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## ICD-10-CM Guidelines, Documentation & Advanced Specificity – Learn Tips and Tools to Make a Smooth Transition in October 2014

**AHIMA-Approved ICD-10-CM/PCS**  
**Stacey Chevious, BA, CPC, AHI, CDIP**  
**June 26, 12 PM EST**



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# Agenda

- Get an overview of ICD-10 – including glimpses into the major ways ICD-10 is very different from ICD-9
- Prepare for code documentation requirement changes
- Tackle the advanced specificity and the stronger clinical knowledge requirements that will be necessary for proper selection of ICD-10-CM code sets
- Make documentation improvements now - like teaching cardiologists to be specific as they identify each vein
- Use ICD-10-CM to identify the appropriate diagnoses
- Easily convert ICD-9-CM codes to ICD-10-CM with two mappers, including CMS GEMs and SuperCoder's Extended Logic bridge to ensure you find the most appropriate code
- Focus on the ICD-10-CM changes that most affect your specialty
- Discover the impact ICD-10-CM will have on your billing and software systems and keep the payments coming in
- Determine whether you should report multiple codes or a single ICD-10-CM code
- Condense top used ICD-10 diagnoses into manageable-sized superbills.



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# Biggest Change in Three Decades – are you equipped for it?

ICD-10 is the biggest change in medical coding in close to three decades - with diagnosis codes increasing from **14,000 to 69,000!** The countdown to this system stands at just over a year, so now is a great time to take a break from focusing on new diagnosis codes and zero in on the transition details your practice needs to know.



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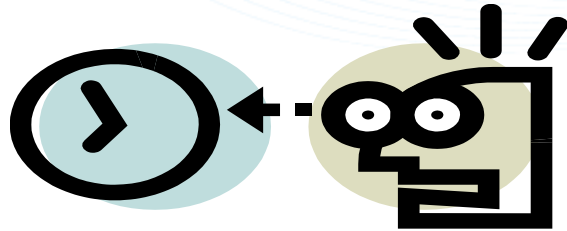
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# ICD-10 Jitters?



As the implementation day inches closer, you could be asking yourself:

- Will you be ready by October 1, 2014?
- Should you wait until October 1, 2014 to use ICD-10?
- How to prepare for documentation changes and improvements with ICD-10?
- What's the difference between ICD-9-CM and ICD-10-CM besides 'more room' and greater specificity?
- How to tackle the high level of specificity that the new system will bring to your work?
- How will this implementation impact my job?



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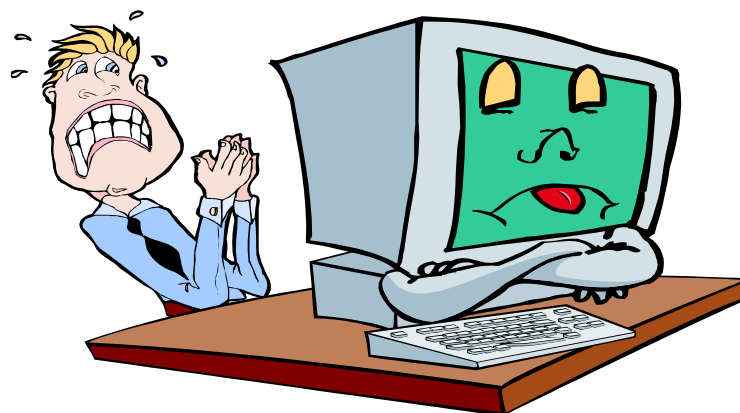
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# Don't worry! That's why SuperCoder is here today – to ease your ICD-10 concerns!

**SuperCoder** combines online, print, live and audio training on ICD-10 that focuses on each individual's/practice's/organization's needs in order to reduce training time and cost. Our ICD-10 editors are AHIMA certified and have worked with national consultants.



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# What to Expect in 2014

## Advanced Specificity

ICD-10-CM requires much greater detail to determine the proper diagnoses than ICD-9. A more thorough understanding of anatomy and physiology is required for this new code set.

**Example:** A physician treats a patient for a lower back pressure ulcer.

**ICD-9:** You should report 707.03 (*Pressure ulcer; lower back*) and an additional code from 707.20-707.25 (*Pressure ulcer stages ...*) to identify the pressure ulcer stage.



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# Gear up for Advanced Specificity

- 707.20 -- *Pressure ulcer, unspecified stage*
- 707.21 -- *Pressure ulcer stage I*
- 707.22 -- *Pressure ulcer stage II*
- 707.23 -- *Pressure ulcer stage III*
- 707.24 -- *Pressure ulcer stage IV*
- 707.25 -- *Pressure ulcer, unstageable*



**Note:** Descriptor specifies the stage.

## ICD-10 Changes:

1. The example does not include enough information. You need to know whether the ulcer is on the left or right.
2. You'll report a single code. Some options will be (but are not limited to): L89.131 (*Pressure ulcer of right lower back, stage I*) L89.141 (*Pressure ulcer of left lower back, stage I*).



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**Bottom line:** You'll need additional anatomic details when you start using ICD-10.

**Example:** For the same lower back pressure ulcer, the proper ICD-10 code will depend on whether the ulcer is on the left or right.

