

HCRSC135 : Basic ICD and CPT Coding

General Information

Author:	• Annette Hodgins
Course Code (CB01) :	HCRSC135
Course Title (CB02) :	Basic ICD and CPT Coding
Department:	Allied Health
Proposal Start:	Fall 2018
TOP Code (CB03) :	(1208.20) Administrative Medical Assisting
SAM Code (CB09) :	Clearly Occupational
Distance Education Approved:	Yes
Course Control Number (CB00) :	CCC000532262
Curriculum Committee Approval Date:	12/04/2015
Board of Trustees Approval Date:	03/10/2016
External Review Approval Date:	07/19/2012
Course Description:	This course presents a thorough discussion of basic International Classification of Diseases (ICD) and Current Procedural Terminology (CPT) coding. Procedural coding and International Classification of Diseases provide students with the detailed knowledge to implement the specialized coding needed for billing insurance companies.
Submission Type:	Change to Content This course is presented for revision to meet criteria for the new Medical Coders' Certificate (pending). The Medical Coders' certificate will be presented when all courses are completed.
Author:	No value

Faculty Minimum Qualifications

Master Discipline Preferred:	No value
Alternate Master Discipline Preferred:	No value
Bachelors or Associates Discipline Preferred:	• Health Care Ancillaries (Medical assisting, hospice worker, home care aide, certified nurse aide, health aide, ward clerk, central service technology, childbirth educator, primary care associate, massage therapy)
Additional Bachelors or Associates Discipline Preferred:	No value

Course Development Options

Basic Skills Status (CB08)	Course Special Class Status (CB13)	Grade Options
Course is not a basic skills course.	Course is not a special class.	• Letter Grade Methods

Allow Students to Gain Credit by Exam/Challenge

Allowed Number of Retakes

0

Course Prior to College Level (CB21)

Not applicable.

Rationale For Credit By Exam/Challenge

No value

Retake Policy Description

Type:|Non-Repeatable Credit

Allow Students To Audit Course

Course Support Course Status (CB26)

No value

Associated Programs

Course is part of a program (CB24)

Associated Program

Award Type

Active

CC HCRS Medical Assisting

A.S. Degree Major

Spring 2018

Medical Coding

Certificate of Achievement

Fall 2020

Transferability & Gen. Ed. Options

Course General Education Status (CB25)

No value

Transferability

Transferable to CSU only

Transferability Status

Approved

Units and Hours

Summary

Minimum Credit Units (CB07) 2

Maximum Credit Units (CB06) 2

Total Course In-Class (Contact) Hours 36

Total Course Out-of-Class Hours 72

Total Student Learning Hours 108

Faculty Load 0

Credit / Non-Credit Options

Course Credit Status (CB04)

Credit - Degree Applicable

Course Non Credit Category (CB22)

Credit Course.

Non-Credit Characteristic

No Value

Course Classification Status (CB11)

Credit Course.

 Variable Credit Course**Funding Agency Category (CB23)**

Not Applicable.

 Cooperative Work Experience Education Status (CB10)**Weekly Student Hours**

	In Class	Out of Class
Lecture Hours	2	4
Laboratory Hours	0	0
Activity Hours	0	0

Course Student Hours

Course Duration (Weeks)	18
Hours per unit divisor	54
Course In-Class (Contact) Hours	
Lecture	36
Laboratory	0
Activity	0
Total	36
Course Out-of-Class Hours	
Lecture	72
Laboratory	0
Activity	0
Total	72

Time Commitment Notes for Students

No value

Faculty Load**Extra Duties:** 0**Faculty Load:** 0**Units and Hours - Weekly Specialty Hours**

Activity Name	Type	In Class	Out of Class
No Value	No Value	No Value	No Value

Pre-requisites, Co-requisites, Anti-requisites and Advisories

Co-Requisite

HCRSC133 - Medical Office Procedures

HCRS C133: Medical Office Procedures is a part of the Administrative Medical Assistant certificate. The Students will need the basic procedures and skills learned in HCRS C133 to be successful in HCRS C133.

AND

Advisory

BIOLC121 - Survey of Anatomy & Physiology Lecture

Students are expected to understand and identify anatomy and physiology. In addition, they must critically analyze medical reports on clients' care issues and evaluate appropriate billing codes for insurance purposes. The biology advisory encourages students to have the skills necessary for success in these assignments.

AND

Advisory

ENGLC070 - Introductory Composition

Students are expected to read and comprehend a college-level text book explaining sophisticated healthcare related data. In addition, they must critically analyze scholarly or professional arguments for discussions. The reading advisory level encourages students to have the skills necessary for success in these assignments.

Entrance Skills

Entrance Skills	Description
No value	No value

Limitations on Enrollment

Limitations on Enrollment	Description
No value	No value

Specifications

Methods of Instruction	
Methods of Instruction	Problem Solving
Rationale	Student are required to problem solve for successful coding practices. Problem solving encourages critical thinking and analysis.

