips Obtain insight into coding for physician and outpatient settings Chapter 22 features U codes and coronavirus disease 2019 COVID 19 codes Improved icon placement for ease of use New and updated definitions in the tabular listing Assign codes with confidence based on illustrations and definitions designed to highlight key components of the disease process or injury and provide better understanding of complex diagnostic terms Intuitive features and format This edition includes color illustrations and visual alerts including

color coding and symbols that identify coding notes and instructions additional character requirements codes associated with CMS hierarchical condition categories HCC Medicare Code Edits MCEs manifestation codes other specified codes and unspecified codes Placeholder X This icon alerts the coder to an important ICD 10 CM convention the use of a placeholder X for three four and five character codes requiring a seventh character extension Coding guideline explanations and examples Detailed explanations and examples related to application of the ICD 10 CM chapter guidelines are provided at the beginning of each chapter in the tabular section Muscle tendon translation table This table is used to determine muscle tendon action flexor extensor other which is a component of codes for acquired conditions and injuries affecting the muscles and tendons Index to Diseases and Injuries Shaded guides to show indent levels for subentries Appendices Supplement your coding knowledge with information on proper coding practices risk adjustment coding pharmacology and Z codes ICD-10-CM Coding Guidelines Made Easy Terry Tropin,2016-06-17 The Official Coding Guidelines for ICD 10 CM are dense confusing and repetitive In addition guidelines related to a single body system may be located in multiple sections of the guidelines It takes a lot of time to find the correct guideline and interpret it This book combines all the guidelines for one body system or condition in one place The guidelines are rewritten into plain English and presented in easy to use tables The tables provide information on definitions sequencing requirements and need for additional codes This enables the coder to find the needed guideline quickly and easily This book is designed for use by students and as quick reference for coders working in the field

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