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Overview

Coding For

Practical

Guidance on

the Efficient

Development of

High-Quality

Software

Introduction

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to Software

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Engineering,

For

Second Edition

equips

students with

the

fundamentals

to prepare

them for

satisfying

careers as

software

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engineers

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regardless of

For

future changes

in the field,

even if the

changes are

unpredictable

or disruptive

in nature.

Retaining the

same

organization

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as its

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predecessor,

For

this second

edition adds

considerable

material on

open source

and agile

development

models. The

text helps

students

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understand
Overview Coding
software
For
development

*techniques and
processes at a
reasonably
sophisticated
level.*

*Students
acquire
practical
experience*

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Overview Coding
For
*through team
software
projects.*

*Throughout
much of the
book, a
relatively
large project
is used to
teach about
the
requirements,*

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design, and
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coding of
For

software. In addition, a continuing case study of an agile software development project offers a complete picture of how

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*a successful
agile project
can work. The
book covers
each major
phase of the
software
development
life cycle,
from
developing
software*

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requirements
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For to software
maintenance.

*It also
discusses
project
management and
explains how
to read
software
engineering
literature.*

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For

**Three
appendices
describe
software
patents,
command-line
arguments, and
flowcharts.**

**This volume
deals with
Article 7 of
the Uniform**

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**Commercial
Code as it
applies to
bills of
lading and
warehouse
receipts. The
basic
terminology
used in these
transactions
is discussed,**

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as is the

bailee's

liability

under the

various kinds

of documents,

the extent and

enforceability

of the

bailee's lien,

the

differences

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between

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negotiable and

For

non-

negotiation,

and other

topics.

Turn your R

code into

packages that

others can

easily

download and

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*use. This
practical book
shows you how*

to bundle

reusable R

functions,

sample data,

and

documentation

together by

applying

author Hadley

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For

Wickham's

package

development

philosophy. In

the process,

you'll work

with devtools,

roxygen, and

testthat, a

set of R

packages that

automate

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common

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development

For

tasks.

Devtools

encapsulates

best practices

that Hadley

has learned

from years of

working with

this

programming

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language.

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Ideal for

For

developers,

data

scientists,

and

programmers

with various

backgrounds,

this book

starts you

with the

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*basics and
shows you how*

For

to improve

your package

writing over

time. You'll

learn to focus

on what you

want your

package to do,

rather than

think about

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package

structure.

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the most

useful

components of

an R package,

including

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unit tests

Automate

anything you

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the years of

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embodied in

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style, such as

organizing

functions into

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process with

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the best way

to submit your

package to the

Comprehensive

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Network (CRAN)

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*well-respected
member of the
R community
who created 30
R packages,
including
ggplot2,
dplyr, and
tidyr
Code of
Federal
Regulations*

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Understanding
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Coding and
Billing: A
Worktext
Public
Documents of
Massachusetts
Risk*

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*Adjustment
Coding and Hcc
Guide 2019*

*Proceedings of
the Fifth
SoMeT_06*

Software is the essential enabler for the new economy and science. It creates new markets and

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new directions for
a more reliable,
flexible, and
robust society. It
empowers the
exploration of our
world in ever
more depth.
However,
software often
falls short behind
our expectations.

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Current software methodologies, tools, and

techniques remain expensive and not yet reliable for a highly changeable and evolutionary market. Many approaches have been proven only as case-by-case

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oriented methods.

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For
This book
presents a
number of new
trends and
theories in the
direction in which
we believe
software science
and engineering
may develop to
transform the role

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of software and
science in
tomorrow's
information
society. This
publication is an
attempt to
capture the
essence of a new
state of art in
software science
and its supporting

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technology. It also aims at identifying the challenges such a technology has to master.

Looking for a way to invigorate your technical writing team and grow that expertise to include

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designers, and
writers of all
backgrounds?
When you treat
docs like code,
you multiply
everyone's
efforts and
streamline
processes through
collaboration,

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automation, and
innovation.

Second edition
now available
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more information
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quantity of
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documentation
that matters—it's
the quality. Is
your clinical
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improvement
(CDI) program
identifying your
outliers? Does
your

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documentation
capture the level
of ICD-10 coding
specificity
required to
achieve optimal
reimbursement?
Are you clear on
how to fix your
coding and
documentation
shortfalls?

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Providing the most complete and accurate coding of diagnoses and site-specific procedures will vastly improve your practice's bottom line. Get the help you need with the Clinical

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Documentation
Reference Guide.

This start-to-finish
CDI primer covers
medical necessity,
joint/shared visits,
incident-to billing,
preventative care
visits, the global
surgical package,
complications and
comorbidities,

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and CDI for
EMRs. Learn the
all-important

steps to ensure
your records
capture what your
physicians
perform during
each encounter.

