

Medicare Claims Processing Chapter 6

CCH Medicare Explained 2008CPT, 1998Taking Action Against Clinician BurnoutPublic Law and Public AdministrationStudy of Physician Reimbursement Under Medicare and MedicaidMedicare Vulnerabilities: Payments for Claims Tied to Deceased DoctorsWomen's Health in Physical TherapyThe Spirit Catches You and You Fall DownStep-by-step Medical Coding 2006Health Insurance Today - E-BookMaster Medicare GuideThe How-to Manual for Rehab DocumentationModel Rules of Professional ConductMDS 3.0 Rai User's ManualNursing HomesMedicare and Medicaid GuideIntrathecal Drug Delivery for Pain and Spasticity E-BookMedical Billing & Coding For DummiesCoding for Chest Medicine 2009Medicare Explained 2006An American SicknessRegistries for Evaluating Patient OutcomesCpt 1999Tax, Estate & Financial Planning for the ElderlyObservation ServicesSAS Programming with Medicare Administrative DataTransitioning into Hospital Based PracticePrinciples of Healthcare ReimbursementStep-by-Step Medical Coding, 2013 Edition - E-BookMedical Insurance for Pharmacy TechniciansHCPCS Level II Expert 2020Medicare Explained 2007NTIS AlertPhysicians Fee & Coding GuideMedicare Laboratory Payment PolicyFrom Patient to PaymentLegal and Ethical Aspects of Health Information ManagementSocial Security Disability ClaimsAdministrative Healthcare DataUnderstanding Health Insurance: A Guide to Billing and Reimbursement

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Taking Action Against Clinician Burnout

"An award-winning New York Times reporter Dr. Elisabeth Rosenthal reveals the dangerous, expensive, and dysfunctional American healthcare system, and tells us exactly what we can do to solve its myriad of problems. It is well documented that our healthcare system has grave problems, but how, in only a matter of decades, did things get this bad? Dr. Elisabeth Rosenthal doesn't just explain the symptoms; she diagnoses and treats the disease itself. Rosenthal spells out in clear and practical terms exactly how to decode medical doublespeak, avoid the pitfalls of the pharmaceuticals racket, and get the care you and your family deserve. She takes you inside the doctor-patient relationship, explaining step by step the workings of a profession sorely lacking transparency. This is about what we can do, as individual patients, both to navigate a byzantine system and also to demand far-reaching reform. Breaking down the monolithic business into its individual industries--the hospitals, doctors, insurance companies, drug manufacturers--that

together constitute our healthcare system, Rosenthal tells the story of the history of American medicine as never before. The situation is far worse than we think, and it has become like that much more recently than we realize. Hospitals, which are managed by business executives, behave like predatory lenders, hounding patients and seizing their homes. Research charities are in bed with big pharmaceutical companies, which surreptitiously profit from the donations made by working people. Americans are dying from routine medical conditions when affordable and straightforward solutions exist. Dr. Rosenthal explains for the first time how various social and financial incentives have encouraged a disastrous and immoral system to spring up organically in a shockingly short span of time. The system is in tatters, but we can fight back. An American Sickness is the frontline defense against a healthcare system that no longer has our well-being at heart"--

Public Law and Public Administration

The Model Rules of Professional Conduct provides an up-to-date resource for information on legal ethics. Federal, state and local courts in all jurisdictions look to the Rules for guidance in solving lawyer malpractice cases, disciplinary actions, disqualification issues, sanctions questions and much more. In this volume, black-letter Rules of Professional Conduct are followed by numbered Comments that explain each Rule's purpose and provide suggestions for its practical application. The Rules will help you identify proper conduct in a variety of given situations,

review those instances where discretionary action is possible, and define the nature of the relationship between you and your clients, colleagues and the courts.

