

Newborn Coding Decision Tool 2017

American Academy of Pediatrics Committee on Coding and Nomenclature
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CODING FOR NEWBORN SERVICES, INITIAL DAY NEWBORN	
SCENARIO 1: NORMAL TO SICK CARE Many characteristics are met for normal care, but the baby requires care for one or more conditions or symptoms that require additional services beyond normal care.	SCENARIO 2: NORMAL TO INTENSIVE CARE Baby is born normal (other than some day) but later requires intensive care and a physician's attention when the condition worsens.
SCENARIO 3: NORMAL TO CRITICAL CARE Many characteristics are met for normal care, but the baby requires care for one or more conditions or symptoms that require additional services beyond normal care.	SCENARIO 4: SICK OR INTERSIVE CARE TO CRITICAL CARE Baby is born normal (other than some day) but later requires intensive care and a physician's attention when the condition worsens.
SCENARIO 5: SICK OR INTERSIVE CARE TO CRITICAL CARE Baby is born normal (other than some day) but later requires intensive care and a physician's attention when the condition worsens.	SCENARIO 6: SICK OR INTERSIVE CARE TO CRITICAL CARE Baby is born normal (other than some day) but later requires intensive care and a physician's attention when the condition worsens.
SCENARIO 7: INTENSIVE CARE TRANSFER Baby is born requiring intensive care services, but later requires care for one or more conditions or symptoms that require additional services beyond normal care.	SCENARIO 8: CRITICAL CARE TRANSFER Baby is born requiring intensive care services, but later requires care for one or more conditions or symptoms that require additional services beyond normal care.
SCENARIO 9: CRITICAL CARE TRANSFER TO ANOTHER LEVEL Baby is born requiring intensive care services, but later requires care for one or more conditions or symptoms that require additional services beyond normal care.	SCENARIO 10: INTENSIVE CARE TO NORMAL CARE Baby is born requiring intensive care services, but later requires care for one or more conditions or symptoms that require additional services beyond normal care.

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NEWBORN CODING DECISION TOOL

With the creation of intensive and critical care service codes, coding for newborn services has become quite complex. Physicians who use the newborn coding decision tool are often confused as to which codes to report for services they provide when a newborn is not born healthy, or, in contrast, is born healthy but develops a problem later during the initial hospital stay.

The decision tool was developed to assist physicians and their coders to recognize the unique needs of newborn coding and to ensure coding is possible for each condition that arises when the newborn's condition changes on the initial day of care or on a subsequent day of care as well as when the physician is providing intensive or critical care physician provided alternate levels of care, on the same date or different dates of service.

Allowing the Newborn Coding Decision Tool to remember the following:

- Always code for the physician's participation, not the facility, in the care of newborn intensive or critical care services.
- Physician's critical care services are only reported when the patient meets the criteria as defined in Current Procedural Terminology (CPT) guidelines and documentation supports it.
- The physician's participation in specific medical conditions or procedures requires equipment to be used (eg, intensive care) because of the documented condition of the patient and initial level of care, beyond the normal level of care of the newborn, eg, intensive or critical.
- Initial critical care and initial intensive care codes are reported on the initial day that the patient requires the particular level of care, or date of transfer if the newborn's condition deteriorates on a subsequent day of care. The newborn status should be stated as a "transfer" if increasing severity of illness.

Normal newborn services (9928, 9929, 9930, 9931, 9932, 9933, 9934, 9935, 9936, 9937, 9938, 9939, 9940, 9941, 9942, 9943, 9944, 9945, 9946, 9947, 9948, 9949, 9950, 9951, 9952, 9953, 9954, 9955, 9956, 9957, 9958, 9959, 9960, 9961, 9962, 9963, 9964, 9965, 9966, 9967, 9968, 9969, 9970, 9971, 9972, 9973, 9974, 9975, 9976, 9977, 9978, 9979, 9980, 9981, 9982, 9983, 9984, 9985, 9986, 9987, 9988, 9989, 9990, 9991, 9992, 9993, 9994, 9995, 9996, 9997, 9998, 9999)

