PROGRAM: Health Information Technology

COURSE NUMBER: HITT 1341--Coding and Classification Systems

COURSE DESCRIPTION: Application of basic coding rules, principles, guidelines and conventions.

COURSE PREREQUISITES: BIOL 2404, HITT 1305

COURSE RATIONALE: Careers in Health Information Technology (HIT) are among the most varied and rapidly expanding in the health care fields. HIT professionals are an integral part of the healthcare team in managing and processing healthcare records and clinical data.

COURSE OBJECTIVES: Upon completion of the course the student will be able to:

1. Utilize paper and electronic records for assigning ICD-9 diagnostic and procedure codes.
2. Explain the purposes of classification and coding systems used in health care claims processing.
3. Identify and explain characteristics and conventions used in ICD-9-CM
4. Explain the importance of HIPAA transaction and code set standards in transmitting health information via electronic data interchange (EDI) to include the effective dates for revisions to the ICD-9-CM classification system.
5. Explain the HIPAA transactions and code set regulations to include UHDDS and HEDIS
6. Identify components of billing and payment to include the coding system(s), billing claim form, and payment system used for compliance reporting for the following delivery settings: Physician Office, Hospital Outpatient/ASC and Inpatient.
7. Explain the relationship between medical necessity and ICD-9-CM diagnostic coding in claims processing.
8. Define advance beneficiary notice (ABN) and explain its purpose.
9. Define DSM and identify the delivery setting in which this coding system is used.
10. Interpret and apply official rules, guidelines and documentation requirements in ICD-9 code assignment.
12. Define the clinical terms on the UHDDS: principal diagnosis, other diagnoses, complication, comorbidity, significant procedure and principal procedure.
13. Select the principal diagnosis, principal procedure, additional diagnoses and other significant procedures requiring coding based on the UHDDS definitions.
14. Arrange diagnosis codes for hospital outpatient diagnostic reporting based on admission for unscheduled visit versus scheduled visit.
15. Analyze and abstract pertinent clinical documentation from health care records.
16. Identify the levels of severity in MS-DRGs (MCC, CC, No CC).
17. Define and explain the purpose of casemix indexes.
19. Explain the purpose of "present on admission" indicator with diagnosis codes.
20. Validate ICD-9 codes assigned on case scenarios.
22. Describe the hospital inpatient prospective payment system including how base payment rates are determined and the formula for computing hospital payment.
23. Explain the purpose of EOB/RA forms and differentiate between the delivery settings in which they are used.
24. Explain the revenue cycle monitor.
25. Explain the purpose of Quality Improvement Organizations (QIO) and Recovery Audit Contractors (RAC).
26. Identify and locate website for Medicare regulatory policies and updates (CMS, Federal Register).
27. Differentiate between logic and non-logic based encoding applications software and identify references available through the encoder.
28. Utilize non-logic encoding and grouping software to apply ICD-9 codes and search references such as Coding Clinic.
29. Apply ethical coding standards to support complete and accurate data (AHIMA Code of Ethics and Coding Ethics).
30. Explain the theoretical concepts behind privacy, confidentiality and security policies, procedures and monitoring.
COURSE STUDENT LEARNING OUTCOMES:
The curriculum of the Austin Community College Health Information Technology program is designed to meet or exceed the professional course content as published in the AHIMA Model Curriculum that includes the HIM Entry-Level Competencies and Knowledge Clusters. This course addresses the specific Domains, Subdomains, and Competencies identified below:

Domain I: Health Data Management
Subdomain A: Health Data Structure, Content, and Standards
1. Collect and maintain health data (such as data elements, data sets, and databases).
2. Conduct analysis to ensure that documentation in the health record supports the diagnosis and reflects the patient’s progress, clinical findings, and discharge status.

Subdomain C: Clinical Classification Systems
2. Apply diagnosis/procedure codes according to current nomenclature.
4. Adhere to current regulations and established guidelines in code assignment.
5. Validate coding accuracy using clinical information found in the health record.
6. Use and maintain applications and processes to support other clinical classification and nomenclature systems (ex. DSM IV, SNOMED-CT).
7. Resolve discrepancies between coded data and supporting documentation.