Study of Physician Reimbursement Under Medicare and Medicaid

Witnesses: Herb Kuhn, Centers for Medicare and Medicaid Services; Robert Vito, Regional Inspector Gen., Dept. of Health and Human Services (HHS); William E. Gray, Social Security Admin. (SSA). Also includes Permanent Subcomm. on Investigations Staff Report, ¿Medicare Vulnerabilities: Payments for Claims Tied to Deceased Doctors.¿

Medicare Vulnerabilities: Payments for Claims Tied to Deceased Doctors

Intrathecal Drug Delivery for Pain and Spasticity - a volume in the new Interventional and Neuromodulatory Techniques for Pain Management series - presents state-of-the-art guidance on the full range of intrathecal drug delivery techniques performed today. Asokumar Buvanendran, MD and Sudhir Diwan, MD, offer expert advice on a variety of procedures to treat chronic non-malignant pain, cancer pain, and spasticity. Comprehensive, evidence-based coverage on selecting

and performing these techniques - as well as weighing relative risks and complications - helps you ensure optimum outcomes. Understand the rationale and scientific evidence behind intrathecal drug delivery techniques and master their execution. Optimize outcomes, reduce complications, and minimize risks by adhering to current, evidence-based practice guidelines. Apply the newest techniques in intrathecal pump placement, cancer pain management, use of baclofen pumps, and compounding drugs. Quickly find the information you need in a user-friendly format with strictly templated chapters supplemented with illustrative line drawings, images, and treatment algorithms.

Women's Health in Physical Therapy

The Spirit Catches You and You Fall Down

Step-by-step Medical Coding 2006

This book provides a framework and practical guidelines for managing women's health issues within the practice of physical therapy. It enables students to develop and implement customized patient care plans to deal with a broad range of

disorders and health issues that either primarily affect women or manifest themselves differently in women. The book features a team of expert authors whose advice is based not only on a thorough investigation of the evidence, but also on their own firsthand experience as physical therapists specializing in women's health issues.

Health Insurance Today - E-Book

Understanding Health Insurance, Eleventh Edition, is the essential learning tool you need when preparing for a career in medical insurance billing. This comprehensive and easy-to-understand text is fully-updated with the latest code sets and guidelines, and covers important topics in the field like managed care, legal and regulatory issues, coding systems, reimbursement methods, medical necessity, and common health insurance plans. The eleventh edition has been updated to include new legislation that affects healthcare, ICD-10-CM coding, implementing the electronic health record, the Medical Integrity Program (MIP), medical review process, and more. The practice exercises in each chapter provide plenty of review, and the accompanying workbook—sold separately—provides even more application-based assignments and additional case studies for reinforcement. Includes free online StudyWARE™ software that allows you to test your knowledge, free online SimClaim™ CMS-1500 claims completion software, and free-trial access to Ingenix's EncoderPro.com—Expert encoder software. Important

Notice: Media content referenced within the product description or the product text may not be available in the ebook version.

Master Medicare Guide

The How-to Manual for Rehab Documentation

Principles of Healthcare Reimbursement integrates information about all US healthcare payment systems into one authoritative resource. Boost your understanding of the complex financial systems in today's healthcare environment, including the basics of health insurance, public funding programs, managed care contracting, and how services are paid. Gain clear insight into how reimbursement systems have made an impact on providers and payers, consumers, public policy makers, and the development of classification and information technology systems over the years.

Model Rules of Professional Conduct

The definitive guide to starting a successful career in medical billing and coding With the healthcare sector growing at breakneck speed—it's currently the largest

employment sector in the U.S. and expanding fast—medical billing and coding specialists are more essential than ever. These critical experts, also known as medical records and health information technicians, keep systems working smoothly by ensuring patient billing and insurance data are accurately and efficiently administered. This updated edition provides everything you need to begin—and then excel in—your chosen career. From finding the right study course and the latest certification requirements to industry standard practices and insider tips for dealing with government agencies and insurance companies, *Medical Billing & Coding For Dummies* has you completely covered. Find out about the flexible employment options available and how to qualify Understand the latest updates to the ICD-10 Get familiar with ethical and legal issues Discover ways to stay competitive and get ahead The prognosis is good—get this book today and set yourself up with the perfect prescription for a bright, secure, and financially healthy future!

