

CPC Bestehen Sie Certified Professional Coder (CPC) Exam! - mit höhere Effizienz und weniger Mühen



Übrigens, Sie können die vollständige Version der Fast2test CPC Prüfungsfragen aus dem Cloud-Speicher herunterladen:
<https://drive.google.com/open?id=1bz5xfkj2DL84JuONEejpHMFGWrwy62cL>

Ob man in einem bestimmten Bereich den Erfolg macht, spiegelt an Ihren Zertifizierungen, sowie in IT-Industrie. Deshalb wollen viele Leute an AAPC CPC Zertifizierungsprüfungen teilnehmen, um Ihre selbe Fähigkeit zu beweisen. Und es ist nicht einfach, AAPC CPC Zertifizierung zu bekommen. Aber wenn sie den kürzeren Weg finden, können Sie die CPC Prüfung leicht bestehen. So wollen Wir Ihnen Fast2test Dumps empfehlen. Es kann Ihnen helfen, weniger Zeit zu verwenden und die CPC Prüfung zu bestehen.

AAPC CPC Prüfungsplan:

Thema	Einzelheiten
Thema 1	<ul style="list-style-type: none"> • Evaluation & Management Services: This section of the exam measures the skills of coding specialists and covers office visits, hospital care, consultations, and other E • M services. It tests the understanding of time-based coding, medical decision-making, and history • exam components per current CMS guidelines.
Thema 2	<ul style="list-style-type: none"> • Cardiovascular System: This section of the exam measures the skills of coding specialists and addresses services related to the heart, arteries, and veins. It involves the coding of diagnostic and therapeutic procedures, including catheterizations, bypasses, and repairs.:
Thema 3	<ul style="list-style-type: none"> • Digestive System: This section of the exam measures the skills of coding specialists and evaluates the coding of surgeries and procedures involving the oral cavity, pharynx, esophagus, stomach, intestines, liver, pancreas, and related organs. Understanding endoscopic procedures is particularly critical here.
Thema 4	<ul style="list-style-type: none"> • Introduction to CPT®, HCPCS Level II, and Modifiers: This section of the exam measures the skills of coding specialists and introduces candidates to CPT® coding for procedures, HCPCS Level II for supplies and services, and the correct use of modifiers. It helps learners distinguish between different code sets and understand their place in medical billing.
Thema 5	<ul style="list-style-type: none"> • Applying the ICD-10-CM Guidelines: This section of the exam measures the skills of coding specialists and covers how to apply official ICD-10-CM guidelines to real-world coding scenarios. It emphasizes the hierarchy of instructional notes, general and chapter-specific rules, and how to make judgment calls within compliant coding frameworks.

