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Always Codes The Body Part Being Decompressed, Not The Part Being Operated On. So We Need Only One PCS Code For This Procedure. We Need The . 00N . Table Because We Are Decompressing (releasing) The Spinal Cord, Not The Nerve Roots. The Spinal Cord Is Body Part "centra 1th, 2024

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MS-DRG 1 OR 2 Removal (02PA3RZ) Open Assistance (5A0221D) Insertion (02HA0RZ) MS-DRG 1 Or 2 Removal (02PA0RZ) Removal Only MS-DRG 268 - 269 ... (Field 19,"Reserved For Local Use,") Be Used To Document A Crosswalk To Another Procedure Believed To Be Fairly Equivalent. You Should Also In 1th, 2024

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20550-F8 And 20550-F9 With J3301 X 8 (rather Than J1030 X 2) Seem To Be The Appropriate Procedure/supply Codes Here. Incorrect Modifiers X 2: "Left Thumb X-rays" Performed At The Clinic On The DOS, Support 73140-FA, Rather Than 73140-LT, FA And 73140-26, ... 1th, 2024

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Nov 21, 2016 · Essential Hypertension In ICD-9, A Fourth Digit Was Required To Specify The Type Of Essential (primary) Hypertension As: 401.0 Malignant, 401.1 Benign, Or 401.9 Unspecified. ICD-10 Drops The Previous Reference To Benign 1th, 2024

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System For Skilled Nursing Facilities In 1998. Additional HIPPS Codes Were Created For Other Prospective Payment Systems, Including A System For Home Health Agencies In October 2000, And One For Inpatient Rehabilitation Facilities In January 2002. The HIPPS Represents Specific Sets Of Patient Characteristics 3th, 2024

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