MDS 3.0 Rai User's Manual

Nursing Homes

Medicare and Medicaid Guide

SAS Programming with Medicare Administrative Data is the most comprehensive resource available for using Medicare data with SAS. This book teaches you how to access Medicare data and, more importantly, how to apply this data to your research. Knowing how to use Medicare data to answer common research and business questions is a critical skill for many SAS users. Due to its complexity, Medicare data requires specific programming knowledge in order to be applied accurately. Programmers need to understand the Medicare program in order to interpret and utilize its data. With this book, you'll learn the entire process of programming with Medicare data—from obtaining access to data; to measuring cost, utilization, and quality; to overcoming common challenges. Each chapter includes exercises that challenge you to apply concepts to real-world programming tasks. SAS Programming with Medicare Administrative Data offers beginners a programming project template to follow from beginning to end. It also includes more complex questions and discussions that are appropriate for advanced users. Matthew Gillingham has created a book that is both a foundation for programmers new to Medicare data and a comprehensive reference for experienced programmers. This book is part of the SAS Press program.

Intrathecal Drug Delivery for Pain and Spasticity E-Book

Medical Billing & Coding For Dummies

The first and still the very best text on elder law, Tax, Estate & Financial Planning for the Elderly covers every aspect of elder law practice. Topics covered include: • Health (Medicare, Medicaid, advance health care directives, long-term care, nursing homes) • Financial (income, estate and gift taxes, pensions, financial planning, estate planning, property management) • Government Benefits (Social Security, SSI, veterans' benefits) • Personal (housing, elder abuse, guardianship) • Practical Advice for the Attorney (client relationships, ethical considerations) Rely on expert legal analysis to explain all the significant issues and resolve the intricate problems that arise in this evolving area of practice. Professional guidance from top experts Rebecca C. Morgan, past President of the National Academy of Elder Law Attorneys, and David M. English, a leading estate planning authority, helps you anticipate your clients' requirements and plan for their future. Every chapter begins with common client questions, followed by comprehensive legal analysis, including detailed planning notes, examples, and practical advice. This volume analyzes all relevant case law and legislation and explains the numerous and often complex administrative steps required to achieve the client's goals. The volume is national in scope, and includes state-specific discussions of significant deviations from the federal rules. Convenient cross-references to Tax, Estate & Financial Planning for the Elderly: Forms & Practice, the companion forms set, lead

to sample forms and checklists for every practice need. Tax, Estate & Financial Planning for the Elderly offers simple, direct guidance through the myriad regulations, forms, and agencies encountered in an elder law practice. Expert commentary offers easy-to-find, easy-to-understand answers to common elder law questions, and practice notes highlight key practice tips.

Coding for Chest Medicine 2009

Medicare Explained 2006

This trusted text provides students who plan to enter government service and those engaged in mid-career education for public administration with a readable and interesting treatment of the field of administrative law, and more broadly of the range of public law that governs public management. The book is based on the premise that there is a complex, ongoing interaction between law and administration in the United States , and that administrative law problems are not only legal but also administrative and political. Recognizing that attacks on rules and administrative law processes over the last two decades have made this a difficult time for public managers and have resulted in a variety of new state and executive orders, the authors explain the sources, operation, and consequences of

such changes. The book takes the role of public contracting seriously throughout and engages contemporary challenges that arise in governance, including in nonprofit and for-profit organizations working with government.

An American Sickness

Registries for Evaluating Patient Outcomes

Observation services insight from the industry's top expert Here is the essential guide for understanding observation services and the most recent regulatory guidance for inpatient admission. Author Deborah K. Hale, CCS, CCDS, uses case studies and real-life examples to examine regulatory guidelines and fiscal management, and also explains how to manage multiple payers and find an easier way to achieve reimbursement for observation services. You will also learn about the roles of nurses and physicians in observation services and how to foster an effective team approach for compliance and appropriate reimbursement. With your copy of Observation Services, Third Edition, you'll learn how to: - Assign proper level of care using real-life case studies - Implement an effective and compliant policy in accordance with the Medicare rules for observation services and instruction - Implement a payer-specific policy in compliance with the multiple

