

<b>DEPARTMENT:</b> Regulatory Compliance Support	<b>POLICY DESCRIPTION:</b> Coding Orientation and Training for Non-Hospital Entities
<b>PAGE:</b> 1 of 4	<b>REPLACES POLICY DATED:</b> 10/1/99, 4/1/01, 8/1/02 (HIM.PHY.005), 3/1/06 (GOS.OSG.005) 3/6/06, 7/1/09, 10/15/10, 10/1/15, 2/1/17
<b>EFFECTIVE DATE:</b> December 1, 2020	<b>REFERENCE NUMBER:</b> REGS.OSG.005
<b>APPROVED BY:</b> Ethics and Compliance Policy Committee	

**SCOPE:** All full-time, part-time, and solo-practitioner contract colleagues responsible for performing, supervising or monitoring coding for Non-Hospital entities including, but not limited to:

Administration  
 Ambulatory Surgery Division (ASD)  
 Ethics and Compliance Officer  
 HCA Healthcare Physician Services Group (PSG)  
 OSG Practice Management, operations, and coding/billing consultants  
 Owned Freestanding Outpatient Centers (i.e., ASC, IDTF, physician directed clinics, clinical offices, radiation oncology, catheterization lab)  
 Employed Physicians, advanced practice professionals and physicians at teaching hospitals  
 Parallon

**PURPOSE:** To orient all colleagues responsible for performing, supervising or monitoring coding to the Company's coding policies and procedures, tools and resources, education and training programs.

**PROCEDURE:**

1. All colleagues involved in the ICD-10-CM, CPT and HCPCS coding process or current colleagues transitioning to a position requiring coding responsibilities or advancing in level of responsibility for coding will complete the attached orientation checklist within the designated time frame.
  - a. New coding colleagues will review and acknowledge the Company's applicable Coding Policies and Procedures within two weeks of beginning employment.
  - b. All current coding colleagues will review and acknowledge the Company's applicable Coding Policies and Procedures within two weeks of deployment of revisions.
2. All coders will be given an orientation to all applicable computer systems (e.g., 3M Coding and Reimbursement, OnBase) prior to coding.
3. Guidelines for use and phone numbers for the Regulatory Compliance Support (Regs) Coding and Billing Help Line for Non-Hospital Entities and the Ethics Line will be provided.
4. **Non-Hospital Entity** - The following required resources will be reviewed during the orientation process with colleagues, as applicable to position responsibility, and made available to the coding staff prior to coding:
  - a. *Anatomy and Physiology Book*, preferably published within the last five years;

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- b. *Contractor's Provider Manual*;
  - c. *CPT Assistant, subscription*, American Medical Association;
  - d. *Current Procedural Terminology (CPT)*, any edition updated to current year;
  - e. *Healthcare Common Procedure Coding System (HCPCS) Level II National Codes*, any edition updated to current year;
  - f. *International Classification of Diseases 10<sup>th</sup> Revision, Clinical Modification (ICD-10-CM)*, any edition, updated to current year;
  - g. *Medical Acronyms and Abbreviations*, preferably updated within the last three years or [https://www.tabers.com/tabersonline/view/Tabers-Dictionary/767492/all/Medical\\_Abbreviations](https://www.tabers.com/tabersonline/view/Tabers-Dictionary/767492/all/Medical_Abbreviations);
  - h. *Medical Dictionary*, preferably published within the last five years or a free online medical dictionary such as Medical Dictionary Online: <http://www.online-medical-dictionary.org> or Taber's Online: <http://www.tabers.com/tabersonline>;
  - i. *Medicare Carrier Local Coverage Decisions*, updated to current year <http://www.cms.hhs.gov/MCD/overview.asp>;
  - j. *Medicare Claims Processing Manual*, online access <http://www.cms.hhs.gov/Manuals/IOM/list.asp>;
  - k. *Merck Manual or equivalent online access*: <http://www.merck.com/mmpe/index.html>
  - l. *National Correct Coding Initiative Manual/Policy*, any edition, updated to current quarter [http://www.cms.hhs.gov/NationalCorrectCodInitEd/01\\_overview.asp#TopOfPage](http://www.cms.hhs.gov/NationalCorrectCodInitEd/01_overview.asp#TopOfPage);
  - m. *Physician's Desk Reference or equivalent or online*: <http://www.drugs.com/pdf/>.
5. **Non-Hospital Entity/Parallon** - The following are approved but not required references for the Non-Hospital entity supported by Parallon. If available, the resources will be reviewed as appropriate:
- a. *Coding Clinic for HCPCS*, American Hospital Association;
  - b. *Complete Global Service Data for Orthopaedic Surgery*, American Academy of Orthopaedic Surgeons, Current year;
  - c. *CPT Changes: an Insider's View*, American Medical Association (yearly changes to codes);
  - d. *CPT Reference of Clinical Examples, Current Edition*, American Medical Association
  - e. *CSI Navigator Series*, Coding Strategies, Inc. Current year (e.g., *Diagnostic Radiology, Radiation Oncology, Brachytherapy, Interventional Cardiology, Radiosurgery, etc.*);
  - f. *Optum360 Coders' Desk Reference(s) for ICD-10-CM Diagnoses, Procedures, HCPCS Level II*;
  - g. *Optum360 Encoder Pro*, Online Reference Tools, <https://www.encoderpro.com/epr/>;
  - h. (NOTE – on required list) *Part B Answer Book*, Decision Health (required for Parallon);
  - i. *Part B News*, subscription, Decision Health;
  - j. *Principles of CPT Coding*, American Medical Association;

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- k. *Radiation Oncology Coding Users Guide*, American Society for Therapeutic Radiology & Oncology;
- n. *3M Coding and Reimbursement System* - 3M™ Health Information Systems Items;

The following items are provided through HCA IT&S in support of the Company's HIM/Coding initiatives and projects. Please note that the 3M™ Coding References and Coding References PLUS Software is optional. The Web X installation and training or just training would only be budgeted if you need installation support for the 3M™ Coding Classification and Reimbursement software (Codefinder) or you need training on the 3M™ Coding Classification and Reimbursement software.

