

Course: HIM 205 Medical Coding I [& HMED*5223]

Instructor: Jill Flanigan

CRN: 2090 & 2147 Semester: Summer 2018

Science, Allied Health, Health, & Engineering Department

Course: HIM 205 Medical Coding I [& HMED*5223]

CRN: 2090 & 2147 Semester: Summer 2018
Location: Online Day/Time: Online

<u>Instructor</u>: Jill Flanigan Phone: 860-343-5791 E-mail: jflanigan@mxcc.edu

Schedule an appointment: https://jillflanigan.youcanbook.me

Office Hours [Wheaton Hall, Room 313]: Summer hours by appointment.

Course Description (from college catalog):

Gen Ed Competency: Critical Analysis & Logical Thinking

This course introduces students to nomenclatures and classification systems used in healthcare. The course provides in-depth coverage of the ICD-10CM and ICD-10-PCS coding systems. Students will begin with simple coding cases and advance to more complex coding and auditing. Healthcare reimbursement issues will be explored with emphasis on the need for documentation to support accurate code assignment and billing for healthcare services. Students will apply the Uniform Hospital Discharge Data Set (UHDDS) The ICD-10-CM will be compared to the DSM-5 codes for behavioral health.

Course Prerequisites: BIO*115 or BIO*212, and MED*125, all with a grade of "C" or better.

Importance of Course in Program/Discipline

American Health Information Management Association (AHIMA) 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. This program covers the AHIMA recommended competencies in six domains including (I) Data Content, Structure, and Standards, (II) Information Protection: Access, Disclosure, Archival, Privacy & Security, (III) Informatics, Analytics, and Data Use, (IV) Revenue Management, (V) Compliance, and (VI) Leadership. This course addresses the following AHIMA 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 (3/3)
- I.A.2. Evaluate the accuracy of diagnostic and procedural coding (3/5)
- I.A.3. Apply diagnostic/procedural groupings (3/3)
- I.A.4. Evaluate the accuracy of diagnostic and procedural groupings (3/5)

Subdomain I.B. Health Record Content and Documentation

I.B.1. Analyze the documentation in the health record to ensure it supports the diagnosis and reflects the patient's progress, clinical findings, and discharge status (4/4).

Domain IV: Revenue Management

Subdomain IV.A. Revenue Cycle and Reimbursement

IV.A.2. Evaluate the revenue cycle management process (3/5)

Domain V: Compliance

Subdomain V.B. Coding

V.B.1 Analyze current regulations and established guidelines in clinical classification systems (2/4)

V.B.2. Determine accuracy of computer assisted coding assignment and recommend corrective action (2/5)

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Subdomain V.D. Clinical Documentation Improvement

V.D.2. Develop appropriate physician queries to resolve data and coding discrepancies

(3/6).

Domain VI: Leadership

Subdomain VI.H. Ethics

VI.H.1. Comply with ethical standards of practice (3/5)

<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.
- 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:

- Use the ICD-10-CM code set to assign correct codes for diagnoses.
 - Assign ICD-10-CM diagnosis codes for all chapters of ICD-10-CM.
- Use the ICD-10-PCS code set to assign correct codes for procedures.
 - Assign ICD-10-PCS procedure codes for all sections of ICD-10-PCS.
- Employ auditing techniques to identify incorrect diagnostic or procedural code assignment.
- Apply diagnostic/procedural groupings
- Employ auditing techniques to identify incorrect diagnostic/procedural groupings.
- Analyze the documentation in the health record to ensure it supports the diagnosis and reflects the patient's progress, clinical findings, and discharge status
 - Explain the diagnostic statements that are associated with ICD-10-CM diagnosis codes.
 - Assign diagnosis codes to case studies.
 - o Explain the procedural statements that are associated with ICD-10-PCS procedure codes.
 - Assign procedure codes to case studies
- Interpret the role of the coder and the coding process in the revenue cycle of a healthcare organization.
- Explain current regulations and established guidelines in clinical classification systems.
 - Demonstrate the different function and use of the DSM-5 vs ICD-10-CM.
 - Demonstrate the use of the Uniform Hospital Discharge Data Set (UHDDS) in coding, billing, and reporting.
 - O Describe the use of ICD-O in cancer registries.
- Describe computer assisted coding and potential problems with computer-assisted coding accuracy.
- Write appropriate physician queries to resolve data and coding discrepancies.
- Apply the Standards of Ethical Coding

