Intravenous Infusion for Hydration

The objective of this article is to examine the coding of hydration with CPT® codes 96360, Intravenous infusion, hydration; initial, 31 minutes to 1 hour, and 96361, Intravenous infusion, hydration; each additional hour.

The purpose of hydration intravenous (IV) infusion is to hydrate. These codes were created to report instances when a patient requires rehydration with IV infusion of fluids. The health record should include documentation to support infusion services for dehydration or fluid loss, including relevant diagnosis, signs and symptoms, and abnormal lab values. Relevant signs and symptoms might include lack of fluid intake, excessive losses of fluid, dry skin, dizziness, and/or other signs and symptoms.

The Coding and Quality Measures Brief

This brief identifies the technical specifications of Perinatal Care Measure PC-06 Unexpected Complications in Term Newborns. PC-06 is one of The Joint Commission's (TJC) National Quality Measures. This brief will analyze the impact of coding on the results for this measure, highlighting relevant coding guidelines and conventions that relate to accurate code results for this measure.

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### Happening at Conference: **The Clinical Coding Meeting**

If you’re looking for cutting-edge coding education, peer-to-peer collaboration, and engaging discussions, look no further than AHIMA’s Clinical Coding Meeting. Attendees will gain a unique blend of education covering CDI, revenue cycle, professional services, facility services, coding updates, compliance, auditing, and innovation. All full, advanced registrations will receive a free copy of AHIMA’s gold standard 2020 ICD-10 Code Book of your choice.

### Try AHIMA’s Code-Check® Service

Does your organization need expert coding support? With **AHIMA’s Code-Check Service**, you can get answers for your tough ICD-10-CM, ICD-10-PCS, CPT, or HCPCS coding questions along with cited documentation, rationale, and expert guidance straight from a trusted leader in health information. Purchase as an individual or subscribe as an organization. Try a single question for just $40.

### AHCA/AHIMA ICD-10 Training for PDPM

Accurate coding in the new Patient Driven Payment Model (PDPM) is essential. Prepare your staff now to ensure readiness and protect your bottom line. AHIMA has partnered with the American Health Care Association (AHCA) to offer two targeted trainings.

**Sign up now directly through the AHCA store.** AHIMA members will receive member discounted pricing when registering using the following discount codes:

- **AHCA/AHIMA ICD-10 Training for PDPM – Coder**
  Discount Code: **CoderAHIMAMember**

- **AHCA/AHIMA ICD-10 Training for PDPM – Non-Coder**
  Discount Code: **NoncoderAHIMAMember**

### Prepare Now with FY 2020 Code Update Webinars

Annual code updates are here and scheduled for implementation starting October 1. Get an overview of the annual code changes, including ICD-10-CM and ICD-10-PCS, with **AHIMA’s code update webinars**. Learn how to interpret the guidelines critical to timely reimbursement and accurate reporting, contributing to effective revenue cycle management, and your own professional development goals. Specialty topics include: CDI, Long-term Care, Auditors, Inpatient Rehab Facilities, and Physicians.
JOIN THE CONVERSATION ON ENGAGE

Discuss Your Coding Conundrums

The Coding, Classification, and Reimbursement community in AHIMA's Engage Online Communities is like a virtual water cooler, where you can talk about coding-related topics with your colleagues across the country. Post questions, share your expertise, and learn from each other.

The link below will take you directly to the community home, where you can browse the current list of topics being discussed.

Join the discussion

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Purchase the July 2019 CodeWrite quiz by searching for it in the AHIMA Store. Passing the quiz will earn you one continuing education (CE) credit. You will be directed to the quiz page after completing your purchase.

INTERESTED IN ADDING 'AUTHOR' TO YOUR LIST OF ACCOMPLISHMENTS? AHIMA's CodeWrite and the Journal of AHIMA are seeking authors to write on coding topics. Log in to Engage as an AHIMA member and learn more.

ABOUT CODEWRITE

Coding scenarios are often used in articles published in the monthly CodeWrite newsletter. The purpose of including such scenarios in these articles is to:

- Illustrate correct coding in ICD-10-CM, ICD-10-PCS, CPT, and HCPCS
- Apply coding principles and guidelines
- Apply concepts of pathophysiology, pharmacology, or medical terminology
- Practice analysis of information from the health record as the source document

The articles published in CodeWrite do not introduce new official coding advice or sequencing instruction, and the articles are not considered authoritative sources of coding advice. Rather, the authors of CodeWrite articles inform readers about where to find relevant coding advice and describe their experiences in applying coding rules, conventions, and guidelines from authoritative sources.

Interested in writing for CodeWrite? Learn about the submission process and guidelines.