Benefit from
methods to
effectively

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providers.

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practical and
effective guidance
in AAPC's Clinical
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to triumph over
your toughest

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deficiencies and
keep your claims
on track for
optimal

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trouble spots

Keep compliance

issues at bay

Learn proactive

measures to

eliminate

documentation

problems Work

the coding mantra

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common

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by CERT and

RACs Know the

facts about EMR

templates—and

the pitfalls of auto-

populate features

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Being the Annual

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Various Public

Officers and

Institutions ...

Kinn's The

Medical Assistant

- E-Book

Organize, Test,

Document, and

Share Your Code

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Substantiation

The official book on the Rust programming language, written by the Rust development team at the Mozilla Foundation, fully updated for Rust 2018. The Rust Programming Language is the official book on

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Rust: an open source systems programming language that helps you write faster, more reliable software. Rust offers control over low-level details (such as memory usage) in combination with high-level ergonomics,

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eliminating the hassle traditionally associated with low-level languages. The authors of The Rust Programming Language, members of the Rust Core Team, share their knowledge and experience to show you how to take full advantage of Rust's features--from

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For

installation to
creating robust and
scalable programs.
You'll begin with
basics like creating
functions, choosing
data types, and
binding variables
and then move on to
more advanced
concepts, such as: •
Ownership and
borrowing, lifetimes,
and traits • Using

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Rust's memory safety guarantees to build fast, safe programs • Testing, error handling, and effective refactoring • Generics, smart pointers, multithreading, trait objects, and advanced pattern matching • Using Cargo, Rust's built-in package manager,

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Error

to build, test, and document your code and manage dependencies • How best to use Rust's advanced compiler with compiler-led programming techniques You'll find plenty of code examples throughout the book, as well as three chapters

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For
dedicated to
building complete
projects to test your
learning: a number
guessing game, a
Rust implementation
of a command line
tool, and a
multithreaded
server. New to this
edition: An extended
section on Rust
macros, an
expanded chapter

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on modules, and
appendixes on Rust
development tools
and editions.

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the Federal Register,
containing a
codification of
documents of
general applicability
and future effect ...
with ancillaries.

Giving students the
strongest possible

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baseline in medical terminology, along

with the how and why it is used in documentation and basic coding, this is a vital text for all students taking courses in the area. It allows readers to use their knowledge immediately in any medical setting (including being a

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For

patient), in their
workplaces, and in
the journey to future

careers. Using a

body systems

approach to medical

terminology, this

textbook supports

students to:

Recognize words by

constructing

medical terms based

on root words,

prefixes, linking

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For

forms, and suffixes.
Define, spell,
pronounce, and use
medical terms,
acronyms, and
abbreviations in the
context of patient
care with
appropriate
documentation and
coding examples.
Identify anatomical
directions,
fundamental

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anatomical terminology, basic physiologic functions, and common pathology of all major organ systems with related medical

investigation tools, procedures, and pharmaceuticals.

Relate the use of medical language and medical record-

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keeping to the SOAP format, common medical reports, and coding tools, along with their impact on patient care. Accompanied by plentiful color illustrations and activities, as well as a companion website with resources for both instructors and

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students, this is a
fresh and readable
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Mastering Medical
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Committee for the
Study of Code
Language

Appointed by the
International
Telegraph

Conference of Paris

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Commercial Code
Code of Federal
Regulations,
Containing a
Codification of
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Future Effect as of
December 31, 1948

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real-world
applications, U
NDERSTANDIN
G HOSPITAL
CODING AND
BILLING: A
WORKTEXT, 3e
offers a***

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*comprehensive
guide to both*

*hospital billing
and coding that*

*helps students
learn to create
results with*

*greater
specificity, and
accuracy.*

*Enabling
instructors to
easily adapt to*

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For

***the
postponement
of ICD-10-CM
and
ICD-10-PCS, the
new edition
provides
instruction on
the current
ICD-9-CM
concepts as well
as prepares
students for***

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Overview Coding
For

**ICD-10
guidelines.**

***Features more
than 30 case
studies with
patient record
activities for
practicing
completing the
UB-04 billing
form Important
Notice: Media
content***

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*referenced
within the*

product

description or

the product text

may not be

available in the

ebook version.

