

試験の準備方法-便利なCPC試験対策試験-100%合格 率のCPC受験記



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大量の時間と金銭をかけるのに比べて、正しい仕方は肝心なことです。もしあなたはAAPC CPC試験に準備しているなら、あなたのための整理される備考資料はあなたにとって最善のオプションです。我々の目標はあなたに試験にうまく合格させることです。弊社の誠意を信じてもらいたいし、AAPC CPC試験2成功するのを祈って願います。

AAPC CPC 認定試験の出題範囲:

トピック	出題範囲
トピック 1	<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.
トピック 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.:
トピック 3	<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.
トピック 4	<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.
トピック 5	<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.

トピック 6	<ul style="list-style-type: none"> • Review of Anatomy: This section of the exam measures the skills of coding specialists and covers a high-level understanding of human anatomy. It includes organs, systems, directional terminology, and anatomical locations, enabling coders to link procedures and diagnoses to the correct bodily structures with accuracy and consistency.
トピック 7	<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.
トピック 8	<ul style="list-style-type: none"> • The Business of Medicine: This section of the exam measures the skills of medical coders and covers foundational knowledge regarding the healthcare system, reimbursement models, insurance payers, HIPAA compliance, and the ethical responsibilities coders hold within clinical and billing environments. It establishes the context in which coding decisions directly affect healthcare operations and financial outcomes.
トピック 9	<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.
トピック 10	<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.

>> CPC試験対策 <<

CPC受験記、CPC資格認定試験

これらの問題を解決するための基本的な方法は、社会の発展よりも速いスピードで成長することです。現場では、AAPC認定を取得して、自分自身を改善し、より良いあなたとより良い未来を目指してください。それにより、あなたはあなたの職業で認められます。CPC試験トレントは、より大企業に注意を向けさせる能力を証明できます。その後、より良い仕事を取得し、適切な職場に行くための選択肢があります。そして、CPC試験問題は、98%以上の高い品質と高い合格率で有名です。CPC学習ガイドをお試してください。

AAPC Certified Professional Coder (CPC) Exam 認定 CPC 試験問題 (Q190-Q195):

質問 # 190

Patient is admitted in observation care on 12/2/20XX in the morning for acute asthma exacerbation. The ED physician requires the patient to stay overnight. Next day, 12/3/20XX the patient is discharged from observation care in the afternoon. Patient's total stay in observation was 16 hours.

What E/M categories and code ranges are appropriate to report?

- A. Hospital Inpatient or Observation Care Services (Including Admission and Discharge Services) (99234-99236) and Subsequent Inpatient or Observation Care (99231-99233)
- B. Initial Hospital Inpatient or Observation Care (99221-99223) and Hospital Inpatient or Observation Discharge services (99238-99239)
- **C. Hospital Inpatient or Observation Care Services (Including Admission and Discharge Services) (99234-99236) and Hospital Inpatient or Observation Discharge services (99238-99239)**
- D. Initial Hospital Inpatient or Observation Care (99221-99223) and Subsequent Hospital Inpatient or Observation Care (99231-99233)

正解: C

解説:

1. E/M Code Category Selection:

The patient was placed in observation care on 12/2/20XX for an acute asthma exacerbation and stayed in observation for a total of 16 hours, with discharge occurring on 12/3/20XX.

The appropriate E/M category for patients in observation care for a period that includes both admission and discharge on separate calendar dates is "Hospital Inpatient or Observation Care Services", with specific codes for admission and discharge on different dates.

2. Code Range and Specific Codes:

Code Range 99234-99236 applies to cases where observation care includes both admission and discharge, particularly when they occur on different calendar days and the total duration of care is under 24 hours.

For discharge on the subsequent day, 99238-99239 (Hospital Inpatient or Observation Discharge Services) applies, depending on the time spent on discharge.

3. Rationale for Excluding Other Options:

Option B and Option D include Initial Hospital Inpatient or Observation Care codes (99221-99223), which are typically used for admissions to inpatient care rather than for observation care scenarios as presented here.

Option C incorrectly combines Subsequent Inpatient or Observation Care codes (99231-99233), which are used for follow-up days rather than discharge services.

4. AAPC and CPT Coding Guidelines:

According to CPT guidelines, the 99234-99236 code range is used when observation care requires both admission and discharge on different dates, and 99238-99239 is appropriate for discharge services.

Therefore, the correct answer is A. Hospital Inpatient or Observation Care Services (Including Admission and Discharge Services) (99234-99236) and Hospital Inpatient or Observation Discharge services (99238-99239).

質問 # 191

Eric is buying his first life insurance policy from XYZ Life Insurance Company. The company requires Eric have a physical exam prior to issuance of the policy. Eric sees his primary care provider who completes the required documentation and forms provided by the insurance company.

How does the primary care provider report his services?

- A. 0
- **B. 1**
- C. 2
- D. 3

正解: B

解説:

CPT code 99450 is used for the examination of a patient for the purpose of establishing medical baseline information or for insurance purposes. Since Eric's primary care provider completed the required physical exam documentation for his life insurance policy, this is appropriately reported with code 99450. Reference: CPT Professional Edition (current year), AMA.

質問 # 192

The knee joint consists of which three compartments?

- **A. Medial, lateral, and patellofemoral**
- B. Medial, trochlea groove, and vestibular
- C. Medial, lateral, and cochlea
- D. Posterior malleolus, scapula, and fibular facet

正解: A

解説:

The knee joint consists of three primary compartments:

1. Medial compartment: The inside part of the knee, which includes the femur and tibia interaction on the inner side.

2. Lateral compartment: The outside part of the knee, where the femur and tibia meet on the outer side.

3. Patellofemoral compartment: The area between the patella (kneecap) and the femur.

These three compartments are essential for knee joint stability and function, allowing movement and weight-bearing activities.

B: Trochlea groove and vestibular are not associated with knee anatomy.

C: Posterior malleolus, scapula, and fibular facet do not relate to knee compartments; the malleolus is in the ankle, scapula in the shoulder, and fibular facet is not part of the primary knee compartments.

D: Cochlea is unrelated to knee anatomy and refers to a part of the inner ear.

Thus, the correct answer is A. Medial, lateral, and patellofemoral.

質問 # 193

Which is a malignant neoplasm originating in the skin?

- A. Hemangioma
- B. Melanoma
- C. Osteosarcoma
- D. Lymphoma

正解: B

解説:

Melanoma is a malignant neoplasm of melanocytes, which are pigment-producing cells found primarily in the skin. It is one of the most serious forms of skin cancer and is classified under ICD-10-CM category C43.- (Malignant melanoma of skin).

Osteosarcoma is a malignant tumor of bone, not skin (ICD-10-CM C40-C41).

Hemangioma is a benign tumor of blood vessels and is not malignant (often coded under D18.-).

Lymphoma is a malignancy of the lymphatic system, not a primary skin neoplasm (ICD-10-CM C81-C85), though rare cutaneous lymphomas exist, they are not the standard CPC exam answer here.

質問 # 194

A patient is diagnosed with diabetic polyneuropathy.

Using ICD-10-CM coding guidelines, what ICD-10-CM coding is reported?

- A. E11.42
- B. E11.9, G62.9
- C. E10.42
- D. E10.9, G62.9

正解: A

質問 # 195

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CPC受験記: https://www.jpshiken.com/CPC_shiken.html

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