Description of items:

- Coding & Reimbursement Software – used for separately coding and grouping patient information.
- Coding References Software includes: 3M Integrated Codebook, AHA Coding Clinic for ICD-10-CM, Current Procedural Terminology, AMA CPT Assistant, Clinical Pharmacology Drug Reference, Dorland's Medical Dictionary, Elsevier's Anatomy Plates. This is integrated into the Coding Classification and Reimbursement software.
- Coding References Plus Software includes: AHA Coding Clinic for HCPCS, Coder's Desk Reference from Ingenix, Anesthesia Crosswalk, Faye Brown's ICD-10-CM Coding Handbook, Mosby's Manual of Diagnostic and Lab Tests, The Merck Manual, Dictionary of Medical Acronyms & Abbreviations, ICD-10-PCS reference manual, Dr. Z's Interventional Radiology Coding Reference. This interfaces into the Coding Classification and Reimbursement software. This is an optional item.
- Nosology Support – calling 3M HIS to answer coding questions
- Telephone Support – calling 3M HIS for technical support (excludes nosology questions)
- Web X Installation and Training or Web X Training – budget for new Coding Classification and Reimbursement software installation and training; **or** just for training. This may not be needed for current users.
- APCfinder – TRICARE OPDS – this is optional for those sites wanting a TRICARE Outpatient Grouper included in their Coding and Reimbursement System.
- Level 1 Support – 3M HIS Software Support.

6. **Parallon** - The following required resources will be reviewed, as applicable to position responsibility, and made available to the Parallon coding staff prior to coding:
  - a. *Anatomy and Physiology Book*, preferably published within the last five years and online tutorials at <http://medlineplus.gov/videosandcooltools.html>
  - b. *Coding Clinic for ICD-10-CM*, American Hospital Association
  - c. *Contractor's Provider Manual*
  - d. *CPT Assistant, subscription*, American Medical Association

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<p>e. <i>Current Procedural Terminology (CPT-4, any edition, updated to current year)</i></p> <p>f. <i>Healthcare Common Procedure Coding System (HCPCS) Level II National Codes, any edition, updated to current year</i></p> <p>g. <i>International Classification of Diseases 10<sup>th</sup> Revision, Clinical Modification (ICD-10-CM), any edition, updated to current year</i></p> <p>h. <i>Medical Acronyms and Abbreviations List, preferably updated within the last three years or <a href="https://www.tabers.com/tabersonline/view/Tabers-Dictionary/767492/all/Medical_Abbreviations">https://www.tabers.com/tabersonline/view/Tabers-Dictionary/767492/all/Medical_Abbreviations</a></i></p> <p>i. <i>Medical Dictionary, preferably published within the last five years or a free online medical dictionary such as Medical Dictionary Online: <a href="http://www.online-medical-dictionary.org">http://www.online-medical-dictionary.org</a> or Taber's Online: <a href="http://www.tabers.com/tabersonline">http://www.tabers.com/tabersonline</a></i></p> <p>j. <i>Medicare Carrier Local Coverage Determinations, updated to current version (online access is acceptable) <a href="http://www.cms.hhs.gov/MCD/overview.asp">http://www.cms.hhs.gov/MCD/overview.asp</a></i></p> <p>k. <i>Medicare Claims Processing Manual, online access for most current version <a href="http://www.cms.hhs.gov/Manuals/IOM/list.asp">http://www.cms.hhs.gov/Manuals/IOM/list.asp</a></i></p> <p>l. <i>Merck Manual or equivalent online access: <a href="http://www.merck.com/mmpe/index.html">http://www.merck.com/mmpe/index.html</a></i></p> <p>m. <i>National Correct Coding Initiative Manual/Policy, any edition, updated to current quarter (online access is acceptable) <a href="http://www.cms.hhs.gov/NationalCorrectCodInitEd/01_overview.asp#TopOfPage">http://www.cms.hhs.gov/NationalCorrectCodInitEd/01_overview.asp#TopOfPage</a></i></p> <p>n. <i>Physician's Desk Reference or equivalent or online: <a href="http://www.drugs.com/pdr/">http://www.drugs.com/pdr/</a></i></p> <p>7. Each entity and/or coder's direct supervisor will maintain an education file for each individual involved in the coding process. Documentation of the completed orientation checklist must be filed in the colleague's education file.</p> <p>8. Non-Hospital entities or others as appropriate may monitor the education files. Documentation of the completion of training, as required by the Coding Continuing Education Requirements for Outpatient Services Group Entities Policy, REGS.OSG.006, must be entered in the HealthStream Learning Center (HLC).</p> <p>9. Until HLC is functional for the entity, the coder's direct supervisor must develop a method to track education pursuant to policy.</p>
<p><b>REFERENCES:</b></p> <p>1. OIG's Model Compliance Plan for Third-Party Medical Billing Company Guidelines</p> <p>2. Coding Continuing Education Requirements for Non-Hospital Entities Policy, <a href="#">REGS.OSG.006</a></p>