### **Nuggets:**

1. Body side information didn't matter for ICD-9. But ICD-10 will allow you to be more specific.
2. Rather than using two codes as you do under ICD-9, a single ICD-10 code will represent both the anatomic location and the stage.
  - Examples: L89.131 (*Pressure ulcer of right lower back, stage I*) or L89.141 (*Pressure ulcer of left lower back, stage I*).



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# 3 Changes for Coding Conventions

While many coding conventions will remain the same as you make the transition, you'll need to be aware of a few crucial differences for accurate reporting.

## 1. Excludes May Mean Two Different Things

One major change is that ICD-10 has two different types of "excludes" notes. While this might seem like another layer of complication in coding, it will actually clear up one of ICD-9's little quirks.



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# ICD-9 Versus ICD-10

## 2. 'X' Marks the Spot

When you receive your ICD-10 manual, you may see certain codes that include an "x" or an "x?" in them -- but don't chalk it up to a printing error. The "x" in your code listing is actually there to help you.

## 3. Keep An Eye (And Ear, Etc.) on Laterality

You may have heard news about the ICD-10 manual being substantially thicker, but don't be alarmed -- much of the book's additions are merely due to the fact that many codes will require you to denote whether the left side or right side was treated when dealing with certain anatomic areas (eyes, ears, hands, hands, feet, ovaries, etc.)



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# What's the difference between ICD-9 and ICD-10 besides 'more room' and greater specificity?

- ICD-10 codes are alpha numeric and up to seven characters in length; ICD-9 codes are only three to five characters.
- ICD-10-CM has 21 chapters; ICD-9 has 17.
- ICD-9-CMs V and E codes are incorporated into the main classification in the ICD-10-CM code:
  - Placeholders (X) are required to hold places followed by additional characters.
  - Seventh characters are required for obstetrics, injuries, and external causes of injuries.
  - Post-operative complications will now be located specific to the procedure-specific body system.



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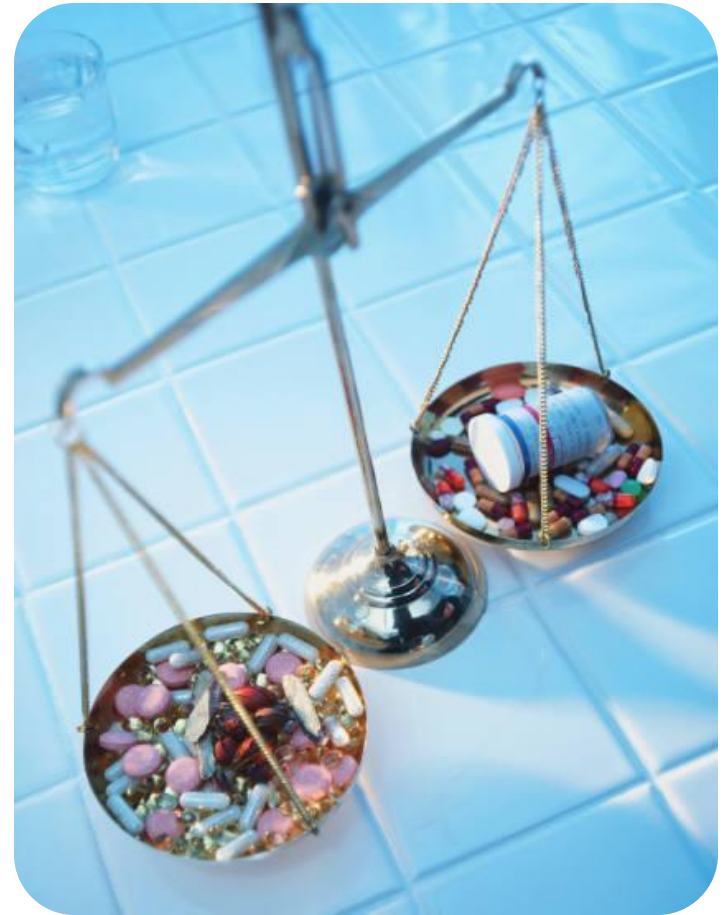
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# ICD-10 Versus ICD-9

- ICD-10 will classify injuries first by specific site and then by type of injury. ICD-9 classified injuries by type.
- ICD-10-CM includes full code titles for all codes, so it's not necessary to reference back to common fourth and fifth digit categories.
- Combination codes for conditions and common symptoms or manifestations, for example E10.21.



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# Bilateral Sites

For bilateral sites, you'll find a final character in the codes in which ICD-10 specifies the side or both sides as follows:

Anatomic Detail	Character Digit
Right side	1
Left side	2
Bilateral	3

**Example:** A physician sees a patient for a follow-up visit in which she examines an abscess of a bursa on the right wrist. You should report M71.031. Notice how the last digit is "1." If this was for the left wrist, you would report M71.032.



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# ICD-10 Tips & Strategies for a Smooth Transition

**What can you and your practice do to get ready for the conversion?**

One thing you won't need to do is remember a bunch of new codes.

## **Do this:**

Look at the codes that you most often use in your practice. Labs and pathologists should pick the top 30 diagnoses that they see and concentrate on knowing how to code those appropriately. Then you should create new job aids or requisitions for those procedures.



