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AAPC CPC FINAL EXAM PREPARATION STUDY GUIDE 2026 – COMPLETE CONCEPT REVIEW & PRACTICE MATERIALS (LATEST EDITION)

100 Essential Q&A with Concept Explanations

Section 1: ICD-10-CM Coding Guidelines & Conventions

1. Q: What is the primary purpose of the ICD-10-CM codebook?
A: To provide a standardized system for classifying diagnoses, reasons for encounters, and causes of injury or disease for morbidity coding and statistical reporting.

2. Q: What does the "Excludes1" note indicate?
A: It means the two conditions cannot be coded together. They are mutually exclusive.

3. Q: What is the difference between "Excludes1" and "Excludes2"?
A: "Excludes1" means "not coded here," the conditions cannot coexist. "Excludes2" means "not included here," but the conditions *can* be coded together if both are present.

4. Q: When is the 7th character required in ICD-10-CM?
A: For codes in certain chapters (like Injury, Poisoning, and External Causes - Chapters 19 & 20) to provide information about the encounter (initial, subsequent, sequela).

5. Q: What is a placeholder, and how is it represented?
A: The letter "X" is used as a placeholder to allow for future expansion and to meet the required character length for a code (e.g., T36.0X1A).

6. Q: What is the rule for coding "uncertain" diagnoses in the outpatient setting?
A: Do **not** code diagnoses documented as "probable," "suspected," "questionable," or "rule out." Code only the confirmed diagnoses or the signs/symptoms.

7. Q: What is the purpose of the Table of Drugs and Chemicals?
A: To identify codes for poisoning, adverse effects, and underdosing related to specific drugs, chemicals, and biological substances.

8. Q: How do you code a documented "history of" a condition?
A: Use a Z code from category Z85-Z87 (Personal history of malignant neoplasm, other diseases) unless the history has a current implication for care.

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Medical Tests American Academy of Professional Coders: Certified Professional Coder Sample Questions (Q112-Q117):

NEW QUESTION # 112
Code the following adverse effect:
Initial encounter of drug-induced tremors that was caused by Cyclosporin the patient takes for anemi a. The anemia is caused by a current diagnosis of colon cancer.

- A. T45.1X5A G25.1, C18.9, D63.O
- B. D63.O, C18.9, T45.1X5A, G25.1
- C. G25.1, T45.1X5A, C18.9, D63.O
- D. C18.9, D63.O, G25.1, T45.1X5A

Answer: C

Explanation:
The correct sequencing of the code would be as follows: side effect of the drug. medication that caused the adverse effect and the underlying condition for why the drug is being taken. In this scenario, because the anemia is caused by a malignancy, ICD-IO-CM guidelines state that the malignancy should be the principal diagnosis "followed by the appropriate code for the anemia (such as D63.0, Anemia in neoplastic disease)."

NEW QUESTION # 113
Consultation codes 99242-99245 have been deemed as not medically necessary and are no longer reimbursed by Medicare. This decision would fall under which term?

- A. Local Coding Determination
- B. Carrier Coding Determination
- C. National Coding Determination
- D. Governed Coding Determination

Answer: C

Explanation:
Decisions regarding coverage are made through evidence-based processes and public opinion. National Coding Determination (NCD) is specific to Medicare coverage nationwide, whereas Local Coding Determination (LDC) is contractor and commercial specific. Carrier and Governed Coding Determinations do not exist.

NEW QUESTION # 114
Which service is NOT bundled into pediatric critical care CPT 99475?

- A. A suprapubic aspiration is performed on a 3-year-old patient who has blood in her urine.
- B. The doctor suspects meningitis on a 4-year-old patient and performs a lumbar puncture totest the fluid around the spinal cord.
- C. A central line is inserted to stabilize a 5-year-old patient in respiratory arrest.
- D. A blood transfusion is given to a 2-year-old patient with sickle cell disease.

Answer: C

Explanation:
A blood transfusion (CPT 36430, 36440), lumbar puncture (CPT (62270), and suprapubic aspiration (CPT 51100) are all

considered inclusive to pediatric critical care services rendered on patients betvv'een the age of 2 and 5 years old. A complete list of all additional services can be found in the CPT Section Guidelines for Newborn and Pediatric Services. A central line insertion (CPT 36556) is not bundled into critical care services and may be reported separately.

NEW QUESTION # 115
A patient is referred to a radiology clinic with a diagnosis of chest bruising. A radiologist who works for the clinic performs a 3-view x-ray on the patient's ribcage bilaterally. The radiologist interprets images and determines that there is a right-sided stress fracture to one rib. Which ICD-IO-CM and CPT codes should be reported for this encounter?

- A. 71110, M84.48XA
- B. 71110-26, M84.48XA
- C. 71110-26, S22.31Y.A
- D. 71110, S22.31Y.4

Answer: A

Explanation:
Modifier 26, indicating only a professional component ofthe study, would be inappropriate because the radiologist who obtained the images and interpreted the results works for the clinic that owns the x-ray machines, By reporting the procedure without a modifier, the clinic is requesting 100% reimbursement of the study, which includes the technical and professional components. When searching the index in the ICD-IO-CM book a stress fracture is related to fatigue and is coded as a bone disorder as opposed to an injury.

NEW QUESTION # 116
A female patient presents to her obstetrical office 32 -weeks pregnant for a bi-weekly ultrasound. Code the following technician's report:
Fetal views obtained via transabdominal ultrasound as follows:
BPD: 32 mm
Femur Length: 63 mm
Head Circumference: 288 mm
Abdominal Circumference: 270 mm
BPP 8/8
NST from 11:15 to 12:17, showing 160 BPM and positive movement activity Doppler shows adequate systolic and diastolic flow velocities of the fetal umbilical artery.

- A. 76816-TC, 76816-TC, 76820-TC
- B. 76815, 78819, 76820
- C. 76816, 76818, 76820
- D. 76815-TC, 76819-TC, 76820-TC

Answer: C

Explanation:
CPT 76815 is a limited ultrasound, in which only the fetal heartbeat, position, placental location, and/or volume of amniotic fluid are evaluated. In this scenario, much more was done than a limited study. The ultrasound technician documented age-appropriate fetal measurements, which are supported by CPT 76816. A biophysical profile (BPP) was also done, which monitors the fetus's movements, tone, and breathing as well as evaluates the volume of amniotic fluid. Each of these elements counts as 2 units of grading to evaluate the general well-being ofthe fetus. The desired score of a BPP is 8/8. Because a fetal nonstress test (NST) was completed in conjunction with a BPP, report CPT 76818 instead of CPT 76819. Modifier TC is used to reflect that only a technical component of the procedure was completed. However, because the patient received these services in an obstetrical office that employs the physicians providing prenatal care and owns the ultrasound equipment the code should be submitted without modifiers TC or 26 to receive 100% reimbursement.

NEW QUESTION # 117
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