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payers' rules for observation services and instruction - Determine improvement opportunities and understand how to use internal and external data - Decipher the dos and don'ts for Condition Code 44 What's new in the Third Edition? - CMS and American Hospital Association interaction regarding observation use - Updated guidelines on the process for use of Condition Code 44 and proper billing - The 2011 version of ST PEPPER - New and improved strategies for accurate billing - New examples of provider liable claims - New CMS instructions required for payment - New policy and procedure examples and case studies Topics covered include: - Determining the right level of care - The consequences of incorrect level of care determination - Correcting level of care determinations - Condition Code 44 - Using data to determine improvement opportunities - The role of the physician advisor - Strategies for achieving accurate reimbursement - The Medicare appeals process Downloadable tools include: - Appeal letter templates - Level of care decision-making flowchart - Revised PEPPER report example - Observation pocket card reference - UR physician documentation templates for Condition Code 44 - Transmittal 299 Condition Code 44 - MLN Matters Clarification Condition Code 44 SE0622 Here are just a few of the tools and forms you'll find in Observation Services, Third Edition. - Appeal letter templates and sample reports - Site of service decision-making flowchart - Non-physician review worksheet - Transmittal 299 Condition Code 44 - MLN Matters Clarification Condition Code 44 SE0622 - Top volume Medicare MS-DRGs You'll receive instructions to download these and all of the forms and tools so you can use them right away!

Cpt 1999

Tax, Estate & Financial Planning for the Elderly

Explains the source and content of administrative healthcare data, which is the product of financial reimbursement for healthcare services. The book integrates the business knowledge of healthcare data with practical and pertinent case studies as shown in SAS Enterprise Guide.

Observation Services

Master the complexities of health insurance with this easy-to-understand guide! Health Insurance Today: A Practical Approach, 7th Edition provides a solid foundation in basics such as the types and sources of health insurance, the submission of claims, and the ethical and legal issues surrounding insurance. It follows the claims process from billing and coding to reimbursement procedures, with realistic practice on the Evolve website. This edition adds coverage of the latest advances and issues in health insurance, including EHRs, Medicare, and other types of carriers. Written by Medical Assisting educators Janet Beik and Julie Pepper, this resource prepares you for a successful career as a health insurance

professional. What Did You Learn? review questions, Imagine This! scenarios, and Stop and Think exercises ensure that you understand the material, can apply it to real-life situations, and develop critical thinking skills. Clear, attainable learning objectives highlight the most important information in each chapter. CMS-1500 software with case studies on the Evolve companion website provides hands-on practice with filling in a CMS-1500 form electronically. UNIQUE! UB-04 software with case studies on Evolve provides hands-on practice with filling in UB-04 forms electronically. UNIQUE! SimChart® for the Medical Office (SCMO) cases on Evolve give you real-world practice in an EHR environment. HIPAA Tips emphasize the importance of privacy and of following government rules and regulations. Direct, conversational writing style makes it easier to learn and remember the material. End-of-chapter summaries relate to the chapter-opening learning objectives, provide a thorough review of key content, and allow you to quickly find information for further review. Chapter review questions on Evolve help you assess your comprehension of key concepts NEW and UNIQUE! Patient's Point of View boxes enable you to imagine yourself on the other side of the desk. NEW and UNIQUE! Opening and closing chapter scenarios present on-the-job challenges that must be resolved using critical thinking skills. NEW! End-of-chapter review questions ensure that you can understand and apply the material. NEW! Clear explanations show how electronic technology is used in patient verification, electronic claims, and claims follow-up. NEW! Coverage of the Affordable Care Act introduces new and innovative ways that modifications to the ACA allow people to acquire healthcare

coverage. NEW! Updated information addresses all health insurance topics, including key topics like Medicare and Electronic Health Records. NEW! More emphasis on electronic claims submission has been added. NEW! Updated figures, graphs, and tables summarize the latest health insurance information.

SAS Programming with Medicare Administrative Data

Take your first step toward a successful career in medical coding with comprehensive coverage from the most trusted source in the field! Step-by-Step Medical Coding, 2013 Edition is the practical, easy-to-use resource that shows you exactly how to code using all of today's coding systems. In-depth, step-by-step explanations of essential coding concepts are followed by practice exercises to reinforce your understanding. In addition to coverage of reimbursement, ICD-9-CM, CPT, HCPCS, and inpatient coding, the 2013 edition offers complete coverage of the ICD-10-CM diagnosis coding system in preparation for the eventual transition. No other text on the market so thoroughly prepares you for all coding sets in one source! Dual coding in Units 4 and 5 (where both ICD-10 and ICD-9 answers are provided for every exercise, chapter review, and workbook question) ensures you can code using the systems of both today and tomorrow. Complete coverage of the new ICD-10 code set in Unit 2 prepares you for the eventual transition from ICD-9 to ICD-10. Official Guidelines for Coding and Reporting boxes in Units 2, 3, and 5 present the official outpatient and inpatient guidelines alongside text discussions.

