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Question: 1

In the CPT manual, Appendix C lists clinical examples of:

A. Surgical procedures
B. Radiological procedures
C. Dermatology procedures
D. Evaluation and management procedures

Answer: D

In the CPT manual, Appendix C lists clinical examples of evaluation and management procedures. In Appendix C, you will find multiple examples of each level of evaluation and management procedures. Reviewing these examples will not only help you determine which specific levels of codes should be used in each coding situation, it will also help you make sure the right code is assigned.

Question: 2

Sylvia was seen in the office and was diagnosed with acute bronchitis with Chronic Obstructive Pulmonary Disease. What is the correct ICD-9 diagnosis code for her condition?

A. 466.0
B. 491.22
C. 466.0, 491.22
D. 491.21

Answer: B

The correct ICD-9 diagnosis code for Sylvia's condition is 491.22. According to ICD-9 coding guidelines, only code 491.22 (Obstructive Chronic Bronchitis with Acute Bronchitis) should be assigned. It is not necessary to also assign code 466.0 (Acute Bronchitis). In addition, code 491.21 (Obstructive Chronic Bronchitis with Acute Exacerbation) is inappropriate because it only indicates an exacerbation of the chronic bronchitis, not acute bronchitis.

Question: 3

The external ear contains the:

A. Auricle and Auditory Canal, leading up to the Tympanic Membrane
B. Incus, Stapes, and Malleus
C. Cochlea, Semicircular Canals, and Eustachian Tube
D. Branches of the Vestibulocochlear Nerve and Tympanic Membrane

Answer: A

The external ear contains the auricle and external auditory canal, which leads up to the tympanic membrane. The tympanic membrane separates the outer ear canal from the middle and inner ear. The middle ear includes the incus, stapes, and malleus. The inner ear contains the cochlea, semicircular canals and Eustachian tube. This is where sounds waves are converted into nerve impulses, which are read by the brain.

Question: 4

The HCPCS manual includes codes for:

A. Procedures that are also found in the CPT coding manual
B. Supplies, services, and procedures that are not found in the CPT manual
C. Only supplies that you cannot find in the CPT manual
D. All services performed in the office, except for procedures

Answer: B

The HCPCS manual includes codes for supplies, services, and procedures that are not found in the CPT manual. Although some procedures found in the HCPCS manual are also found in the CPT manual, the most appropriate answer is B because HCPCS codes also include supplies and services not found in the CPT manual.

Question: 5

There are four different classifications of a vulvectomy (the removal of the vulva). What classification should be used for a vulvectomy with the removal of skin and deep subcutaneous tissues?

A. Simple Vulvectomy
B. Radical Vulvectomy
C. Partial Vulvectomy
D. Complete Vulvectomy

Answer: B

The classification that should be used for a vulvectomy with the removal of skin and deep subcutaneous tissues is a radical vulvectomy. A simple vulvectomy is the removal of skin and superficial subcutaneous tissue not deep subcutaneous tissues. A partial vulvectomy is the removal of less than 80% of the vulvar area, and a complete vulvectomy is the removal of more than 80% of the vulvar area.

Question: 6

The HCPCS Level II modifier -E1 stands for:

A. Lower Right, Eyelid
B. Upper Right, Eyelid
C. Upper Left, Eyelid
D. Right Hand, Thumb

Answer: C

The HCPCS Level II modifier -E1 stands for Upper Right, Eyelid. Many HCPCS modifiers indicate anatomical locations, such as the -E series modifiers for eyelids. Other HCPCS modifiers indicate a section of the vertebral column, and digits of the hands or feet.

Question: 7

When listing both CPT and HCPCS modifiers on a claim, you:

A. List the HCPCS modifier first
B. Do not list the HCPCS modifier at all
C. Only list the CPT modifier
D. List the CPT modifier first

Answer: D

When listing both CPT and HCPCS modifiers on a claim, you list the CPT modifier first. When you report a procedure code with more than one modifier, you must list the modifier that will affect the payment first on the claim. Typically, CPT modifiers will affect the payment of a claim, but HCPCS modifiers may not.

Question: 8

When you are searching for a diagnosis code in the ICD-9 manual:

A. You must first locate the diagnosis code description in the index and then verify the correct code selection in the tabular list
B. You must locate the diagnosis code in the index and then assign the appropriate code
C. You must determine which procedure you will bill for first, and then find out which diagnosis codes match the procedure
D. You must first locate the diagnosis code description in the index and then verify the code in Volume III

Answer: A

When you are searching for a diagnosis code in the ICD-9 manual, you must first locate the diagnosis code description in the index and then verify the correct code selection in the tabular list. It is an incorrect coding practice to code directly from the index. Once you locate your code in the index, it is important to verify the code in the tabular list to make sure it is the correct code.

Question: 9

HCPCS Level II codes are updated every quarter by:

A. CMS
B. Medicaid
C. Tricare
D. Commercial payers

Answer: A

HCPCS Level II codes are updated every quarter by CMS (Centers for Medicare and Medicaid Services). Updates to HCPCS Level II codes are published on the CMS website at the beginning of each new quarter. The HCPCS Level II manual, however, is only published once per year.

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