

# ARE YOU TAKING FULL ADVANTAGE OF THE CMS WEBSITE CODING RESOURCES?

The Centers for Medicare & Medicaid Services (CMS) website provides a wealth of information – some of which can be extremely helpful for coding. But without a clear-cut path to follow, finding this information can be tricky. To help you quickly arrive at the resources you need, Megan DeVoe, CCS, a 25-year coding professional, provides guidance.



## ICD-10 CLASSIFICATION SYSTEMS INFORMATION

The Centers for Medicare & Medicaid Services (CMS) website provides useful information regarding the ICD-10-CM and ICD-10-PCS classification systems. It includes:

**[The most recent meeting materials for the ICD Coordination and Maintenance \(C&M\) Committee](#)** pertaining to ICD-10-PCS. These materials include:

- The meeting agenda with detailed information on proposed codes
- Important dates relating to the C&M and ICD-10-PCS codes
- Upcoming ICD-10-PCS addenda and key updates



## CPT® / HCPCS CODING MATERIALS

For reporting outpatient and professional services, you will find helpful information through:

**[A Medicare Physician Fee lookup tool](#)** that allows you to search using any combination of the following criteria:

- Pricing amounts, payment policy indicators, relative value units (RVUs) and geographic practice cost index (GPCI)
- CPT/HCPCS procedure codes
- National payment amount, Medicare Administrative Contractor (MAC) or MAC locality

**[The Medicare Claims Processing Manual](#)**, which provides 38 chapters covering the claims processing instructions for Medicare services. Many chapters provide useful coding information as well.

**TIP:** Bookmark the manual rather than downloading to ensure you have the most recent version.

**[Access to the entire Medicare Coverage Database](#)**, which can be searched by document ID or type, keyword or CPT/HCPCS code, and includes:

- Local Coverage Determinations (LCDs)
- National Coverage Determinations (NCDs)
- Local coverage articles

## LOOKING FOR HELP WITH THE ICD-10-CM CODE PROCESS?

Head to the Centers for Disease Control (CDC) website and find the ICD-10-CM code meeting materials [here](#).



## INPATIENT PROSPECTIVE PAYMENT SYSTEM CODING GUIDANCE

Inpatient prospective payment system (IPPS) coding can be challenging, especially when coding guidance for the ICD-10-CM/PCS classification is scarce or conflicting. The CMS website can help provide clarification through:

### MS-DRG Guidance

To verify a MS-DRG result that seems incorrect, it can be useful to refer to the [Medicare Severity Diagnosis Related Groups \(MS-DRGs\) Definitions Manual](#), which:

- Can be shown in MS-DRG order or Major Diagnostic Category (MDC) order
- Lists ICD-10-CM and ICD-10-PCS codes included in the MS-DRG
- May also include guidance on sequencing and discharge disposition assignment

Appendices listed at the bottom of the definitions manual provide complete listings of codes identified as:

- Complications or Comorbidities (CCs)
- Major Complications or Comorbidities (MCCs)
- Operating Room Procedures
- Hospital-Acquired Conditions (HACs)

### IPPS Guidance

The Definition of Medicare Code Edits (MCE) file is located on the FY 2019 Final Rule and Correction Notice Data Files page and can also be downloaded [here](#) from the Acute Inpatient PPS, MS-DRG Classifications and Software page.

Refer to this file if you need help with questions on an MCE edit. It includes:

- Information on codes included in an edit and an explanation of criteria that triggered an edit such as:
  - Gender- and age-specific ICD-10-CM codes
  - Non-covered ICD-10-PCS procedure codes

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