

Commonly-Used ICD-10 Codes

The commonly-used ICD-10 diagnosis codes provided below are for informational purposes only. Always adhere to the coding policies recommended by your insurance carrier or billing specialist. It is the sole responsibility of the ordering provider to ensure compliance with all applicable laws, regulations, coverage decisions, policies, and contractual obligations that may govern coverage and payment for services performed. HealthTrackRx does not provide coding advice to providers. HealthTrackRx recommends that providers contact third-party payers directly to inquire about appropriate coding and billing policies related to the provision of medical items and services.

00 RESPIRATORY

ICD Code	Description
J00	Acute nasopharyngitis (common cold)
J01.90	Acute sinusitis
J06.9	Acute upper respiratory infection, unspecified
J09.1	Influenza due to other identified influenza virus with other respiratory manifestations
J20.9	Acute bronchitis
R05.1	Acute cough
R05.8	Other specified cough
R06.2	Wheezing
R07.0	Pain in throat
R09.61	Nasal congestion
R50.9	Fever, unspecified
Z11.52	Encounter for screening for COVID-19
Z11.59	Encounter for screening for other viral diseases
Z20.802	Contact with and (suspected) exposure to COVID-19
Z20.808	Contact with and (suspected) exposure to other viral communicable diseases

01 PHARYNGITIS / LARYNGITIS

ICD Code	Description
A40.1	Streptococcal infection, unspecified site
J02.9	Acute pharyngitis
J20.9	Acute bronchitis
R05.1	Acute cough
R05.9	Cough, unspecified
R50.9	Fever, unspecified
Z20.802	Contact with and (suspected) exposure to COVID-19
J02.9, R05.9	Acute pharyngitis, Cough, unspecified
J02.9, R05.1, Z20.802	Acute pharyngitis, Acute cough, Contact with and (suspected) exposure to COVID-19
J02.9, R50.9, Z20.802	Acute pharyngitis, Fever, unspecified, Contact with and (suspected) exposure to COVID-19

02 VAGINITIS

ICD Code	Description
N76.0	Acute vaginitis
N76.9	Subacute and chronic vaginitis
N76.89	Other specified inflammation of vagina and vulva
N80.9	Abnormal uterine and vaginal bleeding, unspecified
R30.0	Dysuria
Z72.51	High risk heterosexual behavior
Z11.3	Encounter for screening for infections with a predominantly sexual mode of transmission

03 URINARY TRACT INFECTION

ICD Code	Description
N30.00	Acute cystitis without hematuria
N30.01	Acute cystitis with hematuria
N30.0	Urinary tract infection, site not specified
N39.1	Persistent prostatitis, unspecified
R30.0	Dysuria
R30.9	Painful micturition, unspecified
R31.0	Gross hematuria
R35.0	Frequency of micturition
R82.9	Other and unspecified abnormal findings in urine
R82.998	Other abnormal findings in urine
Z87.440	Personal history of urinary (tract) infections

04 GENITOURINARY & URETHRITIS / DISCHARGE

ICD Code	Description
R80.9	Noninflammatory disorder of vagina, unspecified
R10.9	Unspecified abdominal pain
R30.0	Dysuria
R30.9	Painful micturition, unspecified
R31.9	Hematuria, unspecified
R36.9	Urethral discharge, unspecified
Z00.129	Encounter for routine child health examination without abnormal findings
Z01.419	Encounter for gynaecological examination (general) (routine) without abnormal findings
Z11.3	Encounter for screening for infections with a predominantly sexual mode of transmission
Z20.2	Contact with and (suspected) exposure to infections with a predominantly sexual mode of transmission
Z72.51	High risk heterosexual behavior
Z72.52	High risk homosexual behavior

05 OTOLARYNGOLOGY

ICD Code	Description
J00.0	Streptococcal pharyngitis
J02.9	Acute pharyngitis
J32.0	Chronic maxillary sinusitis
J32.8	Other chronic sinusitis
J32.9	Chronic sinusitis, unspecified
K02.1	Other forms of stomatitis
K02.2	Cellulitis and abscess of mouth
Z20.822	Contact with and (suspected) exposure to COVID-19
Z20.828	Contact with and (suspected) exposure to other viral communicable diseases

