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## *E/M*

*The facility-specific  
coding guidelines  
should not duplicate  
information found in  
the ICD-10-CM/PCS  
Official Guidelines for*

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*Coding and Reporting, Coding Clinic, or CPT Assistant. The facility guidelines should document the maximum number of diagnoses/procedures to be reported; this number could change as billing and abstracting systems are changed and regulations are*

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Coding Guidelines  
*updated.*

*Determine the  
Principal Diagnosis  
Code in the Inpatient*

...

*Billing and Coding  
Guidelines . Inpatient  
. Acute, inpatient care  
is reimbursed under a  
diagnosis-related  
groups (DRGs)  
system. DRGs are  
classifications of*

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*diagnoses and procedures in which patients demonstrate similar resource consumption and length-of-stay patterns. A payment rate is set for each DRG and the hospital's Medicare*

*Billing and Coding  
Guidelines - CMS  
Outpatient + Inpatient  
Page 8/34*

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*E/M Coding*

*Curriculum. ... E/M  
coding courses built  
for emergency  
medicine physicians.*

*The Basic E/M  
Coding Course. Learn  
about the key  
components of  
history, ... This course  
teaches you  
everything you need  
to know about the  
1995 and 1997 E/M*

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*guidelines.*

*Principles for  
Emergency  
Department Coding  
Guidelines  
When transitioning  
from outpatient to  
inpatient coding, be  
sure you know the  
differences between  
the outpatient and  
inpatient guidelines  
when selecting*

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*principal and  
secondary diagnoses.  
Facility coders should  
be well versed in all  
four sections of the  
ICD-10-CM Official  
Guidelines for Coding  
and Reporting:*

*Prepare For Massive  
Medicare 2021 EM  
Coding Changes  
1997 CMS  
Documentation*

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*Guidelines for E/M Services 117 vices, consultations, emergency department services, nursing facility services, domiciliary care services, and home services. While some of the text of CPT has been repeated in this publication, the reader should refer to CPT*

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*for the complete  
descriptors for E/M  
services and  
instructions for  
selecting a level of  
service.*

*Time-Based  
Physician Services  
Require Proper  
Documentation ...*

**THE “EMERGENCY  
MEDICINE” CAVEAT**

*“If the physician is*

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*unable to obtain a history from the patient or other source history from the patient or other source, the record should describe the patient's condition or other circumstances which precludes obtaining a history."*

*36 CMS 1995*

*Documentation*

*Guidelines*

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*Inpatient Em Coding  
Guidelines  
Evaluation and  
management (E/M)  
coding is the use of  
CPT ® codes from the  
range 99201-99499 to  
represent services  
provided by a  
physician or other  
qualified healthcare  
professional. As the*

# Read Book Inpatient Em Coding Guidelines

*name E/M indicates,  
these medical codes  
apply to visits and  
services that involve  
evaluating and  
managing patient  
health.*

*Initial hospital care &  
services E/M coding,  
EM evaluation ...  
Inpatient Coding  
Guidelines. Flashcard  
maker : Sonia Kelly.*

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Coding Guidelines

**SELECTION OF PRINCIPAL DIAGNOSIS.** *The principal diagnosis is defined in the Uniform Hospital Discharge Data Set (UHDDS) as "that condition established after study to be chiefly responsible for occasioning the admission of the patient to the hospital*

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Coding Guidelines  
for care.\ ...

*E+M Coding  
Guidelines -  
slideshare.net  
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preferred authors.*

*Initial Inpatient Coding  
Guidelines  
Principles for  
Emergency  
Department Coding  
Guidelines. by Tedi  
Lojewski, RHIA, CCS.*

# Read Book Inpatient Em Coding Guidelines

*Since the implementation of the Outpatient Prospective Payment System (OPPS), the Centers for Medicare and Medicaid Services (CMS) has required hospitals to report facility resources for emergency department (ED) visits using CPT evaluation*

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*and management  
(E/M) codes.*

*Evaluation and  
Management Coding,  
E/M Codes - AAPC  
Initial Hospital Care  
(99221-99223) These  
codes are used to bill  
for initial hospital  
services otherwise  
known to physicians  
as H&Ps. When you  
admit a patient to the*

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*hospital as in  
inpatient, these are  
the codes you will  
use.*

*Developing Facility-  
Specific Coding  
Guidelines | Journal*

...

*ICD-10-CM Official  
Guidelines for Coding  
and Reporting FY  
2019 (October 1,  
2018 - September 30,*

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*2019) Narrative changes appear in bold text . Items underlined have been moved within the guidelines since the FY 2018 version Italics are used to indicate revisions to heading changes .*

*Evaluation and  
Management Coding  
Advisor*

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*Guidelines for  
Evaluation and  
Management  
Services and the  
1997 Documentation  
Guidelines for  
Evaluation ... •  
Retains 5 levels of  
coding for established  
patients, reduces the  
number of levels to ...  
Hospital inpatient  
Emergency  
department (ED)*

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*Nursing facility (NF)*

*Page 7 of 23.*

*Coding During the  
Public Health  
Emergency | Expertise  
Issues Addressed.  
When counseling  
and/or coordination of  
care dominate more  
than 50% of the time  
a physician spends  
with a patient during  
an evaluation and*

*Page 25/34*

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*management (E/M) service, then time may be considered as the controlling factor to qualify the E/M service for a particular level of care. 2 The following must be documented in the patient's medical record in order to report an E/M ...*

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*Management Services Guide  
Diagnosis Coding. In the 2021 release of the Official ICD-10 Guidelines, the National Center for Health Statistics (NCHS) has added instructions for coding the diagnoses for COVID-19 related services. The updated guidelines differ*

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*slightly from the previous interim guidance. The official guidelines are updated annually on October 1st.*

*E/M Coding  
Education, EM  
evaluation and  
management coding*

*...*

*Review AMA changes  
to E/M Documentation*

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*Guidelines. (effective 2021) Review AMA changes to Medical Decision Making (MDM) Table. (effective 2021) Documentation Guidelines for E/M Services. Access the Medicare documentation guidelines for E/M services to ensure you are meeting all of*

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*the necessary  
requirements and  
achieving maximum  
reimbursement.*

*ICD-10-CM Official  
Guidelines for Coding  
and Reporting  
IDSA partnered with  
Hart Health  
Strategies, Inc. to  
present a webinar on  
the documentation  
and coding changes*

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*which were finalized in the 2019 Medicare Physician Fee Schedule. The webinar included information on the current documentation guidelines for office/outpatient evaluation and management (E/M) services.*

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*Billing and Coding -  
IDSA*

*2019 Evaluation and  
Management Coding  
Advisor Advanced  
guidance on E/M  
code selection for  
traditional  
documentation  
systems POWER UP  
YOUR CODING with  
Optum360, your  
trusted coding partner  
for 32 years.*

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*Inpatient Coding  
Guidelines |  
StudyHippo.com  
The E/M fee schedule  
updates for 2021  
apply only to  
Medicare patients.  
2021 EM Coding  
Changes. Private  
insurers often take  
Medicare's lead, but  
they aren't required  
to. This means you'll*

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*need to switch  
between guidelines  
based on payer.  
Grasp 5 Key Points of  
New Office Visit  
Coding*

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