

Science, Allied Health, Health, & Engineering Department

Course: HIM 215 Clinical Coding PPE I

Instructor: Elaine Ippolito

CRN: 3261 and 3438 Se

Semester: Fall 2018

Science, Allied Health, Health, & Engineering Department

## Course: HIM 215 Clinical Coding PPE I [and HMED 9955]

CRN:	3261 and 3438			Semester:	Fall 2018
Location:	Online			Day/Time:	Online
Instructor:	Elaine Ippolito	Phone:	860-343-5761	E-mail:	Elppolito@mxcc.edu
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Schedule an appointment via email.

Office Hours [Wheaton Hall, Room 313]: Tuesdays and Thursdays 1:00pm – 3:00pm

## Course Description (from college catalog):

Through this course, students will develop an understanding of coding and classification systems in order to assign valid diagnostic and/or procedure codes. It will include the validation of coded clinical information and case mix/severity of illness data. Students will complete coding case studies utilizing a logic-based encoder and coding references. Medical records coded in this course include cases covering the following body systems and coding categories: integumentary system, musculoskeletal system, digestive system, and respiratory system.

## Course Prerequisites: HIM\*201, HIM\*203, HIM\*205, and HIM\*206, all with a "C" or better.

American Health Information Management Association (AHIMA) Professional Certificate Approved Program Curriculum Competencies: The AHIMA Council for Excellence in Education developed competencies for associate degree students with the most recent update in the 2014 Curricula requirements. The PCAP curriculum competencies include recommended competencies in four of the 2014 curricula domains including (I) Data Content, Structure, and Standards, (II) Information Protection: Access, Disclosure, Archival, Privacy & Security, (IV) Revenue Management, and (V) Compliance. This course addresses the following PCAP competencies (learning level this course/program goal):

## Domain I: Data Content Structure and Standards

Subdomain I.A Classification Systems

- I.A.1. Apply diagnosis/procedure codes according to current guidelines (3)
- I.A.2. Evaluate the accuracy of diagnostic and procedural coding (5)
- I.A.3. Apply diagnostic/procedural groupings (3)
- I.A.4. Evaluate the accuracy of diagnostic/procedural groupings (5)
- Subdomain I.B. Health Record Content and Documentation
  - I.B.2. Verify the documentation in the health record is timely, complete, and accurate (4).

Domain II: Information Protection: Access, Disclosure, Archival, Privacy & Security

- Subdomain II.B. Data Privacy, Confidentiality & Security
  - II.B.2. Describe retention and destruction policies for health information (2).
- Domain V: Compliance
  - Subdomain V.A. Regulatory
    - V.A.1. Apply policies and procedures to ensure organizational compliance with regulations and standards (3).
    - V.A.2. Adhere to the legal and regulatory requirements related to the health information management (3).
  - Subdomain V.B. Coding
    - V.B.1 Analyze current regulations and established guidelines in clinical classification systems (4)
    - V.B.2. Determine the accuracy of computer assisted coding assignment and recommend corrective action (5).
  - Subdomain V.D. Clinical Documentation Improvement
    - V.D.1. Identify discrepancies between supporting documentation and coded data (3).
    - V.D.2. Develop appropriate physician queries to resolve data and coding discrepancies (6).

#### <u>Program/Discipline Learning Outcomes Contained in Course</u> Designated TAP Learning Outcomes (Competencies) of the Course

## Critical Analysis and Logical Thinking (D)

1. Identifying arguments: Identify issues, evidence and reasoning processes; distinguish facts from opinion; recognize various types of arguments

2. Formulating arguments: Formulates good arguments, including a significant focus on inductive reasoning.

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3. Analysis: Break subject matter into components and identify their interrelations to ascertain the defining features of the work and their contributions to the whole.

4. Evaluation: Identify assumptions, assessing the quality and reliability of sources of evidence, and demonstrating knowledge of the criteria for evaluating the success of each kind of inference.

5. Synthesis: Draw together disparate claims into a coherent whole in order to arrive at well-reasoned and well-supported inferences that can be justified as a conclusion.

