

Course: HIM 216 Clinical Coding PPE II

Instructor: Elaine Ippolito

CRN: 3265 and 3436

Semester: Fall 2018

Science, Allied Health, Health, & Engineering Department

# Course: HIM 216 Clinical Coding PPE II [and HMED 9956]

CRN:	3265 and 3436			Semester:	Fall 2018
Location:	Online			Day/Time:	Online
Instructor:	Elaine Ippolito	Phone:	860-343-5761	E-mail:	eippolito@mxcc.edu

Schedule an appointment via email

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

# 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: infectious and parasitic disease; endocrine diseases; nervous system and sense organs; neoplasm; genitourinary system; pregnancy, childbirth, and the puerperium; congenital abnormalities; signs and symptoms; and mental disorders.

## 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.4. Differentiate the roles and responsibilities of various providers and disciplines, to support documentation requirements, throughout the continuum of healthcare (3).

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

- Subdomain II.B. Data Privacy, Confidentiality & Security
  - II.B.3. Apply system security policies according to departmental and organizational data/information standards (3).

Domain IV: Revenue Management

Subdomain IV.A. Revenue Cycle and Reimbursement

IV.A.1. Apply policies and procedures for the use of data required in healthcare reimbursement (3).

- Domain V: Compliance
  - 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.C. Fraud Surveillance

V.C.1, Identify potential abuse or fraudulent trends through data analysis (3).

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)

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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.

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):

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.
- Identify incomplete documentation.
- Write compliant physician coding queries
- Evaluate computer assisted coding for accurate code assignment.
- Identify potential fraud or abuse through data analysis.
- Interpret the documentation requirements of various providers and disciplines.
- Interpret the access and documentation requirements of various healthcare roles to develop role-based security.
- Apply standards for the collection and use of reimbursement data.

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

- All Access Virtual Lab Student Enrollment Code-1 yr, 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.

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- 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]
- 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.

DSM-5 Assignment	50 points
ICD-O-3 Assignment	50 points
Discussion	250 points
Coding Cases	500 points
Exams	200 points
Total	1050 points

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

Points	Percent	Letter Grade (Credit CRN 3256)	Pass/Fail Grade (Non-credit CRN 3431)
977-1050	93.0% - 100.0%	A	Pass
945-976	90.0% - 92.9%	A-	Pass
914-944	87.0% - 89.9%	B+	Pass
872-913	83.0% - 86.9%	В	Pass
840-871	80.0% - 82.9%	В-	Pass
809-839	77.0% - 79.9%	C+	Pass
757-808	73.0% - 76.9%	С	Pass
735-756	70.0% - 72.9%	C-	Pass
704-734	67.0% - 69.9%	D+	Fail
662-703	63.0% - 66.9%	D	Fail
630-661	60.0% - 62.9%	D-	Fail
0-629	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:**

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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.