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# Strategy:

- Use your list of the top diagnoses that your lab sees to find the corresponding ICD-10 codes, and you've got your cheat sheet.
- Ensure that your coders are trained, your claims are form 5010 compliant, and your claim submission system supplier is ICD-10-ready.
- If you have an EMR or plan to get one, make sure it can handle ICD-10. If you're starting to bring in an EMR, you want to convert to ICD-10 first, not bring one in under ICD-9 and then convert.



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# Think All ICD-9 Codes Expand into Multiple Choices in 2014? Think Again

*Here's how you should report conditions both acute and chronic.*

You incorrectly may assume that ICD-9 codes will *always* multiply into more specific options, and that's why the ICD-10-CM manual is so big. However, that isn't always the case. Conditions requiring two or more ICD-9 codes right now might be simplified into a single ICD-10 option in 2014.

**Best bet:** To determine whether you should report multiple codes or a single ICD-10 code, read coding guidelines. Keep an eye out for phrases like "use additional code" or "code first."



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# Stress-Free Switch to the New System

**You don't have to be overwhelmed!**

**SuperCoder** is here to help with your ICD-10 transition by providing and tools to learn ICD-10-CM guidelines, documentation and advanced specificity!

Crosswalks	
CPT CROSSREF	ICD-10-CM BRIDGES
DRG	
ICD-9-CM Codes >> ICD-10-CM Codes	
ICD-9-CM Codes 382.9 : Unspecified otitis media	
Result ICD- 10-CM codes with description	
GEM	
H66.90	Otitis media, unspecified, unspecified ear
Extended	
H66.91	Otitis media, unspecified, right ear
H66.92	Otitis media, unspecified, left ear
H66.93	Otitis media, unspecified, bilateral



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# ICD-10 Products on SuperCoder

**SuperCoder's All-Encompassing ICD-10 products include:**

**Web-based coding tools and newsletter:**

- **ICD-10 Coder includes:**

1. ICD-10 Code Search
  2. ICD-10 Coding Alert
  3. ICD-10 Bridges
- Every SuperCoder "Code Search" product includes ICD-10 Code/Keyword Lookup, Index, and Tables (and ICD-9 too!)

**E-Learning:**

- ICD-10 Coder Practical Applications
- ICD-10 SuperCoder Anatomy & Pathophysiology
- ICD-10 Specialty Top Diagnoses
- ICD-10 Coder's Total Prep Pack



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# ICD-10 Coder: Online Code Look Up & Advice



## ICD 10 CODER

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WORK FASTER WITH SPECIALTY-SPECIFIC CODING ADVICE, CODE LOOKUP & TOOLS.

### ICD 10 Editor



**Suzanne Leder**  
M.Phil., CPC, COBGC, AHIMA  
certified ICD-10 trainer

E-mail bio

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### ICD 10 Tools & Reference

ICD 10 BRIDGES

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#### ICD-10 Bridges

The ICD-10 Bridges give you two ways to start learning the ICD-10 codes that you'll use in place of your commonly used ICD-9 codes. The ICD-10 Bridge offers a 1-1 ICD-9 to ICD-10 code ratio with the closest match based on the CMS General Equivalency Mappings (GEMs). Using WEDI logic (the physicians who designed ICD-10 for the US), the ICD-10 Extended Bridge tells you the range of specific codes that relate to the ICD-9 code.

☒ ICD-9 to ICD-10 ☐ ICD-10 to ICD-9

Enter Code :

Lookup



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# ICD-10 Coder Essentials:

- **Streamlined Search:** Lookup any **ICD-10-CM**, CPT®, ICD-9-CM, or HCPCS code and view the essential information on 1 page, including official descriptor, CPT-ICD-9 CrossRef, and mapper
- **ICD-10 Coding Alert:** Every month, get step-by-step, accurate, authoritative ICD-10 guidance from **AHIMA certified ICD-10 coding instructor** Suzanne Leder, CPC, COBGC
- **ICD-10 Bridges:** Easily convert ICD-9-CM codes to ICD-10-CM with 2 ICD-10 mappers, including CMS GEMs and our unique extended bridge
- **Increased Compliance:** Check allowed modifiers, associated drugs, CCI edits, and more all at code level
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# ICD-10 Code Search

SuperCoder.com provides a reliable source of ICD-9 and ICD-10 coding information, including a user-friendly search format already employed by more than 10,000 subscribers.

The online nature of SuperCoder.com allows multiple users from a single organization to search the code sets at the same time.

The code search function enables you to search by code set (e.g., ICD-9, ICD-10, or both), by a code's digits/characters, or by the code description, including related keywords. The search box features an autosuggest function to increase user productivity by reducing the number of keystrokes required to search for the proper code. The related codeset's index terms are included in the autosuggest so that the user has the benefit of official terminology. See the screenshot below for an example.



