



## ICD-9-CM Expert for Physicians - 2015 (Spiral)

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2015 ICD-9-CM Expert for Physicians, Volumes 1 & 2 ICD-10-CM/PCS has been delayed, so let this final edition of the *ICD-9-CM Expert for Physicians, Volumes 1 & 2* with the hallmark features and content that have provided accurate and reliable information for over 25 years serve to meet current coding challenges under HIPAA and to function as a solid reference for utilizing valuable legacy ICD-9-CM coded data. In addition, new ICD-10-CM features help you prepare for the code set transition.

### Key Features and Benefits

Exclusive to the Expert edition:

***Optum Edge ICD-10-CM Coding Proficiency and Documentation Self-Assessment Test*** your ICD-10-CM readiness and skills with this 50 question quiz.

***Optum Edge ICD-10 Spotlight.*** Preview ICD-10 codes with the most frequently reported ICD-9-CM codes to learn as you work.

***Optum Edge Coding Tables.*** Reduce time spent on code selection for complex diagnoses that typically require additional research and steps.

***Optum Edge 10 Steps to Correct Coding.*** Receive step-by-step instructions to improve coding accuracy and more effectively use ICD-9-CM conventions.

Includes these traditional hallmark features plus many more:

***Optum Edge Highlighted coding instructional and informational notes.*** Recognize important code usage guidance for specific sections more easily with highlighted notes.

***Optum Edge Intuitive color-coded symbols and alerts.*** Identify critical coding and reimbursement issues quickly with alerts, such as Other Specified and Unspecified diagnosis alerts, on the same page as the code you need.

***Optum Edge AHA's Coding Clinic and official coding guideline tips.*** Use citations to link to the official coding advice every coder in every health care setting must follow.

***Optum Edge Additional digit required symbols.*** Know when an additional fourth or fifth digit is required for code specificity and validity to avoid invalid code submissions (provided in Index and Tabular Section).

***Valid three-digit code list.*** See at a glance whether a code is valid for claim submission to prevent denied claims due to invalid code usage.

***V-code symbols.*** Understand the appropriate use of V-codes that may only be sequenced as first-listed diagnosis for cleaner claim submissions.

***Manifestation code alert.*** Properly use codes that represent manifestations of underlying disease by

knowing when two codes are required and by knowing alerts to sequencing rules.

*Illustrations and definitions.* Gain in-depth understanding of anatomy and disease processes in relation to coding with clinically-oriented definitions and illustrations.

*Age and sex edits.* Be aware of which codes have restrictions on use based on age or sex of the patient to prevent claim delays and denials.

*Hallmark page design and features.* Locate information quickly with a user-friendly page design, including dictionary-style headers, Quickflip™ color bleed tabs, and legend keys.

*HIPAA compliance.* Comply with HIPAA code set requirements to avoid delayed or denied claims and costly fines for violations.

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