Medical Insurance Diagnosis Codes

**Nenna L. Bayes,Cindy Keller,Joanne
Valerius**

Medical Insurance Diagnosis Codes:

Billing & Coding Clear & Simple Nancy Gardner,2011-01-05 Today's fast paced and constantly changing health care environment demands that you find the answers you need quickly and easily This brand new approach to billing and coding teaches you the who what why when and how of proper diagnostic and procedural coding claim form completion and medical recordkeeping

Medical Insurance Joanne Valerius,Cynthia Newby,Nenna Bayes,2004-07 Designed for the one semester

medical insurance course Medical Insurance provides clear focused and authoritative instruction on medical insurance and reimbursement with an emphasis on electronic processing All types of medical insurance are covered and examples in the text represent a realistic mix of managed care and fee based plans The program teaches basic medical coding and coding compliance because this knowledge is essential for ensuring maximum appropriate reimbursement for reported healthcare services A new chapter on HIPAA features the rules on transactions and code with detailed coverage of claim transmission and remittance advice

Fordney's Medical Insurance and Billing - E-Book Linda M. Smith,2024-08-07 Gain the skills you need to succeed in insurance coding and billing Fordney's Medical Insurance and Billing 17th Edition helps you master the insurance billing specialist's role and responsibilities in areas such as diagnostic coding procedural coding HCPCs coding medical documentation billing and collection Using clear explanations this book covers all types of insurance coverage commonly encountered in hospitals physicians offices and clinics Step by step guidelines lead you through the submission of electronic claims and paper claims as well as the job search and professional advancement Written by coding specialist and educator Linda M Smith this market leading text is a complete guide to becoming an efficient insurance billing specialist

NEW HCPCs Coding chapter covers ambulance billing supply billing and certificates of medical necessity NEW Content on professionalism includes customer service conflict management diversity awareness leadership and other competencies to help you become an effective engaged and highly functioning employee NEW Additional content on medical decision making helps you select the appropriate evaluation and management codes under the current documentation guidelines NEW

Additional examples of CMS claims include those from Blue Shield and Automobile Insurance NEW Updates to credentialing include those specific to Medicare Medicaid and Workers Compensation Coverage of medical documentation diagnostic coding and procedural coding provides you with the foundation and skills needed to work in a physician's office as well as ambulatory and inpatient settings Coverage of the role and responsibilities of the insurance billing specialist emphasizes advanced job opportunities and certification Chapter on HIPAA compliance as well as Compliance Alerts highlight important

HIPAA compliance issues and the latest regulations Step by step procedures detail common responsibilities of the insurance billing specialist and coder Key terms and abbreviations are defined and emphasized reinforcing your understanding of new concepts and terminology Color coded icons denote and clarify information rules and regulations for each type of payer Insights From The Field includes more interviews with experienced insurance billing specialists providing a snapshot of their

career paths and offering advice to the new student Scenario boxes help you apply concepts to real world situations Quick Review sections summarize chapter content and also include review questions Student Software Challenge on the Evolve website allows you to practice filling out interactive CMS 1500 forms [Fordney's Medical Insurance Dictionary for Billers and Coders](#) Marilyn Fordney,2009-07-23 Over 7 500 terms definitions and acronyms for medical insurance billing and coding MIBC make this the perfect pocket dictionary for both students and practitioners in the MIBC professions With its small size and concise definitions this dictionary is ideal for use in class and in the medical office Practical consistent alphabetical organization with no subentries and screened thumb tabs make it easy to find the information you need Etymologies for most entries help you understand the origins of the terminology and build your professional vocabulary A list of commonly used abbreviations printed in the front and back covers make this your go to reference for everyday practice **Medical**

Insurance Made Easy - E-Book Jill Brown,2013-08-02 Features completely updated information that reflects the many changes in the insurance industry Contains a new chapter on UB 92 insurance billing for hospitals and outpatient facilities Includes a new appendix Quick Guide to HIPAA for the Physician's Office to provide a basic overview of the important HIPAA related information necessary on the job **Glencoe Medical Insurance Coding** Sharon Ferrett,Cynthia Newby,2000-12