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asthm|

**asthma**

**Asthma, asthmatic**

**Asthma, asthmatic allergic**

**Asthma, asthmatic allergic stated cause**

**Asthma, asthmatic atopic**

**Asthma, asthmatic cardiac**

**Asthma, asthmatic cardiobronchial**

**Asthma, asthmatic cardiorenal**

**Asthma, asthmatic childhood**

**Asthma, asthmatic cough variant**



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# Search Results:

After you enter the search criteria and perform the search, the SuperCoder.com search results appear in an easy-to-review format. You have the option of seeing results from:

- ✓ ICD-9 and ICD-10 indexes
- ✓ index tables
- ✓ SuperCoder.com's search logic
- ✓ Or all of them at the same time

SuperCoder's extensive vocabulary allows the user to benefit from additional abbreviations and terms not included in the codeset's index that are commonly used in medical documentation. Additionally, users may sort the results by numeric order rather than weighted logic that places more commonly used codes higher in the results' list.



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# SuperCoder's Color-coded Search Results Reveal the Definitive Source of the Results

Indexes and SuperCoder ▼ Sorted by Indexes and SuperCoder ▼

## Results from indexes & SuperCoder for **asthma** (118)

### ICD-9-CM

#### 490-496 - CHRONIC OBSTRUCTIVE PULMONARY DISEASE AND ALLIED CONDITIONS (490-496)

- 4<sup>th</sup> 493 - Asthma
  - 5<sup>th</sup> 493.9 - Asthma unspecified
    - 493.90 Asthma unspecified
    - 493.91 Asthma unspecified type with status asthmaticus
    - 493.92 Asthma unspecified with (acute) exacerbation
  - 5<sup>th</sup> 493.0 - Extrinsic asthma
  - 5<sup>th</sup> 493.1 - Intrinsic asthma
  - 5<sup>th</sup> 493.8 - Other specified asthma
  - 5<sup>th</sup> 493.2 - Chronic obstructive asthma
- 4<sup>th</sup> 495 - Extrinsic allergic alveolitis

Purple underlined and red code results are from codeset index

### ICD-10-CM

#### J40-J47 - Chronic lower respiratory diseases

- 5<sup>th</sup> J45.9 - Other and unspecified asthma
  - J45.99 - Other asthma
  - J45.90 - Unspecified asthma
    - J45.902 Unspecified asthma with status asthmaticus
    - J45.909 Unspecified asthma, uncomplicated
    - J45.901 Unspecified asthma with (acute) exacerbation
- 4<sup>th</sup> J45 - Asthma

Blue underlined code range and green code results are from SuperCoder's extensive Keyword to Code Helper (KECH)



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# ICD-10 Coding Alert

In ICD-10, payers will reimburse based on the specificity of the diagnosis code chosen – unlike now. This is where proper documentation comes into play – the more detailed the documentation – the more specific the ICD-10 codes chosen – and in turn providers will realize their full reimbursement.

**This is where our monthly newsletter - *ICD-10 Coding Alert* – can help by providing:**

- ICD-10 training and documentation strategies
- Specific examples to help you apply ICD-10 coding guidelines
- Advice on converting your ICD-9 superbills to ICD-10 superbills

Every month, AHIMA-approved ICD-10 instructor, **Suzanne Leder**, CPC, COBGC will provide expert insight to overcome your toughest ICD-10 coding, documentation and reimbursement questions.



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# ICD-10 Coding Alert – monthly newsletter

**Here's just a sample of the expert insight you'll get every month:**

- New ICD-10 coding conventions to factor into your training
- Documenting completely so that ICD-10 codes can be chosen at the highest level of specificity
- What are some of the audit blunders practices may find themselves in when going through a review of their documentation, compared to the ICD-10 code chosen?
- Specifics on a variety of top diagnoses and how they will change
- Get ready for NCD changes to Parallel ICD-10 implementation
- Diagnosis Spotlight: Get set for broader reporting options for acute respiratory failure
- How to go about getting our providers' documentation ready for the transition from ICD-9 to ICD-10
- Treat "Unspecified" viral infection Dx carefully – you may have a better choice



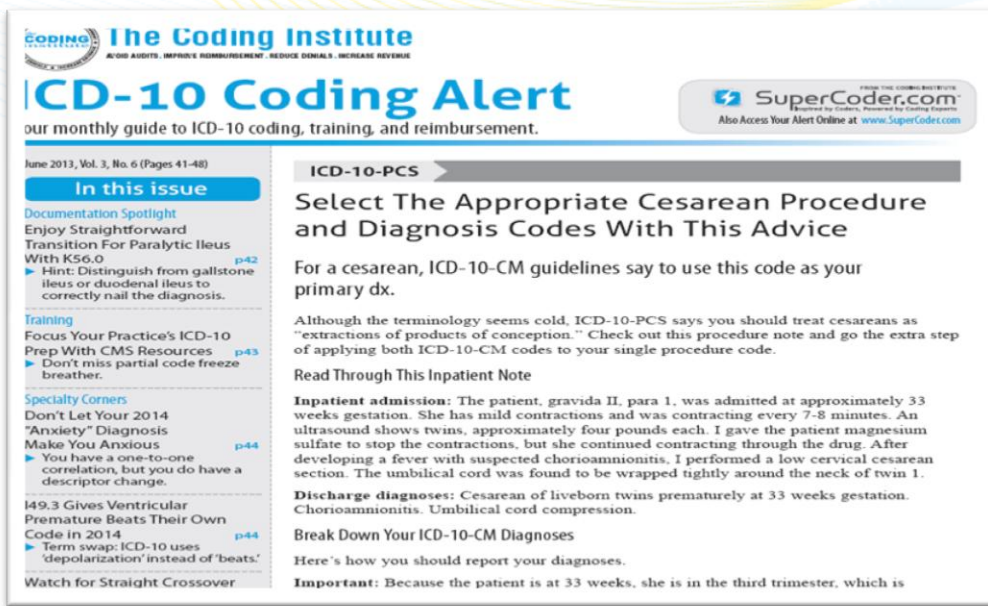
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## With *ICD-10 Coding Alert* you also get:

