



2010 Home Health ICD-9 Basics Competencies Examination Outline
This exam is gauged for beginning coders or for those who must understand the competencies behind coding, but do not do active, complex coding.

The exam follows Official Coding Guidelines.

Core competencies of ICD-9-CM coding to understand:

Official Guidelines and Conventions

- Application of guidelines and conventions
- HIPAA involvement
- Proper use, and sequence of use of the Alphabetic Index and Tabular List
- Locating terms within the Alphabetic Index
- Specificity in coding: coding to 3, 4 or 5 digits
- Formatting
- Abbreviations such as NEC and NOS
- Punctuation such as [], [], (), :
- Includes and Excludes Notes and Inclusion Terms
- Other and Unspecified Codes
- The meaning of “and,” “with,” “see,” “see also”
- Phrases such as Use Additional Code, and Code First

ICD-9-CM Code set

- Volume 1: Tabular List and its organization
- Volume 2: Alphabetical Index to Diseases and its organization
- Volume 3: Procedures Index and Tabular List: a general knowledge

OASIS Items

Know the basic application and rules of:

- M1010
- M1016
- M1020
- M1022
- M1024

V codes

- Proper use
- V codes and acute conditions
- V codes and M1024
- V codes primary and secondary
- Major categories of V codes

Sequencing

- Determining the focus of care
- Prioritizing care

Manifestation coding

- Understanding of etiology/manifestation
- Proper sequencing of etiology/manifestation

Complications and late effects

- Differences between complications and late effects
- Time limits
- Proper sequencing

Symptom coding

- Definitive diagnoses vs. symptom coding
- Coding suspected diagnoses

E codes

- Adverse reactions vs. poisoning and the coding complexities involved
- Initial encounter rules