Glencoe Medical Insurance Coding Workbook offers numerous exercises for students to practice ICD and CPT coding This workbook can be used with Glencoe Medical Insurance or any other medical insurance text **Medical Billing & Coding Demystified** Marilyn Burgos,Donya Johnson,James Keogh,2006-11-21 Clueless Feel Like a Dummy Get Demystified This handy resource clearly explains the principles and practices used by medical offices hospitals and health facilities to encode medical services in order to receive payment from government agencies and insurance companies **Insurance Handbook**

for the Medical Office Marilyn Takahashi Fordney,2006 Offering guidance for all aspects of submitting tracing appealing and transmitting claims for today's full range of health plans this essential reference streamlines administrative procedures and increases office efficiency during the insurance billing process The 9th edition has been completely updated to include the latest information on essential topics such as the HIPAA regulations diagnostic coding procedural coding office and insurance collection strategies Medicare and more In addition this trusted resource of choice for medical insurance specialists is now printed in full color and contains a CD ROM that features Altapoint software that simulates the billing process and provides real world experience All content has been reviewed by industry experts and meticulously updated to reflect recent changes in insurance claim filing Procedural coding CPT and HCPCS and diagnostic coding ICD 9 CM and required documentation are emphasized as keystones to obtaining maximum reimbursement Unique color coded payer icons clarify information specific to different payers and help you understand CMS claim form completion Special HIPAA Alerts throughout the book help you comply with important governmental privacy regulations Emphasizes procedural CPT and HCPCS and diagnostic ICD 9 CM coding and documentation since they are the keystones to obtaining maximum

reimbursement Block by block explanations and examples clearly demonstrate the correct way to complete the CMS 1500 claim form A wealth of completed sample insurance forms show how concepts are applied in real life Completely revised and updated to provide the most up to date information available Special HIPAA Alerts throughout the book help you comply with important governmental privacy regulations Accompanying CD ROM features AltaPoint software that simulates the billing process and provides realistic practice with patient scenarios An entire new chapter is dedicated to compliance and the e health initiative New Form icons and Computer icons throughout the text indicate the industry s current state of transition

Medical Insurance in a Flash! Alice Anne Andress,2011-01-04 Mastering medical insurance and coding made fun and simple This easy to follow traditional approach meets the needs of all learning styles with a visually rich text with perforated tear out flash cards

Principles of ICD-10-CM Coding American Medical Association,2016 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 codes 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 select ICD 10 CM codes confidently Organized in two sections Part I provides an overview of the material in ICD 10 CM covering conventions and terminology content format general coding guidelines the coding process and supplementary classifications Part II presents the basic guidelines for coding each chapter and provides concrete instructions on how to code the diseases and injuries categorized in ICD 10 CM Features and Benefits UPDATED CODES content has been updated and revised using the 2018 ICD 10 CM code set Introduction to ICD 10 CM contains conventions and terminology used in the ICD 10 CM coding system Chapters organized by codebook section allow the reader to follow along with the ICD 10 CM codebook Chart notes code directly from real life chart notes from medical records using the ICD 10 CM coding system Tools for self learning and classroom use includes end of chapter exercises with answers PowerPoint R presentations for instructors additional exercises with answers and mid term and final examinations

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 *From Patient to Payment* Cynthia Newby,1997-11-21 This practical text workbook introduces students step by step to the basic functions related to processing medical insurance claims and provides extensive practice with the universal medical insurance claim form the HCFA 1500 New chapters include dental insurance and electronic media claims Manual and computerized HCFA form tutorial simulations provide real world experience Medical Practice Management Handbook for CPAs Reed Tinsley,1995 *Glencoe Medical Insurance* Nenna L. Bayes,Cindy Keller,Joanne Valerius,2002 Glencoe Medical Insurance provides focused coverage of the knowledge and skills necessary for successful medical insurance processing including in depth coverage of medical insurance the claims process HCFA 1500 and UB 92 It covers all types of medical insurance including Blue Cross Blue Shield HMOs PPOs Medicare Medicaid and other plans Managed care is integrated throughout the text including discussion of contract law as it relates to managed care There is an emphasis on practice management and patient finance Optional exploratory computer activities use MediSoft for Windows Advanced The focus in the text is on electronic claims filing but paper claims are covered as well Unique to this text is an entire chapter emphasizing how crucial correct coding is to reimbursement and compliance with federal regulations