- Archived Library of Keyword and Code Searchable Articles on ICD-10
- Reader Questions on Tough ICD-10 Scenarios
- Possible 24 AAPC and 5 AHIMA CEUs
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# Example

Currently when you report acute atopic conjunctivitis, you report 372.05 (*Acute atopic conjunctivitis*). In the rare cases when insurers want to know which eye was affected, you append the right side (RT) or left side (LT) modifiers.

## ICD-10 changes:

1. Denote the specific type of conjunctivitis by using the accurate diagnosis code.
2. Indicate which eye was affected.

**Example:** An acute atopic conjunctivitis diagnosis could track to one of the following codes, depending on the eye affected:

- H10.10 -- Acute atopic conjunctivitis, unspecified eye
- H10.11 -- Acute atopic conjunctivitis, right eye
- H10.12 -- Acute atopic conjunctivitis, left eye
- H10.13 -- Acute atopic conjunctivitis, bilateral

**Documentation:** Your physicians should already be including the affected eye in their documentation.

**Action:** Format the superbill to capture the additional anatomical information.



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# ICD-10 Bridges: Easily Crosswalk to 2014 System

You can easily learn the ICD-10 codes you'll use in place of your commonly used ICD-9 codes with SuperCoder's two ICD-10 code mappers. The Bridges allow you to translate ICD-9-CM codes to ICD-10-CM codes, or vice versa.

**Here's just a sample of how you can use these ICD-10 Bridges:**

- Convert your ICD-9 superbills to ICD-10 superbills
- **Managers:** Identify ICD-10 code specifics you want to include in your system
- **For payers:** Back walk a provider supplied ICD-10 code into the ICD-9 accepted version
- **All:** Mix and match ICD-10 code implementation approaches to best fit your needs
- Get the ICD-9 and ICD-10 2012 code official definitions in seconds



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# ICD-10 Bridges

Here's an example of the search for ICD-9 fever code 780.60. Note that the results (bottom left) are links so that you can go directly to the code's details page. Also, just above the orange "Lookup" box, you may select whether to search from ICD-9 to ICD-10 or from ICD-10 to ICD-9. The current ICD-10-CM official guidelines are also conveniently available from this page.

## ICD-10 BRIDGES

The ICD-10 Bridges give you two ways to start learning the ICD-10 codes that you'll use in place of your commonly used ICD-9 codes. The ICD-10 Bridge offers a 1-1 ICD-9 to ICD-10 code ratio with the closest match based on the CMS General Equivalency Mappings (GEMs). Using WEDI logic (the physicians who designed ICD-10 for the US), the ICD-10 Extended Bridge tells you the range of specific codes that relate to the ICD-9 code.



☒ ICD-9 to ICD-10 ☐ ICD-10 to ICD-9

Enter Code :

780.60

Lookup

ICD-9-CM Codes >> ICD-10-CM Codes

**ICD-9-CM Codes** 780.60 : Fever, unspecified

**Result ICD-10-CM codes with description**

GEM

[R50.2](#) Drug induced fever

[R50.9](#) Fever, unspecified




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# **SuperCoder's ICD-10 E-Learning Curriculum for Seamless, Money-Saving Conversion**



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# Self-Paced E-Learning Products

**SuperCoder's ICD-10 E-Learning Curriculum** lets non-coders, coders, billers, and physicians take only the lessons they need. In an industry short on staffing and financial resources, you need a training solution that gets every member of your team from CS to data entry to clinicians up to speed without costing too much or taking too long. Our E-Learning curriculum appeal to:

- **ICD-10 Coder Practical Applications** - AAPC or AHIMA certified coder or a noncertified coder, billers, IT, CS, management
- **ICD-10 Supercoder Anatomy & Pathophysiology** - providers, coders, coding and documentation educators
- **ICD-10 Specialty Top Diagnoses** - providers, coders, coding and documentation educators, office managers, noncertified coders
- **ICD-10 Coder's Total Prep Pack** - providers, coders, coding and documentation educators

# ➤ ICD-10 Coder Practical Applications

**SuperCoder's ICD-10 Coder Practical Applications** E-Learning focused on only the elements you need saves you time and money. Get the knowledge from basics to coding guidelines to ensure continued certification and pay using ICD-10-CM.

