

National Correct Coding Initiative Reference Tools — Version 18.3

This edition incorporates all code changes instituted by the Centers for Medicare and Medicaid Services (CMS) through December 31, 2012. To ensure full and appropriate compensation when filing claims from October 1- December 31, 2012, providers should use the codes contained in this new version. You can subscribe to any of the reference tools listed here through the National Technical Information Service, CMS's authorized distributor of the manual.

Each chapter is organized by CPT coding for medical procedures and services, except for Chapter I which covers general correct coding policies. Chapter I and the introduction to the manual are also included in each chapter service to make those services more practical to use. All chapters and the manual also include HCPCS Level II codes under the Part B Carriers' jurisdiction.

Note: *Physicians' Current Procedural Terminology* offers a complete listing of descriptive terms to all codes. To order this book, call the American Medical Association at 1-800-621-8335.

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