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

- 1. Bundle: Textbook plus Access Code ISBN: 9781337606035
 - a. <u>Understanding ICD-10-CM and ICD-10-PCS</u>, A Wortext, Mary Jo Bowie, Cengage
 - **b.** Subscription to Cengage Mindtap Resources for <u>Understanding ICD-10-CM and ICD-10-PCS</u>
- 2. 2018 ICD-10-CM, Vinyl, Updateable, Channel Publishing, ISBN: 9781946729026
- 3. 2018 ICD-10-PCS, Vinyl, Updateable, Channel Publishing, ISBN: 9781946729040

Methods of Instruction:

Learning will be achieved through class lectures, use of online videos, library resources, and web links. Resources will be posted to the Blackboard Course space. Students may submit questions about course materials in class, 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:

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

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.

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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:

Exams (350 points):

- Tests must be completed on the scheduled date.
- Tests will not be available after the due date and you will receive a zero if you do not take the tests by the deadline.

Assignments (Coding Practice) (1429 points):

- There will be a 10% penalty for late assignment submission.
- Coding Assignments
 - Your goal is to learn to use the code manuals.
 - Read your textbook, but look up the codes in the assignments using the code manual (ICD-10-CM or ICD-10-PCS) and not you textbook.
 - Do not "Google" the codes. You need to learn to navigate the code books to take coding certification exams.
 - Coding Assignments in Mindtap will show you if your answer is correct, you can redo questions to improve your score up to the due dates.
 - Assignments are due by the end of each course week (11:59pm Monday)

Discussion (450 points):

- The first discussion post for each topic is due by 11:59pm on Saturday.
- You must create your first post before you can see the posts of other students.
- You must respond to the posts of at least one other student for each discussion board with substantive comments that move the discussion forward by 11:59pm on Monday.
- Each discussion either asks you to read a document provided for review or to research to topic independently. Your response should be based on the document or research.
- Use APA Style for written submissions in this course www.apastyle.org.
 - Expect each initial discussion to be approximately ½-1 page in length
 - No title page required for these discussion posts.

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

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Points	Percent	Letter Grade (Credit CRN 2090)	Pass/Fail (Noncredit CRN 2147)
2073 - 2229	93.0% - 100.0%	Α	Pass
2006 - 2072	90.0% - 92.9%	A-	
1939 - 2005	87.0% - 89.9%	B+	
1850 - 1938	83.0% - 86.9%	В	
1783 - 1849	80.0% - 82.9%	B-	
1716 - 1782	77.0% - 79.9%	C+	
1627 - 1715	73.0% - 76.9%	С	
1560 - 1626	70.0% - 72.9%	C-	
1493 - 1559	67.0% - 69.9%	D+	Fail
1404 - 1492	63.0% - 66.9%	D	
1337 - 1403	60.0% - 62.9%	D-	
0 - 1336	Less than 60.0%	F	

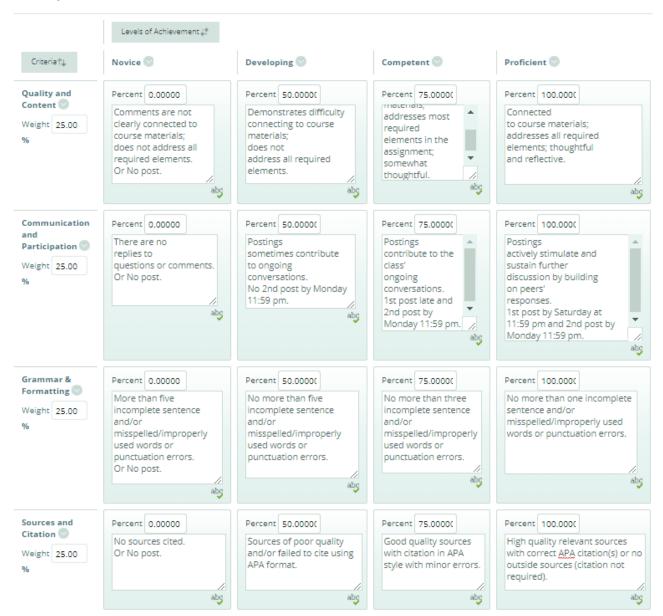


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Grading rubric for discussion boards:



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/

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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.

