

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
R05.9	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
Z20.809	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
R30.00	Acute cystitis without hematuria
R30.01	Acute cystitis with hematuria
R30.0	Urinary tract infection, site not specified
R30.1	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 Coding Icd 9 Icd 10 Cm Quick Study Guide

Marilyn Takahashi Fordney

Medical Coding Icd 9 Icd 10 Cm Quick Study Guide:

Medical Coding: Icd-10-Cm Speedy Study Guides Speedy Publishing, 2014-07-16 Every known illness disease and condition has a specific number that goes along with the word describing the person's medical problem Every physician and their office staff must know medical codes for the sake of billing purposes If the doctor and office staff does not code a specific illness condition or disease correctly the insurance company may not pay for treatment medication in hospital stays outpatient treatment and a number of surgical and other procedures performed for the patient making it impossible for the patient to receive the proper treatment Common illnesses diseases and conditions listed in a pamphlet would enable the medical student to become familiar and able to memorize with the more common medical codes The bottom line for using proper ICD codes is money reimbursement for the medical community and patient

Medical Coding: Icd-10-Pcs

BarCharts, Inc, Shelley C. Safian, 2012-05-31 The health care industry is moving toward a major change in the code set or language used to report the reasons why a physician or health care professional provided care to a patient Since 1978 the industry has used codes from ICD 9 CM volume 3 to report the procedures services and treatments provided to inpatients in acute care facilities Within the next few years the transition will be made to ICD 10 PCS The transition from ICD 9 CM volume 3 to ICD 10 PCS will only affect those health information management professionals and those getting ready to enter this profession working on hospital inpatient procedure coding but it will require even the most seasoned professionals to learn how to accurately report what has been provided to patients With the use of tabular examples and color coded text this QuickStudy guide helps make the transition smoother and promote better understanding and greater comfort with the new code set

[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.

2001 Physician ICD-9-CM, 2000 AMA Physician ICD-9-CM

2004 American Medical Association, 2005-12-03 New AHA's Coding Clinic for ICD 9 CM references. Identifies the exact issue of Coding Clinic the official coding advice which contains further information on that code. Revised Official Coding Guidelines Stay coding compliant as required by HIPAA. Color Coded Tabular Symbols just like the ones found in CPT identify new revised and deleted codes and text and color coded bars highlight unspecified nonspecific and manifestation coding situations. Email Delivered Special Reports Stay current on important developments and code changes. Customers who provide an e-mail address will receive Special Reports via e-mail. Color Fourth and Fifth Digit Symbols in Index and Tabular Color coded intuitive symbol identifies codes that require an additional fourth and or fifth digit. Hundreds of Clinically Oriented Diagnosis Definitions and Illustrations. Ensure quick and correct code selection. Age and Sex Edits. Identifies codes that are restricted dependent upon age or sex of patient. Valid Three Digit Category Appendix. Know at a glance whether a three digit code is valid for submitting on claim. New and Revised Code Symbols and Dated Pages. Quickly identify new and revised codes and the date the codes were most recently changed. V Code Symbols. Quickly identify V codes that can be used only as a primary or secondary diagnosis.

Kinn's The Administrative Medical Assistant E-Book Brigitte

Niedzwiecki, Julie Pepper, P. Ann Weaver, 2019-10-08 More than any other product on the market the most successful Medical Assistants begin their careers with Kinn. Trusted for more than 60 years Kinn's The Administrative Medical Assistant An Applied Learning Approach 14th Edition teaches you real world administrative skills essential for a career in the modern medical office always with a focus on application through unfolding case scenarios critical thinking questions procedure videos and interactive exercises. The reorganized 14th edition includes expanded content on topics from professionalism and interpersonal skills to billing and coding electronic health records and practice management as well as a new chapter reviewing medical terminology anatomy and physiology and pathology. With an easy to read style and practical focus paired with a full complement of separately sold adaptive solutions real world simulations EHR documentation experience and HESI