Concrete "real-life" coding examples help you apply important coding principles and practices to actual scenarios from the field. Over 500 total illustrations of medical procedures or conditions help you understand the services being coded. Four coding question variations develop your coding ability and critical thinking skills: One answer blank for coding questions that require a one-code answer
Multiple answer blanks for coding questions that require a multiple-code answer
Identifiers next to the answer blank(s) to guide you through the most difficult coding scenarios
Answer blanks with a preceding symbol (3 interlocking circles) indicates that the user must decide the number of codes necessary to correctly answer the question
In-text exercises, Quick Checks, and Toolbox features reinforce coding rules and concepts, emphasize key information, and test your retention and understanding. From the Trenches, Coding Shots, Stop!, Caution!, Check This Out!, and CMS Rules boxes offer valuable, up-to-date tips and advice for working in today's medical coding field. Coder's Index makes it easy to instantly locate specific codes. Practice activities on the companion Evolve website reinforce key concepts from the text. Updated content presents the latest coding information so you can practice with the most current information available.

Transitioning into Hospital Based Practice

The 2015 Master Medicare Guide is packed with timely and useful information to help you stay on top of one of the most complex programs administered by the

federal government. The 2015 Edition includes: Over 500 explanation summaries for all aspects of the Medicare program coverage, eligibility, reimbursement, fraud and abuse, and administration Highlights of the Protecting Access to Medicare Act of 2014 (P.L. 113-93) and the Improving Medicare Post-Acute Care Transformation Act of 2014 (P.L. 113-185)"; the most recent physician fee schedule reimbursement fix; A focus on the continuing implementation of the Affordable Care Act as it relates to Medicare, including accountable care organizations and a tighter link between the quality of health care and Medicare reimbursement All discussions include cross-references to relevant laws, regulations, CMS manual sections, administrative and judicial decisions, and more!

Principles of Healthcare Reimbursement

This practical text-workbook introduces students step-by-step to the basic functions related to processing medical insurance claims and provides extensive practice with the universal medical insurance claim form, the HCFA-1500. New chapters include dental insurance and electronic media claims. Manual and computerized HCFA form tutorial simulations provide real-world experience.

Step-by-Step Medical Coding, 2013 Edition - E-Book

Medical Insurance for Pharmacy Technicians

Clinical laboratory tests play an integral role in helping physicians diagnose and treat patients. New developments in laboratory technology offer the prospect of improvements in diagnosis and care, but will place an increased burden on the payment system. Medicare, the federal program providing coverage of health-care services for the elderly and disabled, is the largest payer of clinical laboratory services. Originally designed in the early 1980s, Medicare's payment policy methodology for outpatient laboratory services has not evolved to take into account technology, market, and regulatory changes, and is now outdated. This report examines the current Medicare payment methodology for outpatient clinical laboratory services in the context of environmental and technological trends, evaluates payment policy alternatives, and makes recommendations to improve the system.

HCPSC Level II Expert 2020

A study in the collision between Western medicine and the beliefs of a traditional culture focuses on a hospitalized child of Laotian immigrants whose belief that illness is a spiritual matter comes into conflict with doctors' methods.

Medicare Explained 2007

This User's Guide is intended to support the design, implementation, analysis, interpretation, and quality evaluation of registries created to increase understanding of patient outcomes. For the purposes of this guide, a patient registry is an organized system that uses observational study methods to collect uniform data (clinical and other) to evaluate specified outcomes for a population defined by a particular disease, condition, or exposure, and that serves one or more predetermined scientific, clinical, or policy purposes. A registry database is a file (or files) derived from the registry. Although registries can serve many purposes, this guide focuses on registries created for one or more of the following purposes: to describe the natural history of disease, to determine clinical effectiveness or cost-effectiveness of health care products and services, to measure or monitor safety and harm, and/or to measure quality of care. Registries are classified according to how their populations are defined. For example, product registries include patients who have been exposed to biopharmaceutical products or medical devices. Health services registries consist of patients who have had a common procedure, clinical encounter, or hospitalization. Disease or condition registries are defined by patients having the same diagnosis, such as cystic fibrosis or heart failure. The User's Guide was created by researchers affiliated with AHRQ's Effective Health Care Program, particularly those who participated in AHRQ's DEcIDE (Developing Evidence to Inform Decisions About Effectiveness)

program. Chapters were subject to multiple internal and external independent reviews.