Thema 6	<ul style="list-style-type: none"> • Anesthesia: This section of the exam measures the skills of medical coders and involves coding anesthesia services based on surgical site, complexity, and time. It tests the understanding of anesthesia modifiers and the importance of linking anesthesia codes with the correct primary procedures.
Thema 7	<ul style="list-style-type: none"> • Overview of ICD-10-CM: This section of the exam measures the skills of medical coders and introduces the structure, format, and usage of the ICD-10-CM coding system. It reviews the purpose of ICD-10-CM in diagnosis reporting and prepares candidates to interpret chapters, code ranges, and conventions embedded in the system.
Thema 8	<ul style="list-style-type: none"> • Accurate ICD-10-CM Coding: This section of the exam measures the skills of medical coders and focuses on the precise assignment of diagnosis codes using the ICD-10-CM system. The goal is to ensure accurate representation of patient conditions, proper sequencing, and a clear linkage between diagnoses and services.
Thema 9	<ul style="list-style-type: none"> • Special Senses (Ocular and Auditory): This section of the exam measures the skills of coding specialists and covers the coding of procedures related to the eyes and ears. Topics include surgeries on the cornea, retina, and middle • inner ear, as well as related diagnostic procedures.
Thema 10	<ul style="list-style-type: none"> • Integumentary System: This section of the exam measures the skills of medical coders and covers procedures related to the skin and related structures. Topics include excisions, biopsies, repairs, and destruction services, focusing on accurate code selection and modifier usage for integumentary interventions.
Thema 11	<ul style="list-style-type: none"> • Respiratory System: This section of the exam measures the skills of medical coders and evaluates the ability to code procedures involving the nose, sinuses, larynx, trachea, bronchi, and lungs. Attention is given to services like endoscopies, excisions, and resections within the respiratory tract.
Thema 12	<ul style="list-style-type: none"> • Endocrine System and Nervous System: This section of the exam measures the skills of medical coders and assesses the ability to assign codes for surgeries involving glands, the brain, spinal cord, and peripheral nerves. Procedures like resections and electrical stimulation are part of the evaluated content.
Thema 13	<ul style="list-style-type: none"> • Female Reproductive System and Maternity Care & Delivery: This section of the exam measures the skills of coding specialists and evaluates coding accuracy for gynecological and obstetric procedures. It includes deliveries, antepartum care, cesarean sections, and surgical procedures involving female reproductive anatomy.
Thema 14	<ul style="list-style-type: none"> • Musculoskeletal System: This section of the exam measures the skills of coding specialists and focuses on coding procedures involving bones, joints, muscles, and tendons. It covers surgeries, reductions, arthroscopies, and fracture treatments, emphasizing accurate mapping of procedures to anatomical areas.
Thema 15	<ul style="list-style-type: none"> • Radiology: This section of the exam measures the skills of coding specialists and focuses on diagnostic imaging procedures including X-rays, CT scans, MRIs, ultrasounds, and nuclear medicine. It emphasizes proper selection of codes based on anatomical site and modality used.
Thema 16	<ul style="list-style-type: none"> • Urinary System and Male Genital System: This section of the exam measures the skills of medical coders and assesses understanding of procedures on kidneys, bladder, ureters, prostate, and male reproductive organs. Proper use of CPT codes for surgical and diagnostic interventions is tested.
Thema 17	<ul style="list-style-type: none"> • Pathology & Laboratory: This section of the exam measures the skills of medical coders and includes lab tests, specimen analysis, and pathological examination procedures. It ensures that coders understand how to apply codes for chemistry panels, cultures, and histopathological diagnostics.

>> CPC Antworten <<

Wählen Sie die Fragenkataloge zur die AAPC CPC Zertifizierungsprüfung von Fast2test, können Sie neuesten Prüfungsfragen und Antworten zur AAPC CPC Zertifizierung bekommen. Die Genauigkeiten der Fragenkataloge von Fast2test kann Ihnen garantieren, dass Sie die Prüfung 100% bestehen werden. Hier können wir Ihnen versprechen, dass wir Ihnen alle an uns geleistete Zahlung erstatten werden, entweder die gekauften Produkte Qualitätsproblem haben, oder Sie die AAPC CPC Zertifizierungsprüfung nicht einmalig bestehen.

AAPC Certified Professional Coder (CPC) Exam CPC Prüfungsfragen mit Lösungen (Q127-Q132):

127. Frage

(What does NCCI stand for, and what is its purpose?)

- A. National Code Collection Information; it lists CPT codes and specifies which codes are allowed for a repeat procedure by the same provider
- **B. National Correct Coding Initiative; it lists CPT codes that are bundled or not reported separately together which promotes accurate coding and prevents improper reimbursement**
- C. National Coding Compliance Index; it lists CPT codes that can be appended with modifier 51 to bypass an edit and what other codes can be used instead for reimbursement
- D. National Coding Compliance Index; it lists CPT codes that must always be billed together which eliminates the need for modifiers in coding

Antwort: B

Begründung:

NCCI stands for the National Correct Coding Initiative. Its purpose is to promote correct coding by identifying code pairs that should not be reported together in most circumstances, helping prevent unbundling and improper payment. The NCCI includes Procedure-to-Procedure (PTP) edits and guidance that reflect common clinical coding conventions (for example, when one service is considered integral to another). Importantly, NCCI edits do not "eliminate the need for modifiers"; rather, they clarify when a modifier (such as -59 or an appropriate X{EPSU} modifier) may be allowed only when documentation supports that the services were truly distinct (different site, session, lesion, or other qualifying circumstance). Options A and C incorrectly name the initiative and misstate its function, and option B is not the correct expansion or purpose. For CPC exam readiness, understand NCCI as a primary Medicare edit set widely used as a reference by many payers, supporting consistent and accurate reporting and reducing payment errors.

