

EXAM DOMAINS — QUESTION WEIGHTS

Domain	Q~	Priority
Surgery CPT (all body systems)	36	Must Master
Medical Cases (operative records)	10	Must Master
Radiology / Pathology / Medicine	18	High
Coding Guidelines & Modifiers	7	High
Medical Terminology & Anatomy	8	Medium
E&M; Coding	6	High
ICD-10-CM Diagnosis Codes	5	High
Anesthesia + HCPCS Level II	10	Medium

★ **Tip:** Surgery CPT = 36% of the exam. Master it first.

TOP CPT MODIFIERS

Mod	Name	Use When
-25	Significant E&M; same day	E&M; distinct from procedure
-51	Multiple procedures	2nd procedure same day/physician
-59	Distinct procedural service	Override NCCI bundling (w/docs)
-22	Increased complexity	Substantially more difficult
-57	Decision for surgery	E&M; day of/before major surgery
-26	Professional component	Physician interpretation only
-TC	Technical component	Equipment & staff — no read
-50	Bilateral procedure	Same procedure both sides
-52	Reduced services	Procedure partially reduced
-53	Discontinued procedure	Stopped before anesthesia
-58	Staged/related procedure	During global period — planned
-78	Unplanned return to OR	Related complication in global period
-79	Unrelated procedure	Different procedure, global period
-80	Assistant surgeon	Second surgeon assists primary

! Warning: Modifier -59 needs documentation. Never use as a default bundling bypass.

SURGERY CPT RANGES BY BODY SYSTEM

Body System	CPT Range	Common Topics
Integumentary	10000–19999	Wound repair, grafts, lesions
Musculoskeletal	20000–29999	Fractures, joints, arthroscopy
Respiratory	30000–32999	Bronchoscopy, thoracotomy
Cardiovascular	33000–37999	Heart valves, bypass, vascular
Hemic & Lymphatic	38000–38999	Spleen, lymph nodes
Digestive	40000–49999	Endoscopy, hernia, colostomy
Urinary	50000–53999	Cystoscopy, nephrectomy
Male Genital	54000–55899	Prostate, testes
Female Genital	56000–58999	Hysterectomy, laparoscopy
Nervous System	61000–64999	Spine surgery, nerve blocks
Eye & Ocular	65000–68899	Cataract, retinal procedures
Auditory	69000–69979	Ear procedures

★ **Tip:** Tab your CPT book at each body system before exam day.

E&M; — OFFICE/OUTPATIENT VISIT CODES

Code	Patient	MDM Level	Time
99202	New	Straightforward	15–29 min
99203	New	Low	30–44 min
99204	New	Moderate	45–59 min
99205	New	High	60–74 min
99211	Est.	N/A	Minimal
99212	Est.	Straightforward	10–19 min
99213	Est.	Low	20–29 min
99214	Est.	Moderate	30–39 min
99215	Est.	High	40–54 min

★ **Tip:** MDM level = 2 of 3: problems complexity, data complexity, risk.

ICD-10-CM SEQUENCING RULES

Rule	What to Do
Combination codes	One code = two conditions. Do not code both separately.
Acute + chronic	Sequence acute first. Add chronic as secondary.
Signs & symptoms	Do NOT code if confirmed diagnosis is documented.
Z-codes	Screenings, history, status. Can be principal or secondary.
External cause codes	NEVER principal diagnosis. Always secondary.
Sequela (late effects)	Residual condition first, then sequela code.
Uncertain — inpatient	Code AS IF confirmed (probable/suspected/likely).
Uncertain — outpatient	Code the SYMPTOM. Never code uncertain diagnosis.

! Key: Inpatient uncertain Dx = code it. Outpatient uncertain Dx = code the symptom.

ANESTHESIA FORMULA

**(Base Units + Time Units + Modifying Units)
x Conversion Factor = Total Payment**

Time units: 1 unit per 15 min (some payers: per 10 min)
Base units: Assigned to each anesthesia CPT code

Code	Qualifying Circumstance	+Units
99100	Extreme age (under 1 yr or over 70)	+1
99116	Utilization of controlled hypotension	+5
99135	Controlled hypotension	+5
99140	Emergency conditions	+2

EXAM-DAY STRATEGY

Strategy	Detail
Pace	2.4 min per question (100 Qs / 240 min)
Cases	Budget 20–30 min for the 10 medical case questions
Stuck?	Mark it and move on — return at end with remaining time
No penalty	Always answer every question — no points lost for wrong answers
Stem first	Read the question before the clinical note or op report
Eliminate	Rule out obviously wrong answers before picking from remainder
Tabs — CPT	E&M; / Anesthesia / Surgery / Radiology / Pathology / Medicine
Tabs — ICD	Tab at main chapter dividers: A, B, C... through Z chapters
Highlight	Mark CPT instructional notes — "Do not report X with Y"
Modifiers pg	Annotate modifier page — referenced across all surgery Qs

EXAM QUICK FACTS

Item	Detail
Questions	100 total
Time allowed	4 hours (240 minutes)
Passing score	70% (70 of 100 correct)
Format	Open book — CPT, ICD-10-CM, HCPCS Level II allowed
No penalty	Wrong answers do not deduct points
Credential	CPC — Certified Professional Coder (AAPC)
Renewal	Every 2 years — 36 CEUs required

FREE RESOURCES — CLEARCPC.COM

Resource	URL
CPC Exam Syllabus	clearcpc.com/cpc-syllabus/
90-Day Study Plan	clearcpc.com/cpc-study-plan/
Practice Quiz (25 Qs)	clearcpc.com/cpc-quiz/
Full Mock Exam	clearcpc.com/mock-exam/
All Free Downloads	clearcpc.com/cpc-resources/
60+ Study Articles	clearcpc.com/blog/