

Official ICD-9-CM Guidelines for Coding and Reporting

INGENIX

Effective October 1, 2009

Narrative changes appear in bold text. Items underlined have been moved within the guidelines since October 1, 2008.

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, 9th Revision, Clinical Modification (ICD-9-CM). These guidelines should be used as a companion document to the official version of the ICD-9-CM as published on CD-ROM by the U.S. Government Printing Office (GPO).

These guidelines have been approved by the four organizations that make up the Cooperating Parties for the ICD-9-CM: the American Hospital Association (AHA), the American Health Information Management Association (AHIMA), CMS, and NCHS. These guidelines are included on the official government version of the ICD-9-CM, and also appear in "Coding Clinic for ICD-9-CM" published by the AHA.

These guidelines are a set of rules that have been developed to accompany and complement the official conventions and instructions provided within the ICD-9-CM itself. **The instructions and conventions of the classification take precedence over guidelines.** These guidelines are based on the coding and sequencing instructions in Volumes I, II and III of ICD-9-CM, but provide additional instructions. Adherence to these guidelines when assigning ICD-9-CM diagnosis and procedure codes is required under the Health Insurance Portability and Accountability Act (HIPAA). The diagnosis codes (Volumes 1-2) have been adopted under HIPAA for all healthcare settings. Volume 3 procedure codes have been adopted for inpatient procedures reported by hospitals. 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 and procedures 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.

The term encounter is used for all settings, including hospital admissions. In the context of these guidelines, the term provider is used throughout the guidelines to mean physician or any qualified health care practitioner who is legally accountable for establishing the patient's diagnosis. Only this set of guidelines, approved by the Cooperating Parties, is official.

The guidelines are organized into sections. Section I includes the structure and conventions of the classification and general guidelines that apply to the entire classification, and chapter-specific guidelines that correspond to the chapters as they are arranged in the classification. Section II includes guidelines for selection of principal diagnosis for

non-outpatient settings. Section III includes guidelines for reporting additional diagnoses in non-outpatient settings. Section IV is for outpatient coding and reporting.

Section I. Conventions, general coding guidelines and chapter specific guidelines

A. Conventions for the ICD-9-CM

1. Format
2. Abbreviations
 - a. Index abbreviations
 - b. Tabular abbreviations
3. Punctuation
4. Includes and Excludes Notes and Inclusion terms
5. Other and Unspecified codes
 - a. "Other" codes
 - b. "Unspecified" codes
6. Etiology/manifestation convention ("code first", "use additional code" and "in diseases classified elsewhere" notes)
7. "And"
8. "With"
9. "See" and "See Also"

B. General Coding Guidelines

1. Use of Both Alphabetic Index and Tabular List
2. Locate each term in the Alphabetic Index
3. Level of Detail in Coding
4. Code or codes from 001.0 through V89.09
5. Selection of codes 001.0 through 999.9
6. Signs and symptoms
7. Conditions that are an integral part of a disease process
8. Conditions that are not an integral part of a disease process
9. Multiple coding for a single condition
10. Acute and Chronic Conditions
11. Combination Code
12. Late Effects
13. Impending or Threatened Condition
14. Reporting Same Diagnostic Code More than Once
15. Admissions/Encounters for Rehabilitation
16. Documentation for BMI and Pressure Ulcer Stages
17. Syndromes

C. Chapter-Specific Coding Guidelines

1. Chapter 1: Infectious and Parasitic Diseases (001-139)
 - a. Human Immunodeficiency Virus (HIV) Infections

Icd 9 Cm Official Guidelines For Coding And Reporting 2013

Carol J. Buck



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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

2013 ICD-9-CM for Hospitals, Volumes 1, 2 and 3

Professional Edition -- E-Book Carol J. Buck, 2012-08-28 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 Hospitals Volumes 1 2 3 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 both physician based and inpatient coding Plus you can take this resource into 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 Non OR Procedure Code First Present on Admission Hospital Acquired Condition and CC and MCC 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

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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

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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 Federal Register ,2013-05 **Step-By-Step Medical Coding** Carol J. Buck,2013 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 **The CCDS Exam Study Guide** ,2010 **ICD-9-CM Official Guidelines for Coding and Reporting** ,1991 Health Care Finance and the

Mechanics of Insurance and Reimbursement Michael K. Harrington, 2019-10-01 Health Care Finance and the Mechanics of Insurance and Reimbursement stands apart from other texts on health care finance or health insurance in that it combines financial principles unique to the health care setting with the methods and process for reimbursement including coding reimbursement strategies compliance financial reporting case mix index and external auditing It explains the revenue cycle in detail correlating it with regular management functions and covers reimbursement from the initial point of care through claim submission and reconciliation Thoroughly updated for its second edition this text reflects changes to the Affordable Care Act Managed Care Organizations new coding initiatives new components of the revenue cycle from reimbursement to compliance updates to regulations surrounding health care fraud and abuse changes to the Recovery Audit Contractors RAC program and more

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Buck,2012-12-11 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 **The Next Step: Advanced Medical Coding and Auditing, 2013 Edition - E-Book** Carol J. Buck,2012-12-14 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 **Step-by-Step Medical Coding, 2014 Edition - E-Book**

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