



2015 ICD-10-PCS Draft Edition

Carol J. Buck

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Code more efficiently and effectively with Carol J. Buck's **2015 ICD-10-PCS Draft Edition**. Designed by coders for coders, this reference combines *Netter's Anatomy* illustrations and the *Official Guidelines for Coding and Reporting*. It simplifies procedure coding to ensure the most accurate billing and optimal reimbursement, providing 16 sections filled with tables to help you determine code selection. Clear explanations of A&P, pathology, and medical terminology make it easy to develop the knowledge needed to assign the appropriate ICD-10-PCS codes.

- **UNIQUE! Full-color Netter's anatomy art** helps you understand complex anatomic information and how it may affect coding.
- **Complete coverage of ICD-10-PCS codes** prepares you for the new code set replacing ICD-9-CM Volume 3.
- **At-a-glance Guide to the Updates** lists all new, revised, and deleted codes, providing quick access to the annual changes.
- **ICD-10-PCS Official Guidelines for Coding and Reporting** (OGCRs) are included for fast, easy access to the official coding rules.
- **American Hospital Association's Coding Clinic® citations** provide reference information regarding official ICD-10-PCS coding advice that will enhance your understanding of specific codes.
- **Sex edits** from the *Definitions of Medicare Code Edits* denote codes that are used only with patients of a specific sex.
- **Codingupdates.com companion website** includes updates to the ICD-10 codes needed for procedure coding.
- **NEW! Updated 2015 Draft Code set** includes the ICD-10 codes needed for procedure coding and reflects the June 2014 code updates.
- **NEW format** is specifically designed to meet the needs of professional procedure coding.
- **NEW! Hospital Acquired Condition (HAC) symbol** alerts you to procedures related to HACs as outlined in the *MS-DRG v31*.
- **NEW! Symbols for female- and male-only related procedures** are included.
- **NEW! Symbols for Noncovered and Limited Coverage procedures** are included, as outlined in the *Definitions of Medicare Code Edits, v31*.

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