		Topic(s) and	Learning Objectives	Reading, Assignments, Quizzes, and Tests
Dat	Unit	Outcomes		Redding, Assignments, Quizzes, and Tests
	2			
9/30/2018-10/6/2018	Unit 1	Documentation requirements by role and role- based security Coding Guidelines and Regulations infectious and parasitic disease signs & symptoms endocrine	<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>Identify incomplete documentation.</li> <li>Write compliant physician coding queries</li> <li>Interpret the documentation requirements of various providers and disciplines.</li> <li>Interpret the access and documentation</li> </ul>	<ol> <li>Discussion: Role-based security in healthcare organizations. Case 2.25 Security access controls</li> <li>Infectious and parasitic disease coding cases:         <ul> <li>a) Emergency Department Cases: 322221, 322227, 322228</li> <li>b) Inpatient case: 151630</li> <li>Signs &amp; Symptoms coding cases:                 <ul></ul></li></ul></li></ol>
		diseases	requirements of various healthcare roles to develop role-based security.	
10/7/2018-10/13/2018	Unit 2	Reimbursement data requirements, privacy and security, and data use. Coding Guidelines and Regulations Nervous system and sense organs	<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>Identify incomplete documentation.</li> <li>Write compliant physician coding queries</li> <li>Examine severity of illness systems, present on admission indicators, and UHDDS guidelines for adherence to established standards.</li> <li>Apply standards for the collection and use of reimbursement data.</li> </ul>	<ol> <li>Discussion: Data required for healthcare reimbursement Case 4.5 Case Management – Discharge Disposition</li> <li>Nervous system and sense organ coding cases:         <ul> <li>a) Inpatient Cases: 324789, 308882, 1000134</li> <li>b) Emergency Department Cases: 322223, 322230, 322235</li> <li>c) Outpatient Clinic Cases: 410303, 410220, 410021</li> <li>d) Ambulatory Surgery case: 1008808</li> </ul> </li> <li>Exam 1 – Infectious disease, Signs &amp; symptoms, and Endocrine disease</li> </ol>
	Unit 3	Coding accuracy, fraud and abuse ICD-O Coding Guidelines and Regulations Neoplasm	<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>Identify incomplete documentation.</li> <li>Write compliant physician coding queries</li> <li>Evaluate computer assisted coding for</li> </ul>	<ol> <li>Discussion: Analyzing health data to identify fraud and abuse Case 5.10 CAC and Fraud Detection</li> <li>International Classification of Diseases for Oncology Assignment</li> <li>Neoplasm coding cases:         <ul> <li>a) Inpatient cases: 388967, 333061, 398275, 300308, 400289, 138499, 1000033</li> <li>b) Ambulatory Surgery cases: 1000008, 311182</li> </ul> </li> </ol>

# Science, Allied Health, Health, & Engineering Department HIM 216 Clinical Coding PPE II

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Dat Unit	Topic(s) and Outcomes	Learning Objectives	Reading, Assignments, Quizzes, and Tests	
		<ul> <li>Identify potential fraud or abuse through data analysis.</li> </ul>	<ul> <li>c) Outpatient Clinic Cases: 410057, 410092, 410410, 410481, 1000003, 1000026, 1000002</li> </ul>	
10/21/2018-10/27/2018 Unit 4	Documentation Improvement Coding Guidelines and Regulations Genitourinary system Pregnancy, childbirth, and the puerperium	<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>Identify incomplete documentation.</li> <li>Write compliant physician coding queries</li> </ul>	<ul> <li>4) Exam 2 – Nervous system and sense organs</li> <li>1) Discussion: Clinical documentation improvement process and roles Case 5.6 Coding Error</li> <li>2) Genitourinary system coding cases: <ul> <li>a) Inpatient Case: 410010</li> <li>b) Emergency Department Case: 322233</li> <li>c) Outpatient Clinic Cases: 410001, 410077, 410088</li> </ul> </li> <li>3) Pregnancy, childbirth, and the puerperium coding cases: <ul> <li>a) Inpatient cases: 143510, 400089, 400103</li> </ul> </li> </ul>	
	DSM-5	Apply ICD-10-CM, ICD-10-PCS, CPT,	<ul> <li>4) Exam 3 - Neoplasms</li> <li>1) Discussion: UHDDS Case 5.7 Coding and</li> </ul>	
10/28/2018-11/3/2018 Unit 5	Coding Guidelines and Regulations Congenital abnormalities Mental disorders	<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>Identify incomplete documentation.</li> <li>Write compliant physician coding queries</li> <li>Examine severity of illness systems, present on admission indicators, and UHDDS guidelines for adherence to established standards.</li> </ul>	<ol> <li>Discussion: On DDO Case S./ County and UHDDS</li> <li>Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition Assignment</li> <li>Congenital abnormalities coding cases:         <ul> <li>a) Inpatient Cases: 300017, 151650, 151601</li> <li>Mental disorders coding cases:                 <ul></ul></li></ul></li></ol>	

# References

There are no sources in the current document.