Unit # & Dates	Topics	Outcomes/Learning Objectives	Reading & Assignments (with due dates)
Unit 0	The Blackboard course space ope being reading the text. The first on the assignment links in Unit 1.	rse and view the syllabus and e Mindtap access code by clicking	
		WEEK 1	
Unit 1 5/29/18 – 6/4/18	Nomenclatures and Classification Systems Introduction to Coding and Coding Professions Overview and History of ICD- 10-CM ICD-10-CM Coding Conventions Standards of Ethical Coding	 Interpret the role of the coder and the coding process in the revenue cycle of a healthcare organization. Explain current regulations and established guidelines in clinical classification systems. Apply the Standards of Ethical Coding 	Read: Text Chapters 1-3 Assignments: CR01 Chapter Review Ch. 1 CR02 Chapter Review Ch. 2 CR03 Chapter Review Ch. 3
Unit 2 5/29/18 – 6/4/18	Uniform Hospital Discharge Data Set (UHDDS) Steps for Diagnostic Code Selection Diagnostic Coding Guidelines Infectious and Parasitic Diseases	Use the ICD-10-CM code set to assign correct codes for diagnoses. Assign ICD-10-CM diagnosis codes for all chapters of ICD-10-CM. Analyze the documentation in the health record to ensure it supports the diagnosis and reflects the patient's progress, clinical findings, and discharge status Explain the diagnostic statements that are associated with ICD-10-CM diagnosis codes. Assign diagnosis codes to case studies. Explain current regulations and established guidelines in clinical classification systems. Demonstrate the use of the Uniform Hospital Discharge Data Set (UHDDS) in coding, billing, and reporting.	Read: Text Chapters 4-6 Assignments: CR04 Chapter Review Ch. 4 CR05 Chapter Review Ch. 5 CR06 Chapter Review Ch. 6 CA06 Coding Assignments Ch. 6 CS06 Case Studies Ch. 6

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Unit # & Dates	Topics	Outcomes/Learning Objectives	Reading & Assignments (with due dates)
Unit 8 6/12/18 – 6/18/18	Exam 1 covering Course Units 1-7 including the introduction through Diseases of the Genitourinary System	 Use the ICD-10-CM code set to assign correct codes for diagnoses. Assign ICD-10-CM diagnosis codes for all chapters of ICD-10-CM. Analyze the documentation in the health record to ensure it supports the diagnosis and reflects the patient's progress, clinical findings, and discharge status Explain the diagnostic statements that are associated with ICD-10-CM diagnosis codes. Assign diagnosis codes to case studies. Interpret the role of the coder and the coding process in the revenue cycle of a healthcare organization. Explain current regulations and established guidelines in clinical classification systems. Demonstrate the different function and use of the DSM-5 vs ICD-10-CM. Demonstrate the use of the Uniform Hospital Discharge Data Set (UHDDS) in coding, billing, and reporting. Describe the use of ICD-O in cancer registries. Write appropriate physician queries to resolve data and coding discrepancies. Apply the Standards of Ethical Coding 	Assignment: D — Unit 8 Role of the Coder Review: Review for exam using Mindtap Flashcards, class slides/examples, and assignments. Exam 1: Exam (Units 1-7) is due by 11:59pm on June 18th.

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Unit # & Dates	Topics	Outcomes/Learning Objectives	Reading & Assignments (with due dates)
Unit 9 6/12/18 – 6/18/18	Pregnancy, Childbirth, and the Puerperium Certain Conditions Originating in the Perinatal Period Congenital Malformations, Deformations, and Chromosomal Abnormalities Symptoms, Signs, and Abnormal Clinical and Laboratory Findings	Use the ICD-10-CM code set to assign correct codes for diagnoses. Assign ICD-10-CM diagnosis codes for all chapters of ICD-10-CM. Analyze the documentation in the health record to ensure it supports the diagnosis and reflects the patient's progress, clinical findings, and discharge status Explain the diagnostic statements that are associated with ICD-10-CM diagnosis codes. Assign diagnosis codes to case studies.	Read: Text Chapters 20-23 Read: "Automated Coding Workflow and CAC Practice Guidance (2013 update)" Assignments: D – Unit 9 Computer-Assisted Coding (CAC) CR20 Chapter Review Ch. 20 CA20 Coding Assignments Ch. 20 CS20 Case Studies Ch. 20 CR21 Chapter Review Ch. 21 CA21 Coding Assignments Ch. 21 CA21 Coding Assignments Ch. 21 CS21 Case Studies Ch. 21 CR22 Chapter Review Ch. 22 CA22 Coding Assignments Ch. 22 CS22 Case Studies Ch. 22 CR23 Chapter Review Ch. 23 CA23 Coding Assignments Ch. 23 CS23 Case Studies Ch. 23
		WEEK 4	
Unit 10 6/19/18 – 6/25/18	Injury, Poisoning, and Certain Other Consequences of External Causes External Causes of Morbidity Factors Influencing Health Status and Contact with Health Services Role of the Coder	Use the ICD-10-CM code set to assign correct codes for diagnoses. Assign ICD-10-CM diagnosis codes for all chapters of ICD-10-CM. Analyze the documentation in the health record to ensure it supports the diagnosis and reflects the patient's progress, clinical findings, and discharge status Explain the diagnostic statements that are associated with ICD-10-CM diagnosis codes. Assign diagnosis codes to case studies.	Assignments: CR24 Chapter Review Ch. 24 CA24 Coding Assignments Ch. 24 CS24 Case Studies Ch. 24 CR25 Chapter Review Ch. 25 CA25 Coding Assignments Ch. 25 CS25 Case Studies Ch. 25 CR26 Chapter Review Ch. 25 CR26 Chapter Review Ch. 26 CA26 Coding Assignments Ch. 26 CS26 Case Studies Ch. 26

