

## Administrative Master Syllabus

### Course Information

<b>Course Title</b>	Coding and Reimbursement Methodologies
<b>Course Prefix, Num. and Title</b>	HITT 2335 Coding and Reimbursement Methodologies
<b>Division</b>	Allied Health
<b>Department</b>	Health Information Technology
<b>Course Type</b>	WECM Course
<b>Course Catalog Description</b>	Advanced coding techniques with emphasis on case studies, health records, and federal regulations regarding prospective payment systems and methods of reimbursement.
<b>Pre-Requisites</b>	HITT 1341 and HITT 2330
<b>Co-Requisites</b>	Enter Co-Requisites Here.

### Semester Credit Hours

<b>Total Semester Credit Hours (SCH): Lecture Hours:</b>	3:2:4
<b>Lab/Other Hours</b>	
<b>Equated Pay Hours</b>	4
<b>Lab/Other Hours Breakdown: Lab Hours</b>	4
<b>Lab/Other Hours Breakdown: Clinical Hours</b>	Enter Clinical Hours Here.
<b>Lab/Other Hours Breakdown: Practicum Hours</b>	Enter Practicum Hours Here.
<b>Other Hours Breakdown</b>	List Total Lab/Other Hours Here.

### Approval Signatures

Title	Signature	Date
<b>Department Head:</b>		
<b>Division Chair:</b>		
<b>VPI:</b>		

## **Additional Course Information**

**Topical Outline:** Each offering of this course must include the following topics (be sure to include information regarding lab, practicum, and clinical or other non-lecture instruction).

- A. Reimbursement and Insurance Basics
  - 1. Understanding Insurance Basics
  - 2. Reimbursement Terminology
  - 3. Types of Insurance and Third-Party Payers
- B. Prospective Payment Systems
  - 1. Background
  - 2. Reasons for a Prospective Payment System
  - 3. Acute Care Hospitals
    - a. Inpatient Prospective Payment System (IPPS)
    - b. Diagnosis Related Groups (DRGs)
  - 4. Skilled Nursing Facilities
    - a. Skilled Nursing Facility Prospective Payment System (SNF PPS)
    - b. Resource Utilization Groups (RUGs)
  - 5. Home Health Agencies
    - a. Home Health Prospective Payment System (HH PPS)
    - b. Home Health Resource Groups (HHRGs)
  - 6. Hospital Outpatient Services
    - a. Outpatient Prospective Payment System (OPPS)
    - b. Ambulatory Patient Classification System (APCs)
  - 7. Inpatient Rehabilitation Facilities (IRFs)
    - a. Inpatient Rehabilitation Facility Prospective Payment System (IRF PPS)
    - b. Case Mix Groups
  - 8. Long-Term Care Hospitals
    - a. Long-Term Care Prospective Payment System (LTC PPS)
    - b. Long-Term Care Diagnosis Related Groups (LTC DRGs)
  - 9. Physicians/other Outpatient Services
    - a. Medicare Fee Schedule (MFS)
    - b. Resource-Based Relative Value System (RBRVS)
  - 10. Clinical Laboratory Fee Schedule
  - 11. Durable Medical Equipment, Prosthetics/Orthotics & Supplies (DMEPOS)
  - 12. Ambulatory Surgery Centers (ASCs)
  - 13. Ambulance Fee Schedule
- C. Current Procedural Terminology (CPT)
  - 1. Introduction to Clinical Coding
  - 2. Application of the CPT System
    - a. Section Numbers and Their Sequences
    - b. Instructions for Use of the CPT Codebook
  - 3. Modifiers
  - 4. Surgery
    - a. Integumentary System
    - b. Musculoskeletal System
    - c. Respiratory System
    - d. Cardiovascular System
    - e. Hemic and Lymphatic System

- f. Mediastinum and Diaphragm
- g. Digestive System
- h. Urinary System
- i. Male Genital System
- j. Female Genital System
- k. Maternity Care and Delivery
- l. Endocrine System
- m. Nervous System
- n. Eye and Ocular Adnexa
- o. Auditory System
- 5. Radiology
- 6. Pathology and Laboratory
- 7. Evaluation and Management Section
  - a. Medicare's Documentation Guidelines-various versions
  - b. Selection of appropriate code
- 8. Medicine Section
- 9. Anesthesia Section
  - a. Modifiers
  - b. Qualifying codes
- D. HCPCS Levels II (Health Care Procedural Coding System) Structure of Level II HCPCS codes Modifiers
- E. Reimbursement in the Ambulatory Setting Medicare Outpatient Code Editor Quality Controls
- F. Charge Description Master (CDM) Components of the CDM Use of Revenue Codes Importance of CDM and coding for proper reimbursement Updating the CDM

### **Course Learning Outcomes:**

#### **Learning Outcomes – Upon successful completion of this course, students will:**

Sequence codes according to established guidelines and standards.

Apply reimbursement methodologies.

#### **Methods of Assessment:**

Written tests and workbook activities.

Written tests.

### **Required text(s), optional text(s) and/or materials to be supplied by the student:**

Current Procedural Terminology, Chicago, IL : American Medical Association, Current Year.

Bowie, Mary Jo, Understanding Current Procedural Terminology and HCPCS Coding Systems, current edition, Boston, MA: Cengage Learning.

Access to a computer with an external webcam and microphone, a reliable internet connection, and access to the WCJC learning management system.

### **Suggested Course Maximum:**

20

**List any specific or physical requirements beyond a typical classroom required to teach the course.**

Access to technology appropriate for online courses.

**Course Requirements/Grading System:** Describe any course specific requirements such as research papers or reading assignments and the generalized grading format for the course.

Grading scale:

93—100%	A
85—92%	B
78—84%	C
70—77%	D
69—0%	F

Final evaluation will be based on grades achieved during the semester and the final exam.

Daily Grade Average 20%

Test Average 65%

Final Exam 15%

**Curriculum Checklist:**

- Administrative General Education Course** (from ACGM, but not in WCJC Core) – No additional documents needed.
- Administrative WCJC Core Course** – Attach the Core Curriculum Review Forms
  - Critical Thinking
  - Communication
  - Empirical & Quantitative Skills
  - Teamwork
  - Social Responsibility
  - Personal Responsibility
- WECM Course** – If needed, revise the Program SCANS Matrix and Competencies Checklist