This practical

approach to

coding provides

a solid

foundation in

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basic coding principles with an emphasis on learning through realistic physician documentation. It prepares students to tackle any coding scenario, from

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*routine to
complex.*

*Chapters begin
with an
emphasis on
basic coding
documentation
and rules to
ensure correct
coding for
ICD-9-CM,
CPT-4, and
HCPCS.*

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For

***Progressively
difficult coding
exercises***

incorporate

newly learned

skills as readers

advance

through the

material. The

worktext

portion of the

book and the

companion

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For

***student
workbook
provide
progressively
difficult real-
world exercises
that build the
necessary skills
of identifying
the right codes
from real-world
medical charts.
Learning***

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*objectives,
numerous
examples,
chapter
reviews, and
coding
reference tools
throughout
provide the
necessary
learning tools
to fully master
basic and*

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For

***advanced
coding
concepts.***

Coding

***reference tools
make it easy to
find important
chapter points.***

***Basic ICD-9-CM
and CPT-4***

***coding concepts
are utilized,
simplifying the***

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***coding of
complex cases.***

***Practical Stop
and Practice
exercises help
you review and
build on what
you've learned.***

***Chapter review
exercises***

***include
questions***

ranging from

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***fill-in-the-blank
to practical
application.
Certification
review is made
easy by a
bulleted
summary of
important
points following
each chapter. A
Coding
Reference Tools***

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For

appendix provides perforated pages that may be removed for quick reference in the classroom or on the job. Text emphasis is on proper review of actual physician

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documentation and applying basic coding rules as important first steps in the coding process. This prepares the student to locate and determine the actual "diagnosis" and

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For

***"procedure" to
be coded from***

***the physician
documentation,
which is a***

***prerequisite
skill for***

***locating correct
codes and very
important for
compliance.***

***Expansion of
ICD-9-CM***

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For*
**information.
Sample patient
charts include
explanatory
notes. A
simulated
medical
practice
(identified as
Godfrey
Regional) lets
you study in a
real-world**

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For

**scenario. Key
Terms lists**

**highlight the
most important
vocabulary and
content. More
exercises!**

**Literate
programming is
a programming
methodology
that combines a
programming**

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***language with a
documentation
language,
making
programs more
easily
maintained
than programs
written only in
a high-level
language. A
literate
programmer is***

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an essayist who writes

programs for humans to understand.

When programs are written in the

recommended style they can be transformed into documents by a document

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***compiler and
into efficient
code by an
algebraic
compiler. This
anthology of
essays includes
Knuth's early
papers on
related topics
such as
structured
programming***

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as well as the
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that launched
literate
programming.
Many examples
are given,
including
excerpts from
the programs
for TeX and
METAFONT.**

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*The final essay
is an example of
CWEB, a system
for literate
programming in
C and related
languages.
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***Comprehensive
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Clinicians***

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Documentation
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the United
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Convention on a
Code of
Conduct for
Liner
Conferences*

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*Coding and
Documentation
Compliance for the
ICD and DSM
provides
professionals,
professors, and
students with a
logical and
practical way of
understanding a
difficult topic in*

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*healthcare for the
clinician: coding.*

*Established
professionals will
find the tools they
need to comply
with the ICD
series, HIPAA, and
integrated care
models.*

*Professors and
students will*

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appreciate having a systemized, standardized approach to teaching and learning the more complex aspects of ICD compliance. The interplay between the ICD and DSM manuals is also explicated

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in clear terms.

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The Risk

Adjustment Coding

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brings together

hard-to-find

information about

risk adjustment

(RA) coding and

hierarchical

condition

categories (HCCs)

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resource that

explains this

complex

reimbursement

methodology. Now

your organization

will have a guide

that provides both

the big picture and

the fine detail

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needed to

document, code,

and report

essential

information so that

accurate risk levels

are assigned and

appropriate

reimbursement

received.

The most

comprehensive

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*medical assisting
resource available,
Kinn's The Medical
Assistant, 11th
Edition provides
unparalleled
coverage of the
practical, real-
world
administrative and
clinical skills
essential to your*

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*success in health
care. Kinn's 11th
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current, reliable
content with
innovative support
tools to deliver an
engaging learning
experience and
help you
confidently
prepare for today's*

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*competitive job
market. Study
more effectively
with detailed
Learning
Objectives,
Vocabulary terms
and definitions,
and Connections
icons that link
important concepts
in the text to*

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For
*corresponding
exercises and
activities*

*throughout the
companion Evolve
Resources website
and Study Guide &
Procedure*

Checklist Manual.

*Apply what you
learn to realistic
administrative and*

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*clinical situations
through an Applied
Learning Approach
that integrates
case studies at the
beginning and end
of each chapter.
Master key skills
and clinical
procedures
through step-by-
step instructions*

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*and full-color
illustrations that
clarify techniques.
Confidently meet
national medical
assisting
standards with
clearly identified
objectives and
competencies
incorporated
throughout the*

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text. Sharpen your analytical skills and test your understanding of key concepts with critical thinking exercises.