Methods of Instruction	Lecture
Rationale	Instructor may deliver lectures and discussion questions through video conferencing as an effective method of student contact.
Methods of Instruction	Outside reading
Rationale	Student will need to update any changes made in the HCPCS, CPT, or ICD-10 CM Codes based on Centers for Medicare and Medicaid changes.
Methods of Instruction	Case Study
Rationale	Case studies provide students with client information and medical records to practice coding applications and processes: Example: Mary Jane was in a car accident and was brought to the emergency room for treatment of whiplash, concussion, and a broken femur. Read the emergency room physician's history and physical on Mary Jane and find the following codes: CPT code, ICD-10 CM code E/M code for emergency services. Discuss your process of finding the appropriate codes.
Methods of Instruction	Discussion
Rationale	Discussion questions allow students to discuss terms, methods, or case studies among themselves. Example: Discuss the process for finding the hospital service code for outpatient services.
Assignments	
<p>A. Games: word searches, crossword puzzles, family feud, jeopardy, bingo, spelling bee, hangman, and concentration.</p> <p>B. Discuss learning gaps and plan for applying vocabulary related to ICD and CPT Coding.</p> <p>C. Assigned Readings: outline chapters prior to lecture.</p> <p>E. Textbook and workbook chapter questions and assignments.</p> <p>F. Assign students to report on the various coding systems: 1. ICD-9/10 2. CPT-4 3. HCPCS for services and supplies</p>	
Methods of Evaluation	Rationale
Other	<p>A. Scenario-based coding practice exercises.</p> <p>Coding Practice Example: 55 year-old Mr. Jensen arrived to the physician's office because he does not feel well. Dr. Green assesses Mr. Jensen and gives him the following diagnoses: community acquired pneumonia, diabetes type 2, and infected right big toe. What CPT and ICD 9/10 codes would you use to bill Medicare? Blue Cross? Medi-Cal</p>
Tests	<p>B. Week Quizzes using multiple choice, true-false, or short answer questions.</p> <p>Example of questions: Fraudulent billing of a patient's insurance is A. A misdemeanor B. Acceptable if done in error C. Tolerated in some cases D. A felony</p>
Final Exam	<p>C. Mid-Term and Final Exams: Example of questions: Current Procedural Terminology (CPT) codes A. are updated annually</p>

- B. are used instead of ICD-9 codes
- C. have 6 to 8 numbers
- D. are not used on the CMS -1500 form

Equipment

Computer with internet access

Textbooks

Author	Title	Publisher	Date	ISBN
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Carol Buck	2018 Step by Step Medical Coding	Elsevier	2018	
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Carol Buck	2018 Step by Step Medical Coding Workbook	Elsevier	2018	
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AAPC	ICD-10-CM Expert 2018 for Providers & Facilities	AAPC	2018	
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AAPC	2018 HCPCS Level II Expert Codebook	AAPC	2018	
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Other Instructional Materials

No Value

Materials Fee

No

Learning Outcomes and Objectives

Course Objectives

No value

CSLOs

Analyze the basics of medical insurance related to procedural coding. Expected SLO Performance: 70.0

Differentiate between Current Procedural Terminology (CPT) and International Classification of Diseases (ICD) coding. Expected SLO Performance: 70.0

Accurately complete all ICD and CPT coding forms. Expected SLO Performance: 70.0

Allied Health
Administrative Medical Assisting
Certificate of Achievement

2. Perform Administrative Medical Assisting procedures competently, such as Occupational Safety and Health Administration (OSHA) standards, electronic technologies, and medical records.

ISLOs
Core ISLOs

Students who are completing a program will be able to access, evaluate, and effectively use information.

Evaluate the coding systems used to describe diseases, injuries, and procedures.

Expected SLO Performance: 70.0

Allied Health
Administrative Medical Assisting
Certificate of Achievement

2. Perform Administrative Medical Assisting procedures competently, such as Occupational Safety and Health Administration (OSHA) standards, electronic technologies, and medical records.

Evaluate issues related to insurance fraud and abuse.

Expected SLO Performance: 70.0

Outline

Course Outline

A. Medical Coding.

1. Coding Definition:
 - a. Collecting health care statistics
 - b. Performing a medical care review
 - c. Mainly for health insurance claims processing.
2. Reimbursement
3. Reimbursement denials
4. Claims
5. Coordination of benefits
6. Fraud and abuse

B. The Coder's Rule

1. Define Quality Improvement Organizations (QIO).
2. Medicare Part A and Part B.
3. Health Insurance Portability and Accountability Act (HIPAA).
4. Federal Register.