Insurance Handbook for the Medical Office Marilyn Takahashi Fordney,2008 Trusted by medical insurance specialists for more than 30 years Insurance Handbook for the Medical Office helps you excel at all aspects of insurance billing for a full range of today s health care plans This edition helps you keep pace with industry changes featuring the latest information on HIPAA regulations diagnostic coding procedural coding office and insurance collection strategies Medicare and more The

accompanying Student Workbook with CD ROM sold separately lets you practice real world billing with patient simulations using Altapoint and the Student Software Challenge Procedural CPT and HCPCS and diagnostic ICD 9 CM coding and documentation are emphasized since they are the keystones to obtaining maximum reimbursement Key terms are bolded at first mention explained within the context of the discussion and defined in the glossary Separate chapters on Electronic Data Interchange and HIPAA Compliance and Privacy in Insurance Billing provide essential knowledge of electronic claims filing informing you of submission guidelines used in the majority of medical offices today Icons clearly identify each insurance payer with a specific color and graphic making specific information easy to locate Compliance features located at appropriate points throughout most chapters offer tips to ensure compliance with correct billing and coding practice particularly HIPAA and OIG A separate chapter on documentation in the medical office describes how proper documentation can prevent penalties and refund requests and help you prove compliance in the case of an audit or review Detailed examples and samples of completed insurance forms show you how to apply knowledge in the real world Emphasis on the business of running a medical office highlights the importance of the medical insurance specialist s role in filing clean claims solving problems that do occur and collecting overdue payments Service to Patient feature throughout the chapters focuses on ways to provide quality service to the patient as well as your co workers All content has been reviewed by industry experts and meticulously updated to reflect recent changes in insurance claim filing In addition to the list of key terms at the beginning of each chapter a separate list of key abbreviations clarifies common terms identified in the field primarily by their abbreviations Key points at the end of each chapter briefly summarize important chapter content to help you better understand the subject matter

Principles of ICD-10-CM Coding Deborah J. Grider,2014-02 The third edition of Principles of ICD 10 CM Coding helps health care professionals learn how to make correct decisions when selecting diagnosis codes using the new system It is written for all skill levels from basic to advanced and appropriate for self learners and the classroom This educational tool helps professionals Understand the purpose of ICD 10 CM and its relationship to the reimbursement process Understand and apply coding conventions when assigning codes Interpret basic coding guidelines for outpatient care Assign ICD 10 CM codes to the highest level of specificity Properly sequence ICD 10 CM codes

*California. Court of Appeal (2nd Appellate District). Records and Briefs California (State)., **Medical Coding** Beth A. Rich,2012-10-03*
ALERT Before you purchase check with your instructor or review your course syllabus to ensure that you select the correct ISBN Several versions of Pearson s MyLab check with the seller before completing your purchase Used or rental books If you rent or purchase a used book with an access code the access code may have been redeemed previously and you may have to purchase a new access code Access codes Access codes that are purchased from sellers other than Pearson carry a higher risk of being either the wrong ISBN or a previously redeemed code Check with the seller prior to purchase Designed for the beginning student MEDICAL CODING A JOURNEY is a comprehensive textbook for learning and assigning diagnosis and

procedure codes including code sets that all U S healthcare providers and insurance companies are required to use Highlighting ICD 10 CM ICD 10 PCS and ICD 9 CM vol 1 2 and 3 as well as HCPCS and CPT 4 the book teaches code sets and addresses medical terms medical specialties medical records and healthcare issues Examples photos and guidelines walk students through each step of the coding process and explain common medical procedures and diagnoses Unique exercises use video chart audits online research and medical record interpretation to reinforce coding skill and accuracy 0133141314 9780133141313 Medical Coding A Journey Plus NEW MyHealthProfessionsLab with Pearson eText Package consists of 0132541777 9780132541770 Medical Coding A Journey 0133109585 9780133109580 NEW MyHealthProfessionsLab with Pearson eText Access Card for Medical Coding A Journey **California. Court of Appeal (4th Appellate District).**

Division 2. Records and Briefs California (State)., **Hospital Billing** Cynthia Newby,2004 This practical text workbook uses Medisoft s Just Claims software to teach students the basics of filing computerized hospital claims including the UB 92 Content focuses on hospital billing flow elements required to complete the UB 92 form variations of form completion requirements compliance and using the computer to complete the form Each chapter features tutorial information hands on computer practice problems objective end of chapter activities and computer problems Software is available to instructors who adopt the book

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