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More than any other product on the market the most successful Medical Assistants begin their careers with Kinn. Trusted for more than 60 years, Kinn's The Medical Assistant: An Applied Learning Approach, 14th Edition teaches you real world administrative and clinical skills essential for a career in the modern medical office, always with a focus on application through unfolding case scenarios, critical thinking questions and interactive exercises. The reorganized 14th edition includes expanded content on medical office accounts, collections, banking and practice management, as well as a new chapter reviewing medical terminology, anatomy and physiology and pathology. With an easy to read format and a full continuum of separately sold adaptive learning solutions, real world simulations, EHR documentation experience and HESI remediation and assessment, you'll learn the leading skills to prepare for certification and a successful career in the dynamic and growing Medical Assisting profession. Comprehensive coverage of all administrative and clinical procedures prepares you for a wide array of Medical Assisting jobs. Nearly 185 step by step illustrated procedures with rationales break down how to perform critical skills for practice. Applied approach to learning helps you use what you've learned in a real world setting including case scenarios and critical thinking exercises. Thorough EHR coverage with access to hands on activities incorporates use of SimChart for the Medical Office software designed to ensure that you are practice ready, sold separately. Key vocabulary terms and definitions are presented at the beginning of each chapter and highlighted in text discussions.

Summary of Learning Objectives serves as a checkpoint and study tool Patient education and legal and ethical features help relate content to practical use NEW Chapter reviews medical terminology anatomy and physiology and pathology to help you build a solid foundation NEW Reorganized and expanded content on medical office accounts includes collections banking and practice management NEW Artwork focused on the workings of a modern medical office includes updated illustrations and photographs of procedures and medical records NEW Expanded and updated sample certification exams help you practice and prepare for certification NEW Streamlined presentation refines organization and writing for easy comprehension NEW Coverage of patient centered care featured throughout textbook **Medical Coding ICD-10-CM** Shelley C. Safian,2017-11

Updated for 2018 ICD 10 CM International Classification of Diseases Clinical Modification guidelines this 6 page laminated guide covers core essentials of coding clearly and succinctly Author Shelley C Safian PhD RHIA CCS P COC CPC I AHIMA approved ICD 10 CM PCS trainer used her knowledge and experience to provide the largest number of valuable facts you can find in 6 pages designed for you to find answers fast with color coded sections and bulleted lists A must for students seeking coding certification and a great desktop refresher for professionals for classifying and coding diagnoses symptoms and procedures recorded in conjunction with hospital care 6 page laminated guide includes General Coding Conventions Official Guidelines Instructional Notations Chapter Specific Official Guidelines Selection of Principal Diagnosis Reporting Additional Diagnoses Diagnostic Coding Reporting Guidelines for Outpatient Services Steps to Coding Diagnoses Using the ICD 10 CM Manual Documentation of Complications of Care Rules of Compliance External Cause Codes Sequencing Multiple Codes Correctly What to Code What Not to Code The Process of Abstracting Medical Coding ICD 10 PCS Selection of Principal Procedure ICD 10 PCS Coding Conventions ICD 10 PCS Sections Subsections Medical Surgical Section Guidelines Obstetrics Section Guidelines New Technology Section Guidelines ICD 10 PCS Terms **Medical Coding ICD-9 (Speedy Study Guides)** Speedy Publishing,2014-07-03 A medical coding ICD 9 book or software program contains detailed information concerning a variety of health conditions along with a numerical set of numbers Each disease or health condition is assigned a specialized code that is used for identification purposes when submitting documents to insurance carriers for reimbursement Health care employees such as medical coders and secretaries require a medical coding ICD 9 as part of their job while working in medical facilities including physician s offices hospitals and nursing homes **2004 Coding Workbook for the Physician's Office** Alice Covell,2004 This workbook contains coding exercises referencing each section of the CPT 4 and ICD 9 CM coding manuals Exercises requiring HCPCS Level II codes are also provided Condition and procedure statements in the exercises reflect the current annual editions of the coding manuals by completing the exercises learners will expand their medical vocabulary and increase their coding skills for the physician s office Also included are the Centers for Medicare and Medicaid Services CMS guidelines for diagnosis coding and reporting by physicians Learners need current CPT 4 ICD 9 CM and HCPCS codin **Principles of ICD-9-CM Coding** Deborah J. Grider,Debra E. Hampton,2001 To help simplify and