## HIM Learning Outcomes (Competencies):

Instructor:

At the conclusion of this course, the Health Information Management Student will be able to:

- Apply ICD-10-CM, ICD-10-PCS, CPT, and HCPCS Level II codes according to current guidelines.
- Evaluate the accuracy of diagnostic and procedural coding.
- Apply MS-DRG and APC groupings.
- Evaluate the accuracy of diagnostic and procedural groups.
- Examine severity of illness systems, present on admission indicators, and UHDDS guidelines for adherence to established standards.
- Verify that documentation is complete and meets the requirements of the care setting,
- Identify incomplete documentation.
- Write compliant physician coding queries
- Evaluate computer assisted coding for accurate code assignment.
- Interpret regulations and standards to ensure compliance.
- Employ auditing techniques to ensure coding quality and adherence to legal and regulatory requirements.
- Describe retention policies for health data.

## Textbooks and other required readings/computer software/materials/library reserve:

- All Access Virtual Lab Student Enrollment Code-1yr, Author: AHIMA, Publisher: American Health Information Management Association
- Health Information Management Case Studies, Author: Foley, ISBN: 9781584264583, 2016, Publisher: American Health Information Management Association
- Students will continue to use these materials purchased for other courses: Coding manuals: CPT, ICD-10-CM, and ICD-10-PCS (HIM 205 & HIM 206)

## Methods of Instruction:

Learning will be achieved through the use of online videos, library resources, web links, and the AHIMA Virtual Lab (V-lab). Resources will be posted to the Blackboard Course space. Students may submit questions about course materials through online discussion board, may visit me during office hours, or make an appointment to see me. It is important to read all the assigned material and view any video resources posted to the Blackboard Course.

#### Attention Mobile Users:

Some course content as presented in Blackboard Learn is not fully supported on mobile devices at this time. While mobile devices provide a convenient access to check in and read information about your courses, they should not be used to perform work such as taking tests, completing assignments or submitting substantive discussion posts.

#### **Communication Plan:**

These are my expectations for electronic communication:

- I will remove posts that I determine to be inappropriate or unprofessional.
- Post all questions regarding course readings, assignments, or assessments to the Discussion Board.
- Please use email (course messages) \*ONLY\* when the subject is of a personal and confidential matter. If the question you ask is of a nature that even one other person in the course could benefit from the answer, post the question in the appropriate discussion board forum.
- I check my email daily during normal business hours. You can expect a reply from me via email within 24 hours during the workweek. You \*may\* get an email reply during the weekend or evening.
- Use APA Style for written submissions in this course <u>www.apastyle.org</u>. [for research help see our librarian Wei Cen]

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• The writing style of discussion boards should be formal and business-appropriate, including citation of sources.

## **Technology and Social Media:**

- Students should not mix personal and academic/professional contacts and accounts when using social media. Students should create social media accounts specifically for professional/academic use to separate their personal online persona from their professional/academic work.
- The college assigns and e-mail account to all students. I will communicate with students through course e-mail or through e-mail directly to the student's Middlesex Community College e-mail address.
- I will not accept requests to connect with students from my personal social media accounts.

## Attendance Policy:

Attendance in face-to-face courses and regular activity in online courses is essential to student success. If you have decided not to continue in a course, do not simply stop attending. You need to withdraw officially. Only students who withdraw from class will receive a grade of W. Otherwise, students will receive the grade they have earned.