Subdomain D: Reimbursement Methodologies
1. Apply policies and procedures for the use of clinical data required in reimbursement and prospective payment systems (PPS) in healthcare delivery.
2. Apply policies and procedures to comply with the changing regulations among various payment systems for healthcare services such as Medicare, Medicaid, managed care, and so forth.
3. Support accurate billing through coding, chargemaster, claims management, and bill reconciliation processes.
4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding Initiative.
5. Compile patient data and perform data quality reviews to validate code assignment and compliance with reporting requirements, such as outpatient prospective payment systems.

Domain II: Health Statistics, Biomedical Research, and Quality Management
Subdomain A: Healthcare Statistics and Research
1. Collect, maintain, and report data for clinical indices/databases/registries to meet specific organization needs such as medical research and disease registries.
2. Collect, organize, and present data for quality management, utilization management, risk management, and other related studies.
3. Comprehend basic descriptive, institutional, and healthcare vital statistics.

Domain III: Health Services Organization and Delivery
Subdomain B: Healthcare Privacy, Confidentiality, Legal, and Ethical Issues
5. Apply and promote ethical standards of practice.
Domain IV: Information Technology and Systems
Subdomain A: Information and Communication Technologies
1. Use technology, including hardware and software, to ensure data collection, storage, analysis, and reporting of information.

DISCIPLINE/PROGRAM STUDENT LEARNING OUTCOMES:

Upon completion of the Certificate in Medical Coding, the student will be able to:

A. Use common software packages (spreadsheets, word processing, presentation, and graphics) and those software packages specific to Health Information Technology
B. Gather, interpret, analyze and monitor data used for quality management and performance improvement programs that relate to Health Information Technology
C. Analyze and validate coding and coding data accuracy and compliance with federal and coding guidelines
D. Compute, interpret and analyze healthcare statistics
E. Apply and interpret the concepts of the Electronic Health Record (EHR)
F. Apply policies and procedures to comply with reimbursement and reporting requirements that align themselves with major insurance programs, federal healthcare legislation, national diagnoses and procedure coding systems and the process for completion and submission of claims.

Upon completion of the Associate of Applied Science Degree in Health Information Technology, the student will be able to:

A. Appropriately manage and use health data.
B. Collect, report and interpret database information and compute related healthcare statistics.
C. Apply and participate in the implementation of laws and policies and procedures within healthcare delivery systems as they relate to payment systems, healthcare provider information needs, patient privacy and disclosure and ethical standards of practice.
D. Utilize technology, including specialized hardware and software applications to ensure accurate data collection, record tracking, analysis, reporting and will be able to apply and contribute to the application of electronic health records and to the maintenance and design of patient information retrieval systems, while maintaining confidentiality and security of information.
E. Apply the fundamentals of team and financial resource management, including budgeting, teamwork, education, communication and interpersonal skills in order to contribute to work plans, policies and procedures, resource management and others in performance as a member of a team.
SCANS Competencies

In 1990, the U.S. Department of Labor established the Secretary’s Commission on Achieving Necessary Skills (SCANS) to examine the demands of the workplace and whether our nation’s students are capable of meeting those demands. The Commission determined that today’s jobs generally require competencies in the following areas:

- Resources: Identifies, organizes, plans and allocates resources
- Interpersonal: Works with others
- Information: Acquires and uses information
- Systems: Understands complex interrelationships
- Technology: Works with a variety of technologies

The Texas Higher Education Coordinating Board requires that all degree plans in institutions of higher education incorporate these competencies and identify to the student how these competencies are achieved in course objectives.

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<thead>
<tr>
<th>HITT 1341 COMPETENCE</th>
<th>EXAMPLE OF LEVEL</th>
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<tbody>
<tr>
<td>Resources</td>
<td>Identifies resources used in course and allocates time for studying.</td>
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<tr>
<td>Interpersonal</td>
<td>Shares experiences and knowledge with classmates, works as a member of a team for any assigned activities. Participates in class discussion</td>
</tr>
<tr>
<td>Information</td>
<td>Identifies classification systems for inpatient, outpatient and procedures.</td>
</tr>
<tr>
<td>Systems</td>
<td>Identifies systems to use such as encoder, quadramed, or virtual lab.</td>
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<tr>
<td>Technology</td>
<td>Discusses electronic health record with classmates and instructor.</td>
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<tr>
<td>Basic Skills</td>
<td>Reads assigned pages.</td>
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<tr>
<td>Thinking Skills</td>
<td>Identifies and prepares for tests, quizzes and research activities.</td>
</tr>
<tr>
<td>Personal Qualities</td>
<td>Works as a team member for any assigned activities. Asserts self and networks with classmates and virtual lab to obtain information on current topics.</td>
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</tbody>
</table>