Understand the importance of patient privacy with the information highlighted in

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examples.

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through medical

terminology audio

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more on a
completely revised
companion Evolve
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Coding and

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Compliance for the

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State of New York

*Widely considered one
of the best practical*

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Steve McConnell's
original CODE*

*COMPLETE has been
helping developers
write better software
for more than a
decade. Now this
classic book has been
fully updated and
revised with leading-
edge practices—and
hundreds of new code*

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*samples—illustrating
the art and science of
software construction.*

*Capturing the body of
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everyday commercial
practice, McConnell
synthesizes the most
effective techniques
and must-know
principles into clear,*

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experience level,*

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environment, or project

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inform and stimulate

your thinking—and

help you build the

highest quality code.

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techniques and

strategies that help you:

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*Design for minimum
complexity and*

maximum creativity

*Reap the benefits of
collaborative*

*development Apply
defensive*

programming

*techniques to reduce
and flush out errors*

*Exploit opportunities to
refactor—or*

evolve—code, and do

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it safely Use

construction practices

that are right-weight

for your project Debug

problems quickly and

effectively Resolve

critical construction

issues early and

correctly Build quality

into the beginning,

middle, and end of

your project

Risk adjustment is a

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For

method to offset the cost of providing health insurance for individuals--such as those with chronic health conditions--who represent a relatively high risk to insurers.

Under risk adjustment, an insurer who enrolls a greater-than-average number of high-risk individuals receives

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compensation to make up for extra costs associated with those enrollees. In the absence of risk adjustment policies, insurers have a financial incentive to deny coverage to higher risk individuals, and to write exclusions into policies or impose unaffordable premiums for

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individuals with pre-existing medical conditions. Risk adjustment aims to make comprehensive insurance available to all individuals, regardless of risk, and to allow plans that insure sicker-than-average populations to charge similar average premiums as plans that

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insure relatively healthy populations. The risk adjustment model enacted under the Affordable Care Act (ACA, or "Obamacare") is budget neutral. Total payments to insurers do not increase. Rather, insurers covering a relatively greater

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number of healthy individuals must contribute to a risk adjustment pool that funds additional payments to those insurers covering a larger portion of high-risk individuals. Risk adjustment models typically use an individual's demographic data

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(age, sex, etc.) and diagnoses to determine a risk score. The risk score is a relative measure of the probable costs to insure the individual. To cite a simple example, an individual with diabetes will have a higher risk score (his or her predicted healthcare costs will be

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*greater) than an
otherwise statistically*

identical individual

without diabetes. Older

individuals typically

have a higher risk

score than younger

individuals, and those

individuals with a

personal or family

history of certain

conditions may garner

a higher risk score than

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individuals without such a history. There are several risk

adjustment models. The

Centers for Medicare & Medicaid Service

(CMS) risk adjustment model uses the

Hierarchical Condition Category (HCC)

method to calculate risk scores. This method

ranks diagnoses into

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categories that represent conditions

with similar cost

patterns. Higher

categories represent

higher predicted

healthcare costs. For

example, diabetes with

complications is ranked

"higher" (resulting in a

higher risk score and

thus greater expected

healthcare costs) than

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diabetes without complications. An individual may be included in more than one HCC. Diagnoses are reported using ICD-10-CM codes Not every diagnosis will "risk adjust," or map to an HCC. Acute illness and injury are not reliably predictive of ongoing costs, as are

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long-term conditions such as diabetes, chronic obstructive pulmonary disease (COPD), chronic heart failure (CHF), multiple sclerosis (MS), and chronic hepatitis; however, some risk adjustment models may include severe conditions relevant to a young demographics

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(such as pregnancy) and congenital abnormalities. All risk adjustment models depend on complete and accurate reporting of patient data. CMS requires that a qualified healthcare provider identify all chronic conditions and severe diagnoses for each patient, to

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substantiate a "base year" health profile for those individuals.

Documentation in the medical record must support the presence of the condition and indicate the provider's assessment and plan for management of the condition. This must occur at least once each calendar year for

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CMS to recognize that the individual continues to have the condition.

This information is used to predict costs in the following year. As such, incorrect or non-specific diagnoses can affect not only patient care and outcomes, but also reimbursement for that care, going forward.