## **Course Evaluation and Grading:**

#### Use APA Style for written submissions in this course www.apastyle.org.

AHIMA VLab Activities	230 points
Discussion	300 points
Coding Cases	700 points
Exams	200 points
Total	1450 points

The final grade will be evaluated as a percentage and will translate into letter grades as follows:

Points	Percent	Letter Grade	Pass/Fail Grade
		(Credit CRN 3256)	(Non-credit CRN 3431)
1349-1450	93.0% - 100.0%	А	Pass
1305-1348	90.0% - 92.9%	A-	Pass
1262-1304	87.0% - 89.9%	B+	Pass
1204-1261	83.0% - 86.9%	В	Pass
1160-1203	80.0% - 82.9%	В-	Pass
1117-1159	77.0% - 79.9%	C+	Pass
1059-1116	73.0% - 76.9%	С	Pass
1015-1058	70.0% - 72.9%	C-	Pass
951-1014	67.0% - 69.9%	D+	Fail
894-950	63.0% - 66.9%	D	Fail
870-893	60.0% - 62.9%	D-	Fail
0-869	Less than 60.0%	F	Fail

#### Additional Syllabus Information and College Policies:

For information about the college's policies and procedures regarding academic honesty, accessibility/disability services, nondiscrimination, attendance, audio-recording in the classroom, grade appeals, plagiarism, religious accommodations, weather/emergency closings, and more, please go to the following website: <u>www.mxcc.edu/catalog/syllabus-policies/</u>

#### **Course Schedule:**

The following syllabus may be updated at the discretion of the instructor, please refer to Weekly Assignments and Announcements for any changes during the course.

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structor	Elaine Ippo	lito CRN: 3261 and 343	38 Semester: Fall 2018
Dat Unit	Topic(s) and Outcomes	Learning Objectives	Reading, Assignments, Quizzes, and Tests
8/26/2018-9/1/2018 Unit 1	Logic-based encoders Coding Guidelines and Regulations Integumentary system	<ul> <li>Apply ICD-10-CM, ICD-10-PCS, CPT, and HCPCS Level II codes according to current guidelines.</li> <li>Evaluate the accuracy of diagnostic and procedural coding.</li> <li>Apply MS-DRG and APC groupings.</li> <li>Evaluate the accuracy of diagnostic and procedural groups.</li> <li>Examine severity of illness systems, present on admission indicators, and UHDDS guidelines for adherence to established standards.</li> <li>Write compliant physician coding queries</li> </ul>	<ol> <li>Register your AHIMA VLab Subscription</li> <li>Nuance Clintegrity<sup>™</sup> Facility and Physician Coding, Compliance and Abstracting         <ul> <li>Getting Started</li> <li>Encoder Tutorial</li> <li>ICD-10 Lab Activity</li> <li>ICD-10 Patient Coding Scenarios</li> <li>Encoder References</li> <li>Physician Query</li> <li>Assigning MS-DRGs</li> <li>Present on Admission Designations</li> </ul> </li> <li>EDCO Solcom EDMS         <ul> <li>Getting Started in EDCO Solcom EDMS</li> <li>Navigating the EDMS: Scavenger Hunt</li> </ul> </li> <li>Discussion: Writing compliant physician queries. Case Study 5.5 Anemia Query</li> <li>Integumentary system coding cases:         <ul> <li>Outpatient Surgery Case: 311170</li> <li>Outpatient Clinic Cases: 410198, 410503</li> <li>Ambulatory Surgery: 1009931</li> </ul> </li></ol>
9/2/2018-9/8/2018 Unit 2	Coding Guidelines and Regulations Musculoskeletal system Documentation requirements Physician queries	<ul> <li>Apply ICD-10-CM, ICD-10-PCS, CPT, and HCPCS Level II codes according to current guidelines.</li> <li>Evaluate the accuracy of diagnostic and procedural coding.</li> <li>Apply MS-DRG and APC groupings.</li> <li>Evaluate the accuracy of diagnostic and procedural groups.</li> <li>Examine severity of illness systems, present on admission indicators, and UHDDS guidelines for adherence to established standards.</li> <li>Verify that documentation is complete and meets the requirements of the care setting</li> </ul>	<ul> <li>3M<sup>™</sup> Coding and Reimbursement System</li> <li>3M Login Instructions</li> <li>CRS References</li> <li>Clinical Coding and Reimbursement</li> <li>Coding with CPT and HCPCS</li> <li>E/M Coding with HCPS/CPT Finder</li> <li>MS-DRG Assignment</li> <li>Discussion: Documentation Requirements Case 1.18 Special health record documentation requirements</li> <li>Musculoskeletal system coding cases:</li> <li>Inpatient Cases: 394857, 300301, 300309, 334562, 400031, 400067, 400078, 400432, ROI3918147, ROI8751109, ROI8460786</li> <li>Outpatient Clinic Cases: 410101, 410150, 410327, 410512</li> <li>Ambulatory Surgery Case: 1001500</li> <li>Exam 1 – Integumentary system</li> </ul>