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Unit # & Dates	Topics	Outcomes/Learning Objectives	Reading & Assignments (with due dates)
Unit 14 6/26/18 – 7/3/18	Prospective Payment Systems Measurement and Monitoring Section Extracorporeal Assistance and Performance and Extracorporeal Therapies Section Osteopathic, Other Procedures, and Chiropractic Sections	Use the ICD-10-PCS code set to assign correct codes for procedures. Assign ICD-10-PCS procedure codes for all sections of ICD-10-PCS. Apply diagnostic/procedural groupings Analyze the documentation in the health record to ensure it supports the diagnosis and reflects the patient's progress, clinical findings, and discharge status Explain the procedural statements that are associated with ICD-10-PCS procedure codes. Assign procedure codes to case studies Apply diagnostic/procedural groupings	Read: Text Chapters 32-34 View: Clinical Coding and Reimbursement Slides Assignments: D- Unit 14 Prospective Payment Systems CR32 Chapter Review Ch. 32 CA32 Coding Assignments Ch. 32 CS32 Case Studies Ch. 32 CR33 Chapter Review Ch. 33 CA33 Coding Assignments Ch. 33 CS33 Case Studies Ch. 33 CR34 Chapter Review Ch. 34 CA34 Coding Assignments Ch. 34 CS34 Case Studies Ch. 34
Unit 15 6/26/18 – 7/3/18	Auditing Imaging, Nuclear Medicine, and Radiation Oncology Sections Physical rehabilitation and Diagnostic Audiology Section Mental health and Substance Abuse Treatment New Technology Section	Use the ICD-10-PCS code set to assign correct codes for procedures. Assign ICD-10-PCS procedure codes for all sections of ICD-10-PCS. Employ auditing techniques to identify incorrect diagnostic or procedural code assignment. Employ auditing techniques to identify incorrect diagnostic/procedural groupings. Analyze the documentation in the health record to ensure it supports the diagnosis and reflects the patient's progress, clinical findings, and discharge status Explain the procedural statements that are associated with ICD-10-PCS procedure codes. Assign procedure codes to case studies	Read: Text Chapters 35-38 Read: "Making the Most of External Coding Audits: From Preparation to Recommendations" Read: "AHIMA Standards of Ethical Coding" Assignments: D-Unit 15 Auditing CR35 Chapter Review Ch. 35 CA35 Coding Assignments Ch. 35 CS35 Case Studies Ch. 35 CR36 Chapter Review Ch. 36 CA36 Coding Assignments Ch. 36 CS36 Case Studies Ch. 36 CS37 Chapter Review Ch. 37 CA37 Coding Assignments Ch. 37 CS37Case Studies Ch. 37 CR38 Chapter Review Ch. 38 CA38 Coding Assignments Ch. 38

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Unit # & Dates	Topics	Outcomes/Learning Objectives	Reading & Assignments (with due dates)
Unit 16 6/26/18 – 7/3/18	Review Final Exam	Exam includes all course objectives.	Review: Review for exam using Mindtap Flashcards, class slides/examples, and assignments. Final Exam: Exam 2 (Units 9-15) is due by 11:59pm on July 3rd.

Bibliography

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