



Science, Allied Health, Health, & Engineering Department

Course: **HIM 217 Clinical Coding PPE III**

Instructor: Elaine Ippolito

CRN: 3279 and 3437

Semester: Fall 2018

Science, Allied Health, Health, & Engineering Department

Course: **HIM 217 Clinical Coding PPE III [and HMED 9957]**

CRN: **3279 and 3437**

Semester: **Fall 2018**

Location: Online

Day/Time: Online

Instructor: Elaine Ippolito

Phone: 860-343-5761

E-mail: Elppolito@mxcc.edu

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: circulatory system, injury and poisoning, and factors influencing health status.

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.E. Secondary Data Sources

- I.E.1. Identify and use secondary data sources (3).
- I.E.2. Validate the reliability and accuracy of secondary data sources (3).

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

Subdomain II.B. Data Privacy, Confidentiality & Security

- II.B.1. Apply confidentiality, privacy and security measures and policies and procedures for internal and external use and exchange to protect electronic health information (3).

Domain IV: Revenue Management

Subdomain IV.A. Revenue Cycle and Reimbursement

- IV.A.2 Evaluate the revenue cycle management processes (5).

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.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).

Program/Discipline Learning Outcomes Contained in Course
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

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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.
- Use secondary data sources.
- Evaluate secondary data sources.
- Apply privacy and security guidelines in the exchange of health information.
- Evaluate revenue cycle processes.

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.
- 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.

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- Use APA Style for written submissions in this course www.apastyle.org. [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. I have a LinkedIn account for professional use and I will accept requests to connect from students who have set up a professional LinkedIn account. I will delete that connection if the LinkedIn activity contains unprofessional content.

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.

Discussion	450 points
Coding Cases	360 points
Exams	150 points
Total	960 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)
893-960	93.0% - 100.0%	A	Pass
864-892	90.0% - 92.9%	A-	Pass
835-863	87.0% - 89.9%	B+	Pass
798-834	83.0% - 86.9%	B	Pass
770-797	80.0% - 82.9%	B-	Pass
741-769	77.0% - 79.9%	C+	Pass
702-740	73.0% - 76.9%	C	Pass
763-701	70.0% - 72.9%	C-	Pass
645-762	67.0% - 69.9%	D+	Fail
605-644	63.0% - 66.9%	D	Fail
577-604	60.0% - 62.9%	D-	Fail
0-576	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, non-discrimination, attendance, audio-recording in the classroom, grade appeals, plagiarism, religious accommodations, weather/emergency closings, and more, please go to the following website: www.mxcc.edu/catalog/syllabus-policies/

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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Date	Unit	Topic(s) and Outcomes	Learning Objectives	Reading, Assignments, Quizzes, and Tests
11/4/2018-11/10/2018	Unit 1	Secondary data sources Coding Guidelines and Regulations Circulatory system	<ul style="list-style-type: none"> • 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. • Use secondary data sources. • Evaluate secondary data sources. • Examine severity of illness systems, present on admission indicators, and UHDDS guidelines for adherence to established standards. 	<p>Discussion: Evaluating secondary data sources.</p> <p>(1) Case 1.5 Trauma Registry Audit (2) Case 1.6 Secondary Data</p> <p>Circulatory system coding cases:</p> <ul style="list-style-type: none"> • Inpatient Cases: 400008, 400044, 400245, 400303, 400333 • Outpatient Surgery Case: 311175 • Outpatient Clinic Cases: 410049, 410259 • Emergency Department cases: EDCASE043
11/11/2018-11/17/2018	Unit 2	Health Information Exchange Coding Guidelines and Regulations Injury and poisoning	<ul style="list-style-type: none"> • 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. • Apply privacy and security guidelines in the exchange of health information. • Examine severity of illness systems, present on admission indicators, and UHDDS guidelines for adherence to established standards. 	<p>Discussion 3: Privacy in health information exchange (HIE) 2.28 Medical Identity Theft and PHRs.</p> <p>Injury and poisoning coding cases:</p> <ul style="list-style-type: none"> • Inpatient Cases: 400072, 400112 • Outpatient Clinic Cases: 410345, 410440 • Emergency Department cases: EDCASE031, EDCASE025, EDCASE053, EDCASE001, 322222, 322224, 322231 <p>Exam 1: Circulatory System</p>
11/18/2018-12/1/2018	Unit 3	Documentation Improvement Coding Guidelines and Regulations Injury and poisoning	<ul style="list-style-type: none"> • 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. • Evaluate computer assisted coding for accurate code assignment. • Identify incomplete documentation. • Write compliant physician coding queries 	<p>Discussion 4: Evaluate computer-assisted coding accuracy. 5.30 CAC Roadblock</p> <p>Discussion 5: Develop physician queries 5.15 Query Format</p> <p>Injury and poisoning coding cases:</p> <ul style="list-style-type: none"> • Emergency Department Cases: EDCASE033, EDCASE052, EDCASE032, EDCASE027, EDCASE016, EDCASE010, EDCASE004, EDCASE038, EDCASE028, EDCASE013, 322226
12/2/2018-12/8/2018	Unit 4	Revenue Cycle Management Coding Guidelines and Regulations Injury and poisoning	<ul style="list-style-type: none"> • 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. • Evaluate revenue cycle processes. • Examine severity of illness systems, present on admission indicators, and UHDDS guidelines for adherence to established standards. 	<p>Discussion: Revenue cycle management:</p> <p>(6) Monitoring the Case Mix Index 4.22 HAC-POA (7) Charge Description Master maintenance 4.4 Chargemaster Process</p> <p>Injury and poisoning coding cases:</p> <ul style="list-style-type: none"> • Emergency department Cases: EDCASE017, EDCASE018, EDCASE005, EDCASE049, EDCASE029, EDCASE035, EDCASE030, EDCASE006, EDCASE011, EDCASE020, 322229 <p>Exam 2: Injury and Poisoning</p>

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Date	Unit	Topic(s) and Outcomes	Learning Objectives	Reading, Assignments, Quizzes, and Tests
12/9/2018-12/15/2018	Unit 5	Revenue Cycle Management Coding Guidelines and Regulations Factors influencing health status	<ul style="list-style-type: none"> • 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. • Evaluate revenue cycle processes. • Apply MS-DRG and APC groupings. • Evaluate the accuracy of diagnostic and procedural groups. 	Revenue cycle management: (8) 4.19 Remittance Advice (9) 4.7 ABN Process Factors influencing health status coding cases: <ul style="list-style-type: none"> • Inpatient Cases: 400091 • Outpatient Surgery Cases: 311192, 311181 • Outpatient Clinic Cases: 410379 Exam 3: Factors Influencing Health Status

References

There are no sources in the current document.