TEXTBOOKS:
Basic ICD-9-CM Coding, 2013, Lou Ann Schraffenberger
ISBN: Not published yet

Basic ICD-9-CM Coding Exercises, Lou Ann Schraffenberger
ISBN: 9781584262800
CODE BOOKS:
ICD-9-CM Expert for Hospitals 2013, Publisher: Ingenix
ISBN:

INSTRUCTIONAL METHODOLOGY: Classroom

GRADING SYSTEM: The Health Information Technology courses use the following scale for determination of final grades:

- A = 90-100%
- B = 80-89%
- C = 70-79%
- D = 60-69%
- F = 59% and below

A grade of 70% or above is required for passing any subject area.

METHOD OF EVALUATION: 40% of your grade will be based on assignments/quizzes, and 60% on exams. All grades will be posted on Blackboard.

COURSE POLICIES:

Attendance/Class Participation
Regular and punctual class and laboratory attendance is expected of all students. If attendance or compliance with other course policies is unsatisfactory, the instructor may withdraw students from the class.

Withdrawal Policy
It is the responsibility of each student to ensure that his or her name is removed from the roll should he or she decide to withdraw from the class. The instructor does, however, reserve the right to drop a student should he or she feel it is necessary. If a student decides to withdraw, he or she should also verify that the withdrawal is submitted before the Final Withdrawal Date. The student is also strongly encouraged to retain their copy of the withdrawal form for their records.

The student is required to turn in their program student ID and any equipment or items that belong to the department. Failure to do so may compromise their standing at ACC.

Students who enroll for the third or subsequent time in a course taken since Fall, 2002, may be charged a higher tuition rate, for that course.

State law permits students to withdraw from no more than six courses during their entire undergraduate career at Texas public colleges or universities. With certain exceptions, all
course withdrawals automatically count towards this limit. Details regarding this policy can be found in the ACC college catalog.

**Incompletes**
An instructor may award a grade of “I” (Incomplete) if a student was unable to complete all of the objectives for the passing grade in a course. An incomplete grade cannot be carried beyond the established date in the following semester. The completion date is determined by the instructor but may not be later than the final deadline for withdrawal in the subsequent semester.

Requests for incompletes must be submitted by the following dates:
- Deadline for Fall Semester: Second Friday in November
- Deadline for Spring Semester: Friday following Spring Break
- Deadline for Summer Semester: Friday following the 4th of July

In all cases an incomplete cannot be requested unless 1/2 of the required coursework has been completed. For HITT 1341, you must have completed the following: 75% of the exams and 75% of the homework and assignments.

**Statement on Scholastic Dishonesty**
A student attending ACC assumes responsibility for conduct compatible with the mission of the college as an educational institution. Students have the responsibility to submit coursework that is the result of their own thought, research, or self-expression. Students must follow all instructions given by faculty or designated college representatives when taking examinations, placement assessments, tests, quizzes, and evaluations. Actions constituting scholastic dishonesty include, but are not limited to, plagiarism, cheating, fabrication, collusion, and falsifying documents. Penalties for scholastic dishonesty will depend upon the nature of the violation and may range from lowering a grade on one assignment to an “F” in the course and/or expulsion from the college. See the Student Standards of Conduct and Disciplinary Process and other policies at [http://www.austincc.edu/current/needtoknow](http://www.austincc.edu/current/needtoknow).