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the Simulation of
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Three Dimensions*

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*The Rust Programming
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how to create documentation that evolves throughout your entire design and development lifecycle. Through patterns, clarifying illustrations, and concrete examples, Cyrille Martraire demonstrates how to use well-crafted artifacts and automation to

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*dramatically improve
the value of*

*documentation at
minimal extra cost.*

*Whatever your
domain, language, or
technologies, you
don't have to choose
between working
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comprehensive, high-
quality documentation:
you can have both. .*

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available knowledge,
and make it useful
through living curation

- Automate the creation of documentation and diagrams that evolve as knowledge changes
- Use development tools to refactor documentation
- Leverage documentation to

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improve software designs · Introduce living documentation to new and legacy environments

Risk-adjustment practices consider chronic diseases as predictors of future health care needs and expenses. Correct and detailed documentation and compliant diagnosis

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*coding are critical for
proper risk*

*adjustment. Risk
Adjustment*

*Documentation &
Coding, 2nd Edition
provides: Risk-
adjustment*

*parameters to improve
documentation related
to severity of illness
and chronic diseases.*

*Code abstraction
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recommendations to improve diagnostic coding accuracy without causing financial harm to the practice or health facility. Chronic disease ICD-10-CM coding summaries for quick reference and study. The impact of risk-adjustment coding (hierarchical condition category

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(HCC) coding) on a practice should not be underestimated: More than 75 million Americans are enrolled in risk-adjusted insurance plans. This population represents more than 20% of those insured in the United States. Insurance risk pools under the Affordable Care Act include risk

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adjustment. CMS has proposed expanding audits on risk-adjustment coding.

FEATURES AND

BENEFITS Five

chapters delivering an overview of risk adjustment, common administrative errors, best practices, and guidance for development of internal risk-

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adjustment coding

policies. Ten chronic

disease ICD-10-CM

coding summaries for

quick reference and

study. Two

appendices offering

mappings and tabular

information of

ICD-10-CM codes that

risk-adjust to HCCs

and RxHCCs.

Learning and design

features: Vocabulary

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terms highlighted within the text and defined at the bottom of the page.

"Advice/Alert Notes" that highlight important coding and documentation advice from federal regulatory sources. "Sidebars" that provide derivative story and additional information, such as "Coding Tips" that

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guide coders with practical advice from

sources like AHA's

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Examples" that

underscore key

documentation issues

for risk adjustment

"Clinical Coding

Examples" that

provide snippets or

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*full encounter notes
and codes to illustrate
risk-adjustment
coding and
documentation
concepts
"Documentation tips"
that highlight
recommendations to
physicians regarding
what should be
included in the
medical record or how
ICD-10-CM may*

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classify specific terms
"Examples" that
explain difficult
concepts and promote
understanding of
those concepts as
they relate to a
section "FYI" call outs
that provide quick
facts "Abstract &
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that test diagnosis
abstraction and
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(exclusive to Chapter 4) Extensive end-of-chapter "Evaluate Your Understanding" sections that include multiple-choice questions, true-or-false questions, audit and Internet-based exercises. Two downloadable course tests and slide presentations for each chapter. Exclusive

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content for academic educators: A test bank containing 100 questions and a mock risk-adjustment certification exam with 150 questions. Looks at the principles and clean code, includes case studies showcasing the practices of writing clean code, and contains a list of

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heuristics and "smells" accumulated from the process of writing clean code.

*Clean Code
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Informational
Hearings on Issues
Facing California's
Wine Industry
Annotated with
Rulings of the High
Courts in India Up to*

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the journeyman

Pythonista to true

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expertise. More than any other language, Python was created with the philosophy of simplicity and parsimony. Now 25 years old, Python has become the primary or secondary language (after SQL) for many business users. With popularity comes diversity—and

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possibly dilution. This guide, collaboratively written by over a hundred members of the Python community, describes best practices currently used by package and application developers. Unlike other books for this audience, The Hitchhiker ' s Guide

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is light on reusable code and heavier on design philosophy, directing the reader to excellent sources that already exist.

Improving documentation is no easy task CDI professionals have never had one easy-to-read, inclusive reference to help them implement a

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CDI program, understand the fundamentals of ICD-9-CM coding, query physicians, and encourage

interdepartmental communication. In theory, physicians should document their entire thought process, including ruling conditions in and out. But it's not

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that simple, and in light of MS-DRGs, it requires significant physician education and retraining. You need a blueprint for success.. Your blueprint has arrived! At last, here is a guide for CDI specialists. The Clinical Documentation Improvement Specialist's Handbook

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is your essential partner for creating a CDI program, staffing your program, querying physicians, and understanding how documentation affects code selection and data quality As a CDI specialist you need answers now In light of Medicare Severity DRGs (MS-DRG), detailed

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important and more
demanding than ever.

This handbook will
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to gather the right
information the first
time--and every time

Author Colleen Garry,

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