NTIS Alert

This is the most comprehensive CPT coding resource published by the American Medical Association. This new Professional Edition provides all the features of the Standard Edition plus many extras. it contains: 100 anatomical and procedural illustrations; an overview of modifiers and abbreviations; Color-coded keys for easy identification of section headings; New procedural drawings for visual confirmation of procedures being coded.

Physicians Fee & Coding Guide

"This is a unique and needed addition to the nursing literature. Historically, the role of the nurse practitioner was focused on primary care, but as the healthcare environment has changed, so has the need for nurse practitioners in the hospital setting. This valuable resource is a wonderful guide for nurse practitioners and administrators working to successfully create this transition in their organizations." Score: 98, 5 Stars.--Doody's Medical Reviews Transitioning into Hospital Based Practice: A Guide for Nurse Practitioners & Administrators is the first text to

address the mutual issues of both NPs and administrators in successfully implementing NP practice in hospitals. This book addresses the planning, implementation, and evaluation process as well as the key factors that are critical to the success of the individual NP, and incorporates practical guidance from national NP experts. The NP recruitment, orientation, mentoring, and professional development are key to the individual and collective success of both the NP and the organization's outcomes. It is the commitment to this mutual success that sets this book apart from any other texts on this subject and makes it indispensable for students, practicing NPs, and administrators alike. Key Features: Provides concrete strategies for the NP and Administrator that support the transition from clinic to hospital-based APN practice Addresses a growing need for role identification and integration of the NP role into the hospital setting Covers the planning, implementation, and evaluation process of the hospital-based NP Focuses on the improvement of patient outcomes and cost reduction Written by national NP experts

Medicare Laboratory Payment Policy

From Patient to Payment

Patient-centered, high-quality health care relies on the well-being, health, and safety of health care clinicians. However, alarmingly high rates of clinician burnout in the United States are detrimental to the quality of care being provided, harmful to individuals in the workforce, and costly. It is important to take a systemic approach to address burnout that focuses on the structure, organization, and culture of health care. *Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being* builds upon two groundbreaking reports from the past twenty years, *To Err Is Human: Building a Safer Health System* and *Crossing the Quality Chasm: A New Health System for the 21st Century*, which both called attention to the issues around patient safety and quality of care. This report explores the extent, consequences, and contributing factors of clinician burnout and provides a framework for a systems approach to clinician burnout and professional well-being, a research agenda to advance clinician well-being, and recommendations for the field.

Legal and Ethical Aspects of Health Information Management

Social Security Disability Claims

Administrative Healthcare Data

This is the official CPT code book published by the American Medical Association. the 1999 CPT provides hundreds of new and revised CPT codes. Double columns on each page allow more codes to be viewed, plus an expanded index to aid in locating codes by procedure, service, organ, condition, synonym or eponym, and abbreviations

Understanding Health Insurance: A Guide to Billing and Reimbursement

Understanding the complex legal and ethical principles that govern health information management is more important than ever. To help you successfully navigate these legal issues, LEGAL AND ETHICAL ASPECTS OF HEALTH INFORMATION MANAGEMENT is revised, updated, and expanded, providing the opportunity to focus on law and ethics as they relate to HIM. Key topics include the role of social media in health care, expansion of existing materials on e-discovery, compliance, completeness of the health record, breaches of confidentiality, and much more. Features include enrichment activities, mapping to CAHIIM standards, and interactive quizzing and case studies to help develop practical application and high-level problem solving skills. Written by a seasoned HIM professional and

lawyer, LEGAL AND ETHICAL ASPECTS OF HEALTH INFORMATION MANAGEMENT, 4th Edition provides a complete solution for understanding the legal and ethical concerns that safeguard health care information today. Important Notice: Media content referenced within the product description or the product text may not be available in the ebook version.

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