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Medical Coding Guidance

Healthcare

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This guide explains what the tool produces, how to use the output, and what to watch for. The actual output (draft/report) is generated on the tool page.

Background

Provides educational ICD-10/CPT coding guidance for a procedure and diagnoses — suggested codes with notes, documentation requirements and common denial reasons. A coding aid, not a substitute for a certified coder. For just a diagnosis code use the ICD-10 Code Finder, and for a procedure code use the CPT / Procedure Code Helper.

Purpose of this tool & output

Describe the procedure and diagnosis for ICD-10 and CPT code suggestions

How the output is used

Use the guidance to pick likely ICD-10 and CPT codes for a procedure and diagnosis, then confirm with a coder.

Important cautions

Educational coding guidance only. Final coding must be performed by a certified medical coder (CPC/CCS) against the actual medical record.

Companion documents

- Coding Denial Analyzer
- Superbill Generator

This is AI-assisted guidance. Verify with a qualified professional before any binding decision. Fees, authorities and processes vary by state and change over time — confirm with your state authority.