## Benefits:

- Straightforward guidance on the essential ICD-10 points makes tackling the new system doable
- Tons of examples bring ICD-10 to life
- Concise sections make getting the facts quick and fun
- Plain English explanations help you understand the ICD-10 coding system fundamentals
- Discover the impact ICD-10 will have on your billing and software systems to keep payment streaming in



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# Quick-view dashboard so you see your progress:

Navigation

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Version 5010

Get to Know Version 5010

The start of your transition to ICD-10 begins with a piece of health insurance reform legislation known as Version 5010. 5010 lays out the technical electronic transaction standards mandated for Health Insurance Portability & Accountability Act of 1996 (HIPAA) transactions, and includes, among other things, requirements for transmission of claims and payment data using ICD-10.

**Background:** Congress enacted HIPAA to establish national standards for healthcare transactions, including (but not limited to) patient privacy, simplified insurance administration, and insurance portability. ASC X12 Version 4010 was implemented. Starting on July 1, 2005 healthcare entities that file electronically had to comply with the HIPAA standards on the electronic claims in order to be paid.



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# Details:

- 1-year access for on-going reference and guidance
- Includes immediate class support from ICD-10 trainers via e-mail
- Written by the trusted Coding Institute experts who have been providing education since 1947
- Chapter quizzes test your comprehension
- 6 concise chapters dig into ICD-10 structure, coding guidelines, GEMs and more



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# Basics:

Gain awareness of ICD-10-CM history, applicability, implementation techniques, and learning methodology. Topics covered include:

- Why should I learn ICD-10 now?
- Brief History of ICD
- Who else is using ICD-10?
- Why is ICD-9-CM Changing?
- What's so great about ICD-10-CM?
- What's the difference between ICD-9-CM and ICD-10-CM besides 'more room' and greater specificity?
- What do I not have to re-learn for ICD-10-CM?
- What should I do with these ICD-10 basics?
- Basics CEU Quiz-ICD-10 guide



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# Billing and Technology

This section teaches you about various billing and technology requirements in context to the ICD-10-CM conversion. Topics covered include:

- Version 5010
- Claims Processing
- Dual Claims Processing
- Technology
- Electronic Medical Records (EMR)
- Billing and Technology CEU Quiz-ICD-10 guide



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# Structure and Organization

Start looking up ICD-10 codes with the tools you need included in this section. Come away with understanding the layout of ICD-10-CM, the number of codes the system carries, the structure of these codes, the navigation techniques, and critical code conventions. You'll get the answers to:

- How many codes are in the ICD-10-CM coding manual?
- What will my first character be?
- How many characters can an ICD-10-CM code have?
- Will my ICD-10-CM manual be hard to navigate?
- How does the ICD-10-CM Alphabetic Index differ?
- Will I discover any changes to the Tabular List?
- How do I navigate the code categories in the Tabular List?
- What ICD-10-CM code conventions do I need to know?
- Are the "Notes" different in ICD-10-CM?
- Structure and Organization CEU Quiz-ICD-10 guide



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# GEMs

Explore Medicare's code mapping resource commonly known as the GEMs that providers, health information vendors, and payers can use to derive their ICD-10 codes for some ICD-9 codes. Plus, be able to identify the differences between ICD-9-CM and ICD-10-CM/PCS. Topics covered include:

- What are GEMs?
- Are GEMs a true crosswalk?
- What are the GEMs relationships like?
- What key terms should you know?
- What is an example of a GEM?
- What do the flags mean?
- Approximate Flag
- No Map Flag
- Combination Flag
- Scenario Flag
- Choice Flag
- What should you do with this GEMs knowledge?
- GEMs CEU Quiz-ICD-10 guide



# Coding Guidelines

Go in-depth into ICD-10's coding guidelines. These section-specific rules are essential for correct coding and often hold critical information beyond a code's description. Topics covered include:

- Acquaint Yourself With All ICD-10-CM Codes
- Check Your Code Characters
- Capture Single Condition With Multiple Codes
- Report Multiple Conditions With Single Code
- Delve Into Late Effects (Sequela)
- Don't Let Threatened Conditions Go Unnoticed
- Can You Report Same Diagnosis More Than Once?
- Choose Your Side(s): Laterality in ICD-10-CM
- More Documentation Issues: BMI and Pressure Ulcer Stages
- Coding Guidelines CEU Quiz-ICD-10 guide



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# References

The ICD-10-CM references is a quick list to get you to definitive resources for further ICD-10 exploration.



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## ➤ ICD-10 Anatomy & Pathophysiology

**ICD-10 correct coding requires increased anatomical knowledge.**

You'll need additional anatomic details when you start using ICD-10. For instance, for the same lower back pressure ulcer, choosing the proper ICD-10 code will depend on whether the ulcer is on the left or right. Did your physician probably already document this? Yes. That information didn't matter for ICD-9. But ICD-10 will allow you to be more specific.

**Did you know?**

**There may be an expected 20% increase in the time required for physician documentation to produce the specificity required in ICD-10.**



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# Anatomy Skills Key to ICD-10-CM Success

Orthopedists, obstetricians, cardiology – where cardiologists, for instance need to be specific as they identify each vein – will be particularly impacted, triggering more room for confusion and payment denials!

While everyone related to healthcare must know the new codes, physicians will have to be particularly well-versed with their own specialties and ICD-10 and document with a sharper focus.