streamline learning the ICD 9 CM coding process the American Medical Association introduces Principles of ICD 9 CM Coding Principles is a textbook learning tool filled with explanations history practical tips examples exercises and self tests Written in an easy to understand format Principles is designed to guide new and veteran coders through all phases of ICD 9 CM from basic concepts to more detailed issues Principles of ICD 9 CM Coding is designed to help accomplish the following objectives Understand the purpose of ICD 9 CM and its relationship to the reimbursement process Understand and apply coding conventions Interpret basic coding guidelines for outpatient care Assign ICD 9 CM codes to the highest level of specificity Understand basic medical terminology to correctly assign ICD 9 CM codes

ICD-9-CM Professional for Physicians, Volumes 1 & 2, 2006 (in One Unit) Anita C. Hart,Catherine A. Hopkins,2004 ICD-10 Made Easy ,1998

ICD-9-CM Expert for Physicians, Volumes 1 and 2 Anita C. Hart,Catherine A. Hopkins,2003 AHA Coding Clinic for ICD 9 CM references Definitions and illustrations New and revised code symbols and dated pages Check 4th and 5th digit alerts Color coded tabular alert coders to crucial coding and reimbursement issues Complete official coding guidelines Age and sex edits V code symbols 2004 ICD-9-CM Professional for Physicians, Volumes 1 and 2 Ingenix,2003 These practical two volume ICD 9 CM Professional codebooks were designed with the coder in mind Enhanced with crucial reimbursement indicators these codebooks are your guides to coding accurately The clinically oriented definitions and illustrations exclusive color coded tabular check fourth and fifth digit symbols and official coding guidelines are some of the hallmarks of these Professional editions of the ICD 9 CM code book Plus the latest revisions to the complete official coding guidelines are included

Coders' Desk Reference Med-Index Division Staff Medicode,Medicode,1999-11 **Diagnostic Coding Essentials** ,2001 Medical Coding: Icd-10-Cm BarCharts, Inc,Shelley C. Safian,2012-05-31 The health care industry is moving toward a major change in the code set or language used to report the reasons why a physician or health care professional provided care to a patient Since 1978 the ICD 9 CM code set has been used to report these diagnoses Within the next few years the code set will be changing to ICD 10 CM While there are many similarities there are changes that those in the health information management profession and those getting ready to enter this profession must know and understand With the use of color coded text this QuickStudy guide helps make the transition easier to understand and simpler to incorporate into work behaviors

Insurance Handbook for the Medical Office Marilyn Takahashi Fordney,2002 INSURANCE HANDBOOK FOR THE MEDICAL OFFICE is a key text for medical administrative assisting medical front office programs or those who wish to become insurance billing specialists claims assistance professionals or electronic claims processors for physicians practices and hospital outpatient clinics Those already practicing in this area will also find this text beneficial as will health claims examiner programs The goal of this extremely up to date text is to increase efficiency and streamline administrative procedures for the most exasperating aspect of the doctor s office routine insurance billing This text offers guidance for all aspects of submitting tracing appealing and transmitting claims for today s full range of health

plans Important coverage of diagnostic coding procedural coding office and insurance collection strategies Medicare Managed Care and more is presented Additionally a free CD ROM featuring the HCFA 1500 claim form is included with the book The CD ROM contains 10 scored patient case studies with related insurance information so that the student can practice completing the HCFA 1500 claim form in a fun interactive format Physician ICD-9-CM American Medical Association,2006 Stay up to date with the most recent ICD 9 CM code changes This comprehensive resource is organized to help improve coding accuracy and efficiency Includes dictionary style headings color tabs and legends on each page Complete features include Current official code set with complete summary of code changes Provides a quick reference to all relevant 2007 changes includes instructional notes additional conventions and complete coding guidelines Color fourth and fifth digit alert symbols in index and tabular Valid three digit list Identifies when an additional digit is not available for a condition or disease Age and sex edits Correctly identify codes that are restricted dependant upon age or sex of patient V code designation symbol alerts Quickly recognize when V codes can be used only as primary or only as an additional diagnosis Unspecified and Other Specified code alerts

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