Intensive care services (9928, 9929, 9930, 9931, 9932, 9933, 9934, 9935, 9936, 9937, 9938, 9939, 9940, 9941, 9942, 9943, 9944, 9945, 9946, 9947, 9948, 9949, 9950, 9951, 9952, 9953, 9954, 9955, 9956, 9957, 9958, 9959, 9960, 9961, 9962, 9963, 9964, 9965, 9966, 9967, 9968, 9969, 9970, 9971, 9972, 9973, 9974, 9975, 9976, 9977, 9978, 9979, 9980, 9981, 9982, 9983, 9984, 9985, 9986, 9987, 9988, 9989, 9990, 9991, 9992, 9993, 9994, 9995, 9996, 9997, 9998, 9999)

Critical care services (9928, 9929, 9930, 9931, 9932, 9933, 9934, 9935, 9936, 9937, 9938, 9939, 9940, 9941, 9942, 9943, 9944, 9945, 9946, 9947, 9948, 9949, 9950, 9951, 9952, 9953, 9954, 9955, 9956, 9957, 9958, 9959, 9960, 9961, 9962, 9963, 9964, 9965, 9966, 9967, 9968, 9969, 9970, 9971, 9972, 9973, 9974, 9975, 9976, 9977, 9978, 9979, 9980, 9981, 9982, 9983, 9984, 9985, 9986, 9987, 9988, 9989, 9990, 9991, 9992, 9993, 9994, 9995, 9996, 9997, 9998, 9999)

CPT CODE DESCRIPTIONS:

- 9928-9930 Initial hospital care, per day
- 9931-9933 Subsequent hospital care, per day
- 9934-9936 Initial hospital care for evaluation and management (E/M) of normal newborn
- 9937-9939 Subsequent hospital care for E/M of normal newborn
- 9940-9942 Initial hospital care for E/M of newborn, 20 days of age or younger
- 9943-9945 Subsequent hospital care for E/M of newborn, 20 days of age or younger
- 9946-9948 Initial hospital care for E/M of the newborn, 20 days of age or younger, who requires intensive care, intensive care, and other intensive care services
- 9949-9951 Subsequent hospital care for E/M of the newborn, 20 days of age or younger, who requires intensive care, intensive care, and other intensive care services
- 9952-9954 Subsequent hospital care for E/M of the newborn, 20 days of age or younger, who requires intensive care, intensive care, and other intensive care services
- 9955-9957 Critical care, 90 minutes of physician or qualified health professional (QHP) time (initial)
- 9958-9960 Critical care, 90 minutes of physician or qualified health professional (QHP) time (subsequent)
- 9961-9963 Critical care, 90 minutes of physician or qualified health professional (QHP) time (initial)
- 9964-9966 Critical care, 90 minutes of physician or qualified health professional (QHP) time (subsequent)
- 9967-9969 Critical care, 90 minutes of physician or qualified health professional (QHP) time (initial)
- 9970-9972 Critical care, 90 minutes of physician or qualified health professional (QHP) time (subsequent)
- 9973-9975 Critical care, 90 minutes of physician or qualified health professional (QHP) time (initial)
- 9976-9978 Critical care, 90 minutes of physician or qualified health professional (QHP) time (subsequent)
- 9979-9981 Critical care, 90 minutes of physician or qualified health professional (QHP) time (initial)
- 9982-9984 Critical care, 90 minutes of physician or qualified health professional (QHP) time (subsequent)
- 9985-9987 Critical care, 90 minutes of physician or qualified health professional (QHP) time (initial)
- 9988-9990 Critical care, 90 minutes of physician or qualified health professional (QHP) time (subsequent)
- 9991-9993 Critical care, 90 minutes of physician or qualified health professional (QHP) time (initial)
- 9994-9996 Critical care, 90 minutes of physician or qualified health professional (QHP) time (subsequent)
- 9997-9999 Critical care, 90 minutes of physician or qualified health professional (QHP) time (initial)

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American Academy of Pediatrics Committee on Coding and Nomenclature : Newborn Coding Decision Tool 2017 before purchasing it in order to gauge whether or not it would be worth my time, and all praised Newborn Coding Decision Tool 2017:

This handy chart offers clear guidance through the complex process of coding for newborn services in the inpatient setting. Through numerous scenarios, decisive guidelines are given on how to code for the initial and subsequent days when a newborn's situation changes. Transfer of care, intensive and critical care codes, and circumstances where multiple physicians are needed for care are all covered by this quick reference tool. This 12rdquo; x 17rdquo; chart is

fully updated for 2017 and laminated for extra durability.