C. Health Care Fraud and Abuse

1. Medicare Fraud and Abuse.
2. Managed Health Care

D. Three coding systems

1. International classification of diseases (ICD-9/10) CM
 - a. Volume 1: Tabular index
 - b. Volume 2: Alphabetic index
 - c. Volume 3: Tabular list and alphabetic index of procedures
2. World Health Organization (WHO).
3. Development of diagnostic coding
4. Physician's current procedural terminology (CPT)
 - a. Comprehensive listing of medical terms and codes
 - b. CPT-4 was developed by the American Medical Association

- c. Uniform language
- d. 5-digit system for coding physician services
- 5. Health Care Common Procedure Coding System
 - a. Posted by centers for Medicare and Medicaid services
 - b. Two principle sub-systems

E. An Overview of ICD-10-CM

1. Development of the ICD-10-CM
2. ICD-10-CM replaces the ICD-9-CM, Volumes 1 and 2
3. Improvements in the ICD-10-CM
4. Instructional notations in ICD-10-CM
5. ICD-10-CM Official Guidelines for Coding And Reporting.
6. Format of ICD-10-CM.

F. An Overview of ICD-9-CM

1. ICD-9-CM uses
2. Characteristics of the Tabular List, Volume 1.
3. Characteristics of the Alphabetic Index, Volume 2.
4. Coding conventions when assigning codes.
5. Characteristics of the Procedures Index and Tabular List, Volume 3.

G. Principles of coding

1. Procedural Coding
 - a. Current Procedural Terminology, (CPT)
 - b. Six primary sections
 - c. Evaluation and management
 - d. Referral versus consultation
 - e. Anesthesia
 - f. Surgery
 - g. Global period
 - h. Surgical package
2. Common Procedure Coding System; Health Care Financing Administration (HCFA) Common procedure Coding System, (HCPCS).
 - a. Standardized coding system
 - b. Medicare and other insurers cover a variety of services, supplies, and equipment
 - c. Alpha numeric codes
 - d. Special alpha modifiers
3. Procedural Coding Steps
 - a. Familiar with the CPT and HCPCS coding books.
 - b. Determine procedures and services form.
 - c. Identify the correct code(s).
 - d. Determine the need for appropriate modifiers.
 - e. Record the procedure code

Delivery Methods and Distance Education

Delivery Method: Please list all that apply -Face to face -Online (purely online no face-to-face contact) -Online with some required face-to-face meetings ("Hybrid") -Online course with on ground testing -iTV – Interactive video = Face to face course with significant

required activities in a distance modality -Other

Face 2 Face
Online
Hybrid
Interactive

Rigor Statement: Assignments and evaluations should be of the same rigor as those used in the on-ground course. If they are not the same as those noted in the COR on the Methods of Evaluation and out-of-class assignments pages, indicate what the differences are and why they are being used. For instance, if labs, field trips, or site visits are required in the face to face section of this course, how will these requirements be met with the same rigor in the Distance Education section?

All assignments are identical to those in an onsite class, except that they are uploaded to the course shell in learning management system as an attachment. Weekly class discussions are conducted by means of online discussion forums within the learning management system. Some instructors hold live synchronized chat sessions as office hours or as discussion forums, though these are not required. Some instructors also use uploaded quizzes or exams accessible through the learning management system. The instructor is responsible for providing feedback both in online discussion forums and through e-mail. The instructor must provide substantive critiques of all assignments and at least general responses to discussion posts. Some instructors use rubrics, stated in the syllabus, to evaluate online discussion work, but these are not required.

Effective Student-Instructor Contact: Good practice requires both asynchronous and synchronous contact for effective contact. List the methods expected of all instructors teaching the course. -Learning Management System -Discussion Forums -Moodle Message -Other Contact -Chat/Instant Messaging -E-mail -Face-to-face meeting(s) -Newsgroup/Discussion Board -Proctored Exam -Telephone -iTV -Interactive Video -Other (specify)

chat
email
face to face
discussion
telephone
itv
video conferencing

Software and Equipment: What additional software or hardware, if any, is required for this course purely because of its delivery mode? How is technical support to be provided?

Computer with internet for online learning system
2018 Medical Coding Training: Practical Application CPC®; AAPC; AAPC publisher;

Accessibility: Section 508 of the Rehabilitation Act requires access to the Federal government's electronic and information technology. The law covers all types of electronic and information technology in the Federal sector and is not limited to assistive technologies used by people with disabilities. It applies to all Federal agencies when they develop, procure, maintain, or use such technology. Federal agencies must ensure that this technology is accessible to employees and the public to the extent it does not pose an "undue burden". I am using -iTV—Interactive Video only -Learning management system -Publisher course with learning management system interface.

iTV
Learning Management System
Publisher course with learning management system interface.

Class Size: Good practice is that section size should be no greater in distance ed modes than in regular face-to-face versions of the course. Will the recommended section size be lower than in on-ground sections? If so, explain why.

