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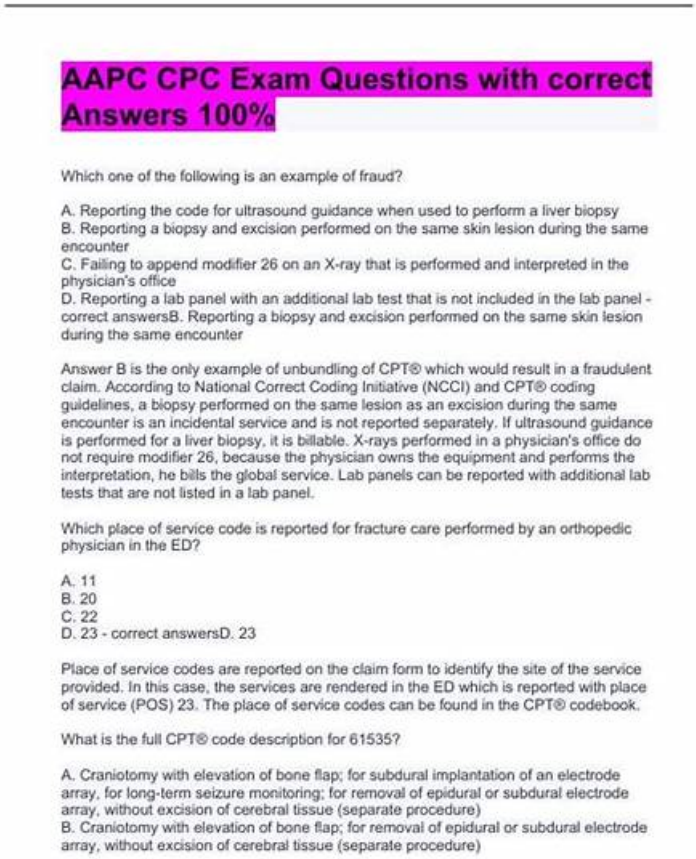

AAPC CPC Exam Questions with correct Answers 100%

Which one of the following is an example of fraud?

A. Reporting the code for ultrasound guidance when used to perform a liver biopsy
B. Reporting a biopsy and excision performed on the same skin lesion during the same encounter
C. Failing to append modifier 26 on an X-ray that is performed and interpreted in the physician's office
D. Reporting a lab panel with an additional lab test that is not included in the lab panel - correct answersB. Reporting a biopsy and excision performed on the same skin lesion during the same encounter

Answer B is the only example of unbundling of CPT® which would result in a fraudulent claim. According to National Correct Coding Initiative (NCCI) and CPT® coding guidelines, a biopsy performed on the same lesion as an excision during the same encounter is an incidental service and is not reported separately. If ultrasound guidance is performed for a liver biopsy, it is billable. X-rays performed in a physician's office do not require modifier 26, because the physician owns the equipment and performs the interpretation, he bills the global service. Lab panels can be reported with additional lab tests that are not listed in a lab panel.

Which place of service code is reported for fracture care performed by an orthopedic physician in the ED?

A. 11
B. 20
C. 22
D. 23 - correct answersD. 23

Place of service codes are reported on the claim form to identify the site of the service provided. In this case, the services are rendered in the ED which is reported with place of service (POS) 23. The place of service codes can be found in the CPT® codebook.

What is the full CPT® code description for 61535?

A. Craniotomy with elevation of bone flap; for subdural implantation of an electrode array, for long-term seizure monitoring; for removal of epidural or subdural electrode array, without excision of cerebral tissue (separate procedure)
B. Craniotomy with elevation of bone flap; for removal of epidural or subdural electrode array, without excision of cerebral tissue (separate procedure)

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Medical Tests American Academy of Professional Coders: Certified Professional Coder Sample Questions (Q98-Q103):

NEW QUESTION # 98
A patient relocates after receiving treatment for an arm fracture. The patient schedules an appointment with a new orthopedist to remove the cast. The orthopedic office should report the fracture diagnosis code with the seventh character A to indicate active treatment.

- A. False
- B. True

Answer: A

Explanation:
The statement is false. When a patient is in the healing and/or recovery phase of an injury, the seventh character would be D to indicate that the care is subsequent-whether the provider has treated the patient in the past or not.

NEW QUESTION # 99
Anesthesiologist A begins providing services at 7:02 but is relieved at 8:47 by Anesthesiologist Z. If the recorded end time for anesthesia services is 11:32, which statement is be true?

- A. Anesthesiologist Z would report 4.5 hours of anesthesia time.
- B. Anesthesiologist A would report 1.75 hours, and Anesthesiologist Z would report 2.75 hours of anesthesia time.
- C. Both anesthesiologists would separately report 4.5 hours of anesthesia time.
- D. Anesthesiologist A would report 4.5 hours of anesthesia time.

Answer: A

Explanation:
When splitting/providing relief in the middle of a procedure, the anesthesiologist who provides services for the longest amount of time bills for the anesthesia services in their entirety. In this scenario, Anesthesiologist Z provided 60 minutes more than Anesthesiologist A and so would bill for the entire 4.5 hours. Even though Anesthesiologist A provided 1.75 hours, they would not submit any coding to the insurance carrier.

NEW QUESTION # 100
If a provider documents in an assessment that a patient is obese, but the BMI extracted from the chart is consistent with morbid obesity, what should be reported on the claim?

- A. Morbid obesity and the appropriate BMI
- B. Morbid obesity
- C. Obesity
- D. Obesity and the appropriate BMI

Answer: D

Explanation:
The diagnosis is always based on the provider's documentation, which in this case would be obesity. Coding guidelines also state that if there is a reportable diagnosis related to weight, "the BMI can be assigned from documentation of someone other than the patient's provider, such as nursing notes."

NEW QUESTION # 101
Which statement is true regarding the diaphragm?

- A. It forms tendons, ligaments, cartilage, and fat.
- B. It performs an important function in blood flow.
- C. It is a collection of organs held together by connective tissue.
- D. It separates the thoracic cavity from the abdominal cavity.

Answer: D

Explanation:
The diaphragm separates the thoracic cavity from the abdominal cavity by means of skeletal muscle. When the diaphragm contracts, air is drawn into the lungs. It therefore plays a key role in respiration. The mediastinum is surrounded by loose connective tissue and contains several anatomical structures including the heart. Connective tissue is distributed throughout the body to form tendons, ligaments, cartilage, and fat.

NEW QUESTION # 102
A 45-year-old female patient with urinary incontinence is treated by means of a Burch procedure. The patient is morbidly obese. What CPT and ICD-IO-CM codes should be reported by the surgeon?

- A. 51840, R32
- B. 51840, R32, E66.8
- C. 51841, R32
- D. 51841, R32, E66.8

Answer: D

Explanation:
When choosing betvteen CPT 51840 and 51841, consider that obesity reduces the operative field, increases surgical time, and poses difficulties in surgical technique. It is therefore considered one of several complicating factors to this surgery because it has an abdominal approach.
Additionally, although the obesity is not the reason for the surgical encounter, it nevertheless should be coded due to the impact it has on the procedure.

NEW QUESTION # 103
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