The complaints and grades dispute process can also be found at the above site and is located in your Health Information Technology Program handbook at [http://www.austincc.edu/health/hitt/resources.php](http://www.austincc.edu/health/hitt/resources.php)

**Student Rights and Responsibilities**
Students at the college have the rights accorded by the U.S. Constitution to freedom of speech, peaceful assembly, petition, and association. These rights carry with them the responsibility to accord the same rights to others in the college community and not to interfere with or disrupt the educational process. Opportunity for students to examine and question pertinent data and assumptions of a given discipline, guided by the evidence of scholarly research, is appropriate in a learning environment. This concept is accompanied by an equally demanding concept of responsibility on the part of the student. As willing partners in learning, students must comply with college rules and procedures.
Statement on Students with Disabilities
Each ACC campus offers support services for students with documented disabilities. Students with disabilities who need classroom, academic or other accommodations must request them through the Office for Students with Disabilities (OSD). Students are encouraged to request accommodations when they register for courses or at least three weeks before the start of the semester, otherwise the provision of accommodations may be delayed.

Students who have received approval for accommodations from OSD for this course must provide the instructor with the ‘Notice of Approved Accommodations’ from OSD before accommodations will be provided. Arrangements for academic accommodations can only be made after the instructor receives the ‘Notice of Approved Accommodations’ from the student.

Students with approved accommodations are encouraged to submit the ‘Notice of Approved Accommodations’ to the instructor at the beginning of the semester because a reasonable amount of time may be needed to prepare and arrange for the accommodations. Additional information about the Office for Students with Disabilities is available at http://www.austincc.edu/support/osd/

Safety Statement
Austin Community College is committed to providing a safe and healthy environment for study and work. You are expected to learn and comply with ACC environmental, health and safety procedures and agree to follow ACC safety policies. Additional information on these can be found at http://www.austincc.edu/ehs.

Because some health and safety circumstances are beyond our control, we ask that you become familiar with the Emergency Procedures poster and Campus Safety Plan map in each classroom. Additional information about emergency procedures and how to sign up for ACC Emergency Alerts to be notified in the event of a serious emergency can be found at http://www.austincc.edu/emergency/.

Please note, you are expected to conduct yourself professionally with respect and courtesy to all. Anyone who thoughtlessly or intentionally jeopardizes the health or safety of another individual will be dismissed from the day’s activity, may be withdrawn from the class, and/or barred from attending future activities.

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Use of ACC email
All College e-mail communication to students will be sent solely to the student’s ACCmail account, with the expectation that such communications will be read in a timely fashion. ACC
will send important information and will notify you of any college related emergencies using this account. Students should only expect to receive email communication from their instructor using this account. Likewise, students should use their ACCmail account when communicating with instructors and staff. Instructions for activating an ACCmail account can be found at http://www.austincc.edu/accmail/index.php.

For help setting up your ACCeID, ACC Gmail, or ACC Blackboard, see a Learning Lab Technician at any ACC Learning Lab.

Student And Instructional Services
ACC strives to provide exemplary support to its students and offers a broad variety of opportunities and services. Information on these services and support systems is available at: http://www.austincc.edu/s4/

Links to many student services and other information can be found at: http://www.austincc.edu/current/

ACC Learning Labs provide free tutoring services to all ACC students currently enrolled in the course to be tutored. The tutor schedule for each Learning Lab may be found at: http://www.autincc.edu/tutor/students/tutoring.php
<table>
<thead>
<tr>
<th>WEEK/DATES</th>
<th>TOPIC AREA/OBJECTIVE</th>
<th>READING OTHER ASSIGNMENTS</th>
<th>ACTIVITIES** (see Blackboard for details of activities and assignments)</th>
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<tbody>
<tr>
<td>1</td>
<td>Utilize paper and electronic records for assigning ICD-9 diagnostic and procedure codes.</td>
<td>Chapter 1</td>
<td>ICD-9 code assignment exercise using case scenarios, paper records and EHR</td>
</tr>
<tr>
<td>2</td>
<td>Explain the HIPAA transactions and code set regulations to include UHDDS and HEDIS.</td>
<td>Chapter 2</td>
<td>UHDDS Review Exercises</td>
</tr>
<tr>
<td>3</td>
<td>Utilize paper and electronic records for assigning ICD-9 diagnostic and procedure codes.</td>
<td>Chapter 3</td>
<td>Virtual Lab Electronic Records coding exercise</td>
</tr>
<tr>
<td>4</td>