COURSE OUTLINE

Course Number	**Course Title**	**Credits**
MOA103	**Medical Billing and Coding**	**3**

Hours: Lecture/Lab/Other	**Co- or Pre-requisite**	**Implementation Semester & Year**
2/2/0	ENG101	Spring 2023

Catalog description: Extensive coverage of CPT and ICD-9-CM coding procedures. Students learn to abstract information from the patient record and combine it with reimbursement and coding guidelines to optimize physician payment.

General Education Category: **Not GenEd**	**Course Coordinator:** **Course Professor:** Milissa Earnest, earnestm@mccc.edu

Required texts & Other materials

Medical Insurance – A Revenue Cycle Process Approach (Textbook with Connect). 8th Edition. By Joanne Valerius. © 2020 (Do not buy the hard copy-obtain only the Connect Online Access below)
- Connect Online Access for Medical Insurance: A Revenue Cycle Process Approach 8th Edition 9781260489095

Course Student Learning Outcomes (SLO):

Upon successful completion of this course the student will be able to:
1. Define the vocabulary in each chapter in order to become a well-informed healthcare professional. [Supports ILG #1; PLO #1]
2. Identify a new versus established patient, obtain patient demographic information, insurance verification, and authorizations and collect time-of-service payments. [Supports ILG 1, 4, 10; PLO 5]
3. Understand and explain the importance of accurate documentation when working with electronic health records. [Supports ILG 1,4, 9, 10; PLO #4, 5]
4. Describe the different types of medical insurance, their characteristics and eligibility requirements. [Supports ILG 1,4, 10; PLO #4, 5]
5. Determine Coordination of Benefits for patients with more than one insurance plan. [Supports ILG 1,4, 10; PLO #4, 5]
6. Code diagnoses using the basic steps and principles of the ICD-10-CM coding system [Supports ILG 1,4, 10; PLO #4, 5]
7. Code procedures/services using the basic steps and principles of the CPT/HCPCS coding system. [Supports ILG 1,4, 10; PLO #4, 5]
8. Complete HIPAA-compliant health care claims for Medicare, Medicaid, and TRICARE/CHAMPVA; Workers' Compensation; and private payers, including BlueCross and BlueShield Plans, commercial carriers, and managed care organizations. [Supports ILG 1,4, 10; PLO #4, 5]
9. Understand and complete the hospital billing cycle following the guidelines previously learned.
10. Discuss HIPAA/HITECH, legal, and ethical considerations with emphasis on confidentiality, protected health information and fraud related to insurance. [Supports ILG 1,4, 9, 10; PLO #4, 5]

11. Discuss the processing of payers' remittance advices (RAs) and patient billing/collections. [Supports ILG 1,4, 10; PLO #4, 5]
12. Utilize electronic health records in the reimbursement cycle. [Supports ILG 1,4, 10; PLO #4, 5]

Course-specific Institutional Learning Goals (Institutional Learning Goal (ILG):

Institutional Learning Goal 1. Written and Oral Communication in English. Students will communicate effectively in both speech and writing.
Institutional Learning Goal 4. Technology. Students will use computer systems or other appropriate forms of technology to achieve educational and personal goals.
Institutional Learning Goal 9. Ethical Reasoning and Action. Students will understand ethical frameworks, issues, and situations.
Institutional Learning Goal 10. Information Literacy: Students will recognize when information is needed and have the knowledge and skills to locate, evaluate, and effectively use information for college level work.
Institutional Learning Goal 11. Critical Thinking: Students will use critical thinking skills understand, analyze, or apply information or solve problems.

Program Learning Outcomes for Medical Office Assistant
1. To prepare students to perform safely and effectively within the ethical and legal boundaries of the scope of practice.
2. Perform and document routine administrative procedures according to current office protocol.
3. Effectively apply verbal, nonverbal, and written communication principles and skills in the workplace.
4. Build a fundamental understanding of the human body and medical terminology as they apply to medical billing and coding.
5. Assign and understand diagnostic and procedure codes using ICD and HCPCS/CPT coding systems as used in a variety of settings.

Units of study in detail – Unit Student Learning Outcomes:

Unit I: Working With Medical Insurance and Billing [Supports Course SLO #1, 3-5, 10, 12]
Learning Objectives
The student will be able to:
1. Identify major types of medical insurance payers
2. Understand the steps in the revenue cycle.
3. Understand insurance regulations.
4. Understand compliance regulations associated with HIPAA, HITECH privacy, security and Electronic Health Care Transactions, Codes Sets, and Breach Notification Rules.

Unit II: Claim Coding [Supports Course SLOs # 6, 7, 8]
Learning Objectives
The student will be able to:
1. Distinguish which type of civil law deals with medical professional liability.
2. Build skills in correct coding procedures.
3. Identify the use of coding references.
4. Comply with proper linkage guidelines.

Unit III: Claim Submissions [Supports Course SLOs #9, 12]
Learning Objectives
The student will be able to:
1. Discuss the revenue cycle.
2. Calculate reimbursement.

3. Indentify complaint billing.
4. Prepare and transmit claims.

Unit IV: Claim Follow-up and Payment Processing [Supports Course SLOs # 2, 11]
Learning Objectives
The student will be able to:
1. Evaluate various scheduling methods, determine scheduling needs for the facility, new and Describe the major third-party private and government sponsored payers procedures and regulations.
2. Identify follow-ups and appeals with private and government sponsored payers.
3. Understand how to process payments from payers.
4. Complete case studies.

Unit V: Inpatient (Hospital) Reporting [Supports Course SLOs #6]
Learning Objectives
The student will be able to:
1. Identifying confirmed inpatient procedures and elements
2. Build and accurate ICD-10-PCS code for inpatient procedures, services, and treatments.

Evaluation of student learning:
Students will utilize Blackboard Learning Management System and the McGraw Hill Connect Platform to complete all assignments and assessments for this course.

Students will be evaluated based on their discussion questions, homework assignments via the Connect learning technology environment, quizzes as formative assessments to evaluate knowledge learned in prior class, and exams as summative assessments to cover knowledge learned over the entire semester, quarters, and halves of material learned in course sessions.

Discussion Questions: 15%
Chapter Review/HER clinic exercises: 20%
Case Studies (Chapter 15-16): 10%
CMS-1500 Completion (Chapters. 8-12; 15: 10%
Chapter tests: 25%
Final Exam: 20%

Grade	
$93 \leq x \leq 100$	A
$90 \leq x < 93$	A-
$87 \leq x < 90$	B+
$83 \leq x < 87$	B
$80 \leq x < 83$	B-
$76 \leq x < 80$	C+
$70 \leq x < 76$	C
$60 \leq x < 70$	D
$x < 60$	F