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# Reimbursements at stake?

**Drawings, MD Insight Improve Comprehension.**

Teaching your provider to include one detail in his hip fracture documentation now can make the difference between a hard-to-get covered nonspecified ICD-10 code or a direct-pay specified ICD-10 code.

Fortunately, SuperCoder's **ICD-10 Anatomy & Pathophysiology** enhances your ICD-10 coding specificity.



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# Benefits:

- Straightforward anatomy lessons in 8 chapters make correct coding of operative reports and chart notes easier for safer payments
- ICD-10 examples expand medical terminology and anatomy understanding for more accurate coding now and beyond
- Term-to-code connections enhance ICD-10 code comprehension
- Thousands of physician-coder designed illustrations – a Coding Institute exclusive – bring anatomy to life
- Suggests documentation tips you can make now for easier ICD-10 transitioning later.



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## You'll learn tips like:

### ICD 10 Example

Now that you've learned the parts of the bone, let's apply this to your diagnosis coding. Suppose your physician documents that a patient has a **nontraumatic acute slipped upper femoral epiphysis of the hip**. The epiphysis means the articular end of a long bone, which is surrounded by cartilage. For this, you'll report **M93.013** (*Acute slipped upper femoral epiphysis [nontraumatic], unspecified hip*).

**Note:** You'll want to encourage your physician to specify the location of the affected hip to get to a more detailed code.

### Details:

- 1-year access for on-going reference and guidance
- Includes immediate class support from ICD-10 trainers via e-mail
- Designed by a Coding Institute physician-coder to provide in-depth clinical insight to the healthcare community
- System quizzes improve knowledge retention
- 8 chapters dig into the Bony System, Vascular System, Female Reproductive System, and more



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# ICD-10 Anatomy & Pathophysiology covers

- Osteology (The Bony System or Skeleton)
- Syndesmology (The Articulations or Joints)
- Myology (The Muscular System)
- Angiology (The Vascular System)
- Lymphangiology (The Lymphatic System)
- Neurology (The Nervous System)
- The Organs of the Senses and the Common Integument
- Splanchnology (The Viscer System)



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## ➤ ICD-10 Specialty Top Diagnoses

- Gets coders up to speed economically and efficiently.
- Focuses on the changes to the ICD-10-CM codes that most affect a specialty so the coder is up to speed in record time.



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# Benefits:

**Be the First to Know the ICD-10 Code Changes That Impact Your Specialty the Most. Learn How to Condense ICD-10 Specifics into a Reasonable-Page Superbill.**

- No wasted time or money as coder studies only the ICD-10 code changes that impact her work
- Easy-to-understand explanations from The Coding Institute experts – the original specialty-specific educators
- End-of-course quiz helps coder retain top takeaways
- Documentation tips to improve coding documentation now and make transitioning for Oct 2014 easier
- Superbill update advice that keeps your coding entries manageable.

**No need for a 44-page superbill. Coding Institute writers show you how to condense added ICD-10 specifics.**

▼ Cardiology

► ICD-9-CM Codes 272-410

▼ ICD-9-CM Codes 412-425

📄 ICD-9-CM Code 412

📄 ICD-9-CM Code 412.0

will need to format your superbill to capture the difference between “other” and “unspecified” angina pectoris. “Other” means the physician documented the type, but ICD-10 doesn’t offer a code specific to the documented type. “Unspecified” means the physician did not document the type.

**Coder Tips:**

Alert the clinical staff that the superbill will change in response to the separate “other” and “unspecified” codes. Remind them that payers often deny “unspecified” codes, so specific documentation is preferred.

Additionally, as with so many ICD-10 codes, you need to be sure to check for notes that apply not just to the code, but also to the full range it belongs to. For ischemic heart diseases (I20-I25), you should use an additional code to identify presence of hypertension (I10-I15). For I20, watch these “use additional code” and Excludes1 notes:

**Use additional code to identify:**

## Details:

- 1-year access for on-going reference and guidance.
- Includes immediate class support from ICD-10 trainers via e-mail
- 40-50 ICD-9 codes with step-by-step explanations to cross to ICD-10 codes
- Pick as many specialties as you need to know about to prep for the AAPC ICD-10 recertification exam or to meet AHIMA ICD-10 CEU requirements

Check out the coverage on this specialty-specific course:

## Cardiology

Veteran *Cardiology Coding Alert* editor **Deborah Marsh, JD, MA, CPC, CHONC**, gives the skinny on ICD-10 code changes for cardiology including changes for various acute and chronic disorders of the heart. This course helps you to learn and understand multiple cardiology diagnoses and their respective codes with an understanding of the ICD-9 and -10 coding rules and changes including documentation requirements.

- ICD-9-CM Codes 272-410
- ICD-9-CM Codes 412-425
- ICD-9-CM Codes 426-440
- ICD-9-CM Codes 453-V72
- Cardiology CEU Quiz-ICD-10 guide



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# Ear, Nose, and Throat

The Ear, Nose and Throat (ENT) or Otolaryngology course provides a brief description of various ENT diseases, with their respective ICD-9 and 10-CM codes, coding rules and changes, documentation requirements and coding tips. This information will equip you with the tools and techniques needed to gain expertise in ENT ICD-10 diagnosis coding.

