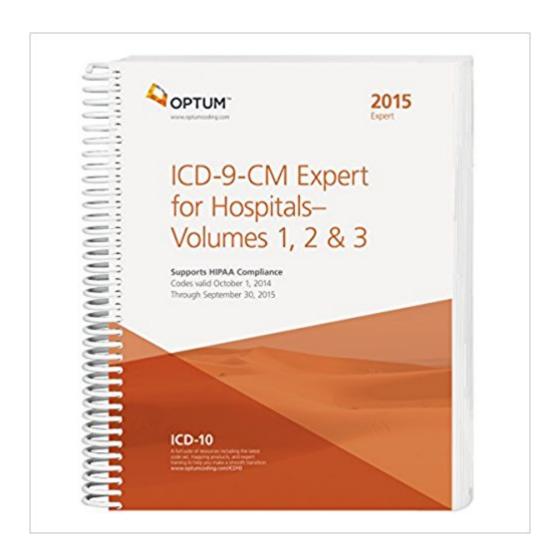


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ICD-9-CM Expert For Hospitals And Payers, Vol 1, 2 & 3 -- 2015 (Spiral)





Synopsis

2015 ICD-9-CM Expert for Hospitals, Volumes 1, 2 & 3 ICD-10-CM/PCS has been delayed, so let this final edition of the ICD-9-CM Expert for Hospitals, Volumes 1, 2 & 3 with the hallmark features and content that have provided accurate and reliable information for over 25 years serve to meet current coding challenges under HIPAA and to function as a solid reference for utilizing valuable legacy ICD-9-CM coded data. In addition, new ICD-10-CM features help you prepare for the code set transition. Key Features and Benefits Exclusive to the Expert edition: Optum Edge ICD-10-CM Coding Proficiency and Documentation Self-Assessment Test your ICD-10-CM readiness and skills with this 50 question guiz. Optum Edge ICD-10 Spotlight. Preview ICD-10 codes with the most frequently reported ICD-9-CM codes to learn as you work. Optum Edge Present on admission (POA) indicator tutorial with source documentation table. Access additional explanation and examples to help simplify POA, plus official guidelines regarding use of information in the medical record. Optum Edge Dx/MDC/DRG list. Enhance overall reimbursement and reduce potential fine risks with information concerning the MDC and MS-DRG that a specific principal Dx group is under in the new MS-DRG system. Includes these traditional hallmark features plus many more: Optum Edge Intuitive color-coded symbols and alerts. Identify critical coding and reimbursement issues quickly with alerts on the same page as the code you need Diagnosis and Procedure Medicare Code Edit (MCE) alerts. Color-coding and symbols identify all major Medicare Code Edits (MCE) used to audit claims submitted under the inpatient prospective payment system (IPPS) for diagnosis, including unacceptable PDx, questionable admission PDx, age, sex, CC and MCC, and manifestation codes. Also MCEs related to valid OR procedures, non-covered, limited coverage, non-operating room, bilateral edits and sex edits. AHA s Coding Clinic and official coding guideline tips. Use citations to link to the official coding advice every coder in every health care setting must follow. Symbols identify MCC and CC conditions. Ensure appropriate reimbursement by reporting patient severity correctly. Know when conditions are considered a complication or comorbidity, as well as which are major CCs that impact MS-DRG assignment. Optum Edge MCC and CC Exclusion list. The list of principal diagnoses for which the CC or MCC designated condition will not affect MS-DRG assignment is provided. Hospital-acquired condition (HAC) alerts. Know which conditions, when not present upon admission, will not impact DRG assignment. Optum Edge Adjunct procedure code alerts. Learn how to properly use ICD-9-CM procedure codes that provide additional information only and cannot be used alone. Additional digit required symbols. Know when an additional fourth or fifth digit is required for code specificity and validity to avoid invalid code submissions (provided in Index and Tabular Section) Highlighted coding instructional and

informational notes. Recognize important code usage guidance for specific sections more easily with highlighted notes. Illustrations and definitions. Gain in-depth understanding of anatomy and disease processes in relation to coding with clinically-oriented definitions and illustrations. Hallmark page design and features. Locate information quickly with a user-friendly page design, including dictionary-style headers, QuickflipTM color bleed tabs, and legend keys. This product is currently in reprint, items will be available February 2015.

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