

**J. Sargeant Reynolds Community College
Course Content Summary**

Course Prefix and Number: HIM 256

Credits: 5

Course Title: Clinical Classification Systems and Reimbursement Methodologies

Course Description: Integrates and applies knowledge with hands-on skill practice in coding. Reinforces reimbursement for CPT coding system, guidelines for out-patient/ambulatory surgery coding, and prospective payment systems and their integration with ICD coding. Promotes critical thinking related to coding quality, fraud, and abuse. **Prerequisites:** BIO 100 or BIO 141 and 142, HIM 110, HIM 141, HIM 250, HIM 260, and HLT 143. **Prerequisite or Co-requisite:** HIM 255. Lecture 2 hours. Laboratory 6 hours. Total 8 hours per week.

General Course Purpose: A requirement for the Medical Records Coder Career Studies Certificate, the purpose of this course is to provide students with an opportunity to think critically about the application of knowledge and hands-on practice in the following areas: quality of coded data, reimbursement for inpatient and outpatient, and potential fraud and abuse issues.

Course Prerequisites and Co-requisites:

Prerequisites: BIO 100 or BIO 141 and BIO 142, HIM 110, HIM 141, HIM 250, HIM 260, and HLT 143

Prerequisite or Co-requisite: HIM 255

Course Objectives:

Upon completing the course, the student will be able to:

- a. Demonstrate electronic applications skills to support clinical classification and coding (i.e., encoders);
- b. Identify steps required for a completed and correct health record review;
- c. Classify diagnosis and procedure codes using the ICD official guidelines;
- d. Establish principal diagnosis (inpatient) or first listed (outpatient);
- e. Establish and assign secondary diagnosis(es), including complications and comorbidities (CC);
- f. Identify complications and comorbidities that affect reimbursement;
- g. Differentiate between principal and secondary procedures and assign appropriate procedure code;
- h. Determine when procedures affect reimbursement;
- i. Apply appropriate CPT coding guidelines;
- j. Identify discrepancy issues with coding and missing supporting documentation;
- k. Identify documentation that can and cannot be utilized for coding purposes;
- l. Compile and utilize reference materials to facilitate accurate code assignment;
- m. Summarize the difference and impact of concurrent versus retrospective coding; and
- n. Understand development and maintenance of the chargemaster.

Major Topics to Be Included:

- a. Quality of coded data
- b. Prospective payment: acute care hospital
- c. Prospective payment: ambulatory surgery
- d. Reimbursement in other health settings
- e. Ethical issues in coding and reimbursement
- f. Reimbursement impact on managed care

Effective Date of Course Content Summary: September 4, 2014