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Continue to code quickly, accurately, and efficiently with 2018 HCPCS Level II, Professional Edition. From coding expert Carol J. Buck, this easy-to-use reference presents the latest HCPCS codes to help you comply with coding regulations, confidently locate specific codes, manage reimbursement for supplies, report patient data, code Medicare cases, and more. This professional edition includes all of the content found in the standard edition along with features such as Netters Anatomy illustrations, dental codes, and ASC (Ambulatory Surgical Center) payment and status indicators. At-a-glance code listings and distinctive symbols make it easy to quickly identify new, revised, reinstated, and deleted codes. Easy-to-use format optimizes reimbursement and assists with quick, accurate, and efficient coding. Full-color design with color tables helps you locate and identify codes with speed and accuracy. UNIQUE! Full-color Netters Anatomy illustrations clarify complex anatomic information. Current Dental Terminology (CDT) codes from the American Dental Association (ADA) offer access to all dental codes in one place. Jurisdiction symbols show the appropriate contractor to be billed for suppliers submitting claims to Medicare contractors, Part B carriers, Medicare Administrative Contractors submitting for DMEPOS services provided, and more. Special coverage alerts help you identify when codes have special coverage instructions, are not covered or valid by Medicare, or may be paid at the carriers discretion. Drug code annotations identify brand name drugs as well as drugs that appear on the National Drug Class (NDC) directory and other Food and Drug Administration (FDA) approved drugs. Ambulatory Surgery Center (ASC) payment and status indicators show which codes are payable in the Hospital Outpatient Prospective Payment System to ensure accurate reporting and appropriate reimbursement. Durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) indicators address reimbursement for durable medical equipment, prosthetics, orthotics, and supplies. Age/sex edits identify codes for use only with patients of a specific age or sex. Quantity symbol indicates the maximum allowable units per day per patient in physician and outpatient hospital settings, as listed in the Medically Unlikely Edits (MUEs) for enhanced accuracy on claims. The American Hospital Association Coding Clinic for HCPCS citations provide a reference point for information about specific codes and their usage. Physician Quality Reporting System icon identifies codes that are specific to PQRS measures. Codingupdates.com website includes quarterly updates to HCPCS codes, content updates, and the opportunity to sign up for e-mail notifications of the newest updates. NEW! Updated 2018 code set features the latest Healthcare Common Procedure Coding System codes to comply with current HCPCS standards for fast and accurate coding. NEW! More full-color illustrations enhance understanding of specific coding situations.

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