- ICD-9-CM Codes 034-351
- ICD-9-CM Codes 380-464
- ICD-9-CM Codes 471-695
- ICD-9-CM Codes 710-959

**ENT CEU Quiz–ICD-10 guide**



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# Family Practice

Learn changes in store for selected ICD-9 and -10 codes used for reporting various disease terms related to family practice. Gain tools and techniques for choosing the replacement family practice ICD-10 codes you'll use in 2014 and beyond.

- ICD-9-CM Codes 034-372
- ICD-9-CM Codes 380-477
- ICD-9-CM Codes 486-715
- ICD-9-CM Codes 719-V70
- Family Practice CEU Quiz–ICD-10 guide



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# General Surgery

The General Surgery course enhances your diagnosis coding skills with ICD-10 changes, documentation requirements, and coder tips on the clinical abnormalities treated by general surgery practices. Get explanations on the top ICD-9 to ICD-10 code changes in store for general surgery ICD-10 coding.

- ICD-9-CM Codes 210-354
- ICD-9-CM Codes 355-474
- ICD-9-CM Codes 486-560
- ICD-9-CM Codes 562-685

**General Surgery CEU Quiz–ICD-10 guide**



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# Obstetrics and Gynecology

AHIMA ICD-10 certified instructor and veteran Ob-Gyn Coding Alert editor Suzanne Leder, CPC, COBGC, gives the skinny on ICD-10 code changes for ob-gyn. This course helps you to learn and understand multiple ob-gyn diagnoses and their respective codes with an understanding of their ICD-9 and -10 coding rules including documentation requirements.

- ICD-9-CM Codes 078-617
- ICD-9-CM Codes 618-626
- ICD-9-CM Codes 626-646
- ICD-9-CM Codes 651-V76.47

**Obstetrics and Gynecology CEU Quiz -- ICD-10 guide**



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# Ophthalmology

Get the inside scoop on top changes coming down the pike for reporting common ophthalmology diseases and conditions. Long time *Ophthalmology Coding Alert* editor Jerry Salley, CPC, gives you the rundown on the ICD-10 codes you'll turn to, how to fit them on your superbill, and the documentation improvements providers should make now.

- ICD-9-CM Codes 077-366
- ICD-9-CM Codes 367-376
- ICD-9-CM Codes 376-379
- ICD-9-CM Codes 379-930

## Ophthalmology CEU Quiz -- ICD-10 guide



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# Orthopedics

ICD-10 impacts orthopedic coding concepts from fracture care to late effects. Be in the know on top changes to commonly used orthopedic ICD-9 codes, their ICD-10 counterparts, and documentation tips that will protect payments now and in the future.

- ICD-9-CM Codes 274-719
- ICD-9-CM Codes 722-728
- ICD-9-CM Codes 733-840
- ICD-9-CM Codes 841-V15

**Orthopedics CEU Quiz--ICD-10 guide**



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# Pediatrics

The Pediatrics course provides you with coding rules, ICD-10 changes, documentation requirements, and coder tips for common pediatric diseases and abnormal conditions.

- ICD-9-CM Codes 008-388
- ICD-9-CM Codes 461-530
- ICD-9-CM Codes 553-783
- ICD-9-CM Codes 784-E812

**Pediatric CEU Quiz-ICD-10 guide**



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Phone: (866)-228-9252 E-Mail: [customerservice@supercoder.com](mailto:customerservice@supercoder.com)

# ICD-10 CODER'S TOTAL PREP PACK

This all-inclusive ICD-10 E-Learning bundle includes:

## 1. ICD-10 Coder Practical Applications

**SuperCoder's ICD-10 Coder Practical Applications** gets you easy how-to basic coding advice from **The Coding Institute team** for successful ICD-10 training. Whether you're an AAPC or AHIMA certified coder or a non-certified coder, this 6-chapter E-learning course will focus on only the elements you need to save time and money and prepare for ICD-10 in quick time.

### Course covers

- Billing and Technology
- Basics
- Structure and Organization
- GEMs
- Coding Guidelines
- References



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## 2. ICD-10 Anatomy & Pathophysiology

This self-paced learning course enhances your ICD-10 coding specificity by providing you the much-needed ICD-10 Anatomy & Pathophysiology skills. These straightforward anatomy lessons in 8 chapters will make correct coding of operative reports and chart notes easier for safer payments.

### Course covers

- Osteology (The Bony System or Skeleton)
- Syndesmology (The Articulations or Joints)
- Myology (The Muscular System)
- Angiology (The Vascular System)
- Lymphangiology (The Lymphatic System)
- Neurology (The Nervous System)
- The Organs of the Senses and the Common Integument
- Splanchnology (The Visceral System)



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### 3. ICD-10 Specialty Top Diagnoses

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- Monthly tips and insight so you understand ICD-10 codeset specifics
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## E-Learning:

- Practical education avoids wasting time on boring generalities
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- The Coding Institute Staff
- Covers each of your specific ICD-10 needs
- Saves time & money by focusing on the elements you need
- Learn at your own pace.



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