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Dat	Unit	Topic(s) and Outcomes	Learning Objectives	Reading, Assignments, Quizzes, and Tests
9/9/2018-9/15/2018	Unit 3	Coding Guidelines and Regulations Digestive system Computer- Assisted Coding	<ul> <li>Apply ICD-10-CM, ICD-10-PCS, CPT, and HCPCS Level II codes according to current guidelines.</li> <li>Evaluate the accuracy of diagnostic and procedural coding.</li> <li>Apply MS-DRG and APC groupings.</li> <li>Evaluate the accuracy of diagnostic and procedural groups.</li> <li>Examine severity of illness systems, present on admission indicators, and UHDDS guidelines for adherence to established standards.</li> <li>Evaluate computer assisted coding for accurate code assignment.</li> <li>Employ auditing techniques to ensure coding quality and adherence to legal and regulatory requirements.</li> </ul>	<ul> <li>Find-A-Code</li> <li>Getting Started</li> <li>Icons, Symbols, and Legends</li> <li>Code-A-Note</li> <li>Evaluation and Management</li> <li>E/M Audit Tools</li> <li>Discussion: Computer-Assisted Coding Case 5.29</li> <li>Digestive System Coding Cases:</li> <li>Inpatient Cases: 322039, 330909, 300302, 300304, 40055, 400099, 400495, 400500, 1008018, 1004157</li> <li>Outpatient Surgery Cases: 311171, 311173, 311174, 312176, 311177, 311179</li> <li>Outpatient Clinic Cases: 410033, 410064</li> <li>Exam 2 – Musculoskeletal System</li> </ul>
9/16/2018-9/22/2018	Unit 4	Coding Guidelines and Regulations Respiratory system Accreditation Requirements	<ul> <li>Apply ICD-10-CM, ICD-10-PCS, CPT, and HCPCS Level II codes according to current guidelines.</li> <li>Evaluate the accuracy of diagnostic and procedural coding.</li> <li>Apply MS-DRG and APC groupings.</li> <li>Evaluate the accuracy of diagnostic and procedural groups.</li> <li>Examine severity of illness systems, present on admission indicators, and UHDDS guidelines for adherence to established standards.</li> <li>Interpret regulations and standards to ensure compliance.</li> </ul>	<ul> <li>Discussion: Accreditation Requirements Case 5.1 Joint Commission – Do Not Use Abbreviations</li> <li>Respiratory System Coding Cases: <ul> <li>Inpatient Cases: 300282, 348927,</li> <li>398761, 320102, 152600</li> <li>Outpatient Surgery Cases: 311178, 311180, 311183</li> <li>Emergency Department Cases: 322232, 322234, 311184, EDCASE045</li> </ul> </li> <li>Exam 3 – Digestive System</li> </ul>
	Unit 5	Coding Guidelines and Regulations Compliance Retention and destruction Data storage and retrieval	<ul> <li>Apply ICD-10-CM, ICD-10-PCS, CPT, and HCPCS Level II codes according to current guidelines.</li> <li>Evaluate the accuracy of diagnostic and procedural coding.</li> <li>Apply MS-DRG and APC groupings.</li> <li>Evaluate the accuracy of diagnostic and procedural groups.</li> <li>Examine severity of illness systems, present on admission indicators, and UHDDS guidelines for adherence to established standards.</li> <li>Describe retention policies for health data</li> </ul>	Discussion: Retention Case 2.35 Retention and Destruction. Exam 4 - Respiratory System (Final Exam)

## References

There are no sources in the current document.