Get Short, Timely Messages From SuperCoder Girl

- Your CMS carrier won't be paying your claims using the conversion factor of $36.0846 anymore. Read all about it: http://bit.ly/94IscN

- Just got an email from Reed Pew saying the AAPC National Conference cannot be held at the Gaylord (Nashville, TN). Stay tuned for more info.

- In a recent memo, BCBS states they will cut reimbursement by half on many modifiers, regardless of the circumstances: http://bit.ly/9DBQ0h 2:39 PM Mar 24th via web

- Know what to do when the MD does a consult, the primary insurer pays for it, and Medicare is the secondary payer? Read: http://bit.ly/dtdBtl

- Confused about foreign body removal (FBR) coding? There's light at the end of the tunnel. Read this "what if" article.

Twitter is a rich source of instantly updated information. It's easy to stay updated on an incredibly wide variety of coding topics.
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Join the Supercoder Community

Bernie Lozada Found you guys in my Coding Edge magazine I receive from AAPC. Neat!!

April 14 at 12:02pm · Comment · Like · Flag

http://supercoder.com Medical Coders: Join the fight for truth, justice & maximum ethical reimbursement!

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Medical Coding 101

Boost your career

3

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Executive Editor, Inhealthcare, LLC
Editor/Writer, *Urology Coding Alert*

Agenda

- What Is Medical Coding? Why is it important?
- Is there really a difference between billing and coding?
- 4 Steps to Successful Coding
- Alphabet Soup: CPT, HCPCS, and ICD-9
- 'Golden Rules' of Coding

What Is Medical Coding?

- Most healthcare providers in the United States file health insurance claims on behalf of their patients. Without submitting a claim, your practice won't get paid.

- Medical coding is basically assigning codes to diagnoses and procedures in the patient's medical record to tell the payer (and others) about the encounter.

- We use a universal system of coding so that every number you assign on a claim has specific meaning so that other entities can decipher what the doctor did and why.

Why is coding important?

Without proper coding, providers cannot obtain reimbursement from insurance companies.

What Is Medical Coding?

There's more to coding than payment

Medical classification systems are used for a variety of applications in medicine and healthcare information, including:

- Statistical analysis of diseases and therapeutic actions
- Reimbursement
- Knowledge-based and decision support systems
- Surveillance of epidemic or pandemic outbreaks
- Evaluate processes and outcomes in healthcare
- Internal and external quality management
- And more!

Coding vs. Billing

Though similar, billing and coding
are separate functions in a practice.

Coder

- Assigns specific codes to identify procedures and services
- Reads encounter documentation and assigns appropriate universal codes
- Enters the codes on the claim form or in an electronic system

Biller

- Transmits the claim to the insurance company
- Follows up on claims to ensure proper payment
- Researches, amends, resubmits, and/or appeals denied claims

Four Steps to Coding Success – "READ"

1. **Review the Record**
2. **Extract the Appropriate Procedure/Service Code**
3. **Assign a Diagnosis Code**
4. **Determine the Exceptions**

Four Steps to Coding Success – Step 1: R

Review the Record

- The medical record is *THE* source for all of your coding information.

- Read the record and determine the services/procedures performed and the diagnoses the provider rendered – then choose your codes.

- The documentation verifies that the codes you report are appropriate for that encounter.
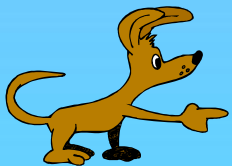
Golden Rule #1:
If it's not documented, it didn't happen.

Four Steps to Coding Success – Step 2: E

Extract the Appropriate Procedure/Service Code

- After reviewing the documentation, determine the procedure and service codes you should report.

- You'll use CPT (Current Procedural Terminology) and/or HCPCS (Healthcare Common Procedure Coding System) codes for this step.

CPT

- CPT converts medical procedures and services into five-digit alphanumeric codes.

- Covers every sort of procedure or service a healthcare practitioner can provide.

- Divided into six major sections – Evaluation and Management Services, Anesthesia, Surgery, Radiology, Pathology/Laboratory, and Medicine – plus, two supplemental sections: Category II and Category III codes

- Maintained by the American Medical Association.

- Updated every January 1st, with occasional small updates during the year.

HCPCS

- Refers to medical supplies and/or procedures that are not listed in the CPT.

- HCPCS codes are alphanumeric – they start with a letter and end with four numbers.

- Maintained by the Centers for Medicare & Medicaid Services (CMS).

- Updated every January 1st, with smaller, quarterly updates during the year.
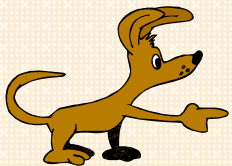
Golden Rule #2:
Stay up to date on code changes.
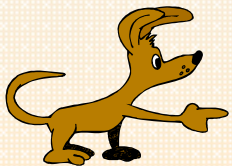
Four Steps to Coding Success – Step 3: A

Assign a Diagnosis Code

- Discern the reason for the procedure or service – either the patient's signs or symptoms or the final diagnosis the provider documented.

- You'll use ICD-9 (International Classification of Diseases 9th Revision Clinical Modification) codes for this step.

ICD-9

- ICD-9 uses numeric or alphanumeric codes of three, four, or five digits.

- Classifies symptoms, sickness, and causes of injuries or diseases.

- Divided into three volumes – Volume I (Tabular), Volume 2 (Alphabetic Index), and Volume 3 (Procedure codes for facilities)

- Maintained by the World Health Organization.

- Updated every October 1st, with occasional updates during the year.

Golden Rule #3:
Never guess at a diagnosis code.

Four Steps to Coding Success – Step 4: E

Determine the Exceptions

- Just because there are CPT, ICD-9, or HCPCS codes for the procedures or services in the documentation, that doesn't always mean you can code them.

- You need to review several things, including:

  - Coding rules/regulations

  - Payer policies

  - AMA guidelines

  - Code bundling rules, such as Correct Coding Initiative (CCI) edits

  - Modifier necessity

  - And more.

Need More Basic Coding Training?

Check out these upcoming '101' audioconferences:

- **Medical Coding 101: The Need-to-Know for CEOs** – June 22
- **Urology Coding 101 Series**
  - ➢ August 18 – Session 1: Laparoscopy for Urologists
  - ➢ September 22 – Session 2: Office Coding
  - ➢ October 20 – Session 3: Nephrectomy and Related Procedures

Or order these just-finished audioconferences on CD:
- **Ob-gyn Anatomy 101 for Coders**
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