

Department:

Health Sciences

Course Description:

This course introduces the study of the uses of coded data and health information in reimbursement and payment systems appropriate to all healthcare settings and managed care. Topics will include contemporary prospective payment systems and key health plans, charge master maintenance, and evaluation of fraudulent billing practices.

Course Competencies:

Upon completion of the course, the student should be able to:

1. Explain the concepts of insurance and reimbursement coding and how they evolved in the American Healthcare System.
2. Identify multiple health insurance payers.
3. Apply multiple health insurance guidelines for multiple health insurance payers.
4. Manage billing for healthcare services using codes.
5. Explain and use health insurance key terms, specific terminology, and abbreviations.
6. Distinguish between multiple coding systems.
7. Identify and describe multiple compliance issues with coding and payment.
8. Explain the importance of Quality Improvement Organizations (QIOs) and their role in the payment process.
9. Describe the details of an Explanation of Benefit (EOB).
10. Describe the function of an Advanced Beneficiary Notice (ABN).
11. Explain charge masters and describe the maintenance of charge masters.
12. Apply legal and ethical concepts to the billing practice while following the Health Insurance Portability and Accountability Act (HIPAA).
13. Function as a liaison between health insurance companies, medical facilities, and patients.
14. Apply policies and procedures for the use of data required in healthcare reimbursement.
15. Evaluate the revenue cycle management processes.

Course Content:

- A. Commercial, managed care, and federal insurance plans
- B. Compliance strategies and reporting
- C. Payment methodologies and systems (such as capitation, prospective payment systems, Resource-based Relative Value Scale (RBRVS))
- D. Payer requirements for appropriate codes assignments (Centers for Medicare and Medicaid (CMS), etc.)
- E. Billing processes and procedures (such as claims, Explanation of Benefit (EOB), Advanced Beneficiary Notice (ABN), electronic data interchange)
- F. Charge master maintenance
- G. Regulatory guidelines
- H. Reimbursement monitoring and reporting
- I. Denial management and documentation requirements

Learning Assessments:

Course competencies will be assessed by use of discussion questions, graded assignments, comprehensive assignments, research paper, quizzes, and exams.

Instructional Materials:

Textbooks: Smith, L. (2019). *Fordney's Medical Insurance* (15th ed.). Philadelphia, PA: Saunders/Elsevier. ISBN-13: 978-0323594400

Smith, L. (2019). *Workbook for Fordney's Medical Insurance* (15th ed.). Philadelphia, PA: Saunders/Elsevier. ISBN-13: 978-0323594417

Guidelines for Requesting Accommodations Based on Documented Disability or Medical Condition

It is the intention of Highland Community College to work toward full compliance with the Americans with Disabilities Act, to make instructional programs accessible to all people, and to provide reasonable accommodations according to the law.

Students should understand that it is their responsibility to self-identify their need(s) for accommodation and that they must provide current, comprehensive diagnosis of a specific disability or medical condition from a qualified professional in order to receive services. Documentation must include specific recommendations for accommodation(s). Documentation should be provided in a timely manner prior to or early in the semester so that the requested accommodation can be considered and, if warranted, arranged.

In order to begin the process all students **must** complete the "Disabilities Self-Identification Form" on our [Disability Services website](#).

This form can also be accessed at the Highland Community College homepage under Students Services/Student Resources/Disability Service or by contacting the Disabilities Coordinator.

A Note on Harassment, Discrimination and Sexual Misconduct

Highland Community College seeks to assure all community members learn and work in a welcoming and inclusive environment. Title VII, Title IX, and College policy prohibit harassment, discrimination and sexual misconduct. Highland Community College encourages anyone experiencing harassment, discrimination or sexual misconduct to talk to report to the Vice President for Student Services, the Human Resources Director or complete an [online report](#) about what happened so that they can get the support they need and Highland Community College can respond appropriately.

There are both confidential and non-confidential resources and reporting options available to you. Highland Community College is legally obligated to respond to reports of sexual misconduct, and therefore we cannot guarantee the confidentiality of a report, unless made to a confidential resource. Responses may vary from support services to formal investigations. As a faculty member, I am required to report incidents of sexual misconduct and thus cannot guarantee confidentiality. I must provide our Title IX coordinator with relevant details such as the names of those involved in the incident. For more information about policies and resources or reporting options, please review our [Equity Grievance Policy](#).