128. Frage

A 20-year-old female is being seen for the first time by a primary care physician to have a yearly physical. During the examination for the physical, the provider discovers non-inflamed lesions on her legs and arms. The physician performs a complete physical and additional separate documentation for the treatment of the lesions on the bilateral upper and lower extremities. The provider has the patient buy an over-the-counter ointment and will continue to watch them.

What CPT coding is reported for this visit?

- A. 99385, 99203-25
- B. 0
- C. 1
- **D. 99385-25, 99203**

Antwort: D

129. Frage

A woman at 36-weeks gestation goes into labor with twins. Fetus 1 is in an oblique position, and the decision is made to perform a cesarean section to deliver the twins. The obstetrician who delivered the twins, provided the antepartum care, and will provide the postpartum care.

What CPT coding is reported for the twin delivery?

- A. 59510, 59514, 59515
- **B. 0**
- C. 59510 x 2
- D. 59510, 59515

Antwort: B

Begründung:

* Cesarean Delivery with Antepartum and Postpartum Care: The procedure involved the cesarean section delivery of twins, including antepartum and postpartum care.

* CPT Code 59510: This code is used for routine obstetric care including antepartum care, cesarean delivery, and postpartum care. The code is not reported per fetus but per delivery, even when delivering multiples.

References:

* AMA's CPT Professional Edition (current year)

130. Frage

This 27-year-old male has morbid obesity with a BMI of 45 due to a high calorie diet. He has decided to have an open Roux-en-Y gastric bypass. The patient is brought to the operating room and placed in supine position.

A midline abdominal incision is made. The stomach is mobilized, and the proximal stomach is divided and stapled creating a small proximal pouch in continuity with the esophagus. A short limb of the proximal bowel of 155 cm is divided. It is brought up and anastomosed to the gastric pouch. The other end of the divided bowel is connected back into the distal small bowel to the short limb's gastric anastomosis to restore intestinal continuity. The abdominal incision is closed.

What are the procedure and diagnosis codes for this encounter?

- A. 43644, E66.01, Z68.43
- B. 43645, E66.8, Z68.42
- C. 43847, E66.01, Z68.42
- D. 43847, E66.9, Z68.42

Antwort: C

Begründung:

* Open Roux-en-Y Gastric Bypass: The procedure involves creating a small gastric pouch and anastomosing it to the jejunum.

* CPT Code 43847: This code describes a surgical gastric restrictive procedure with gastric bypass for morbid obesity, open.

* ICD-10-CM Code E66.01: This code represents morbid (severe) obesity due to excess calories.

* ICD-10-CM Code Z68.42: This code indicates a BMI of 45.

References:

* AMA's CPT Professional Edition (current year)

* ICD-10-CM (current year)

131. Frage

A cardiologist uses the hospital's equipment for a cardiac stress test as he doesn't own equipment for the test.

He supervises the test and provides the interpretation and report of the test.

What CPT codes are reported?

- A. 93015, 93016
- B. 93015, 93018
- C. 93016, 93018
- D. 93016, 93017, 93018

Antwort: C

Begründung:

Procedure: Cardiac stress test performed using hospital's equipment with the cardiologist providing supervision, interpretation, and report.

CPT Codes:

93016: This code is for supervision only without provision of the equipment.

93018: This code is for interpretation and report only.

Code Selection Justification: Since the cardiologist does not own the equipment, codes 93016 and 93018 correctly represent the supervision, interpretation, and report of the test.

AMA CPT Professional Edition (current year)

132. Frage

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Mit langjähriger Forschung im Gebiet der IT-Zertifizierungsprüfung spielen wir Fast2test eine führende Rolle in diesem Gewerbe. Die Softwaren, die wir entwickeln, sind umfassend und enthalten große Menge Prüfungsaufgaben. AAPC CPC Prüfungssoftware ist eine der Bestseller. Sie hilft gut die Prüfungsteilnehmer, die AAPC CPC zu bestehen. Und es ist allgemein bekannt, dass mit die AAPC CPC Zertifizierung wird Ihre Karriere im IT-Gewerbe leichter sein!

CPC Pruefungssimulationen: <https://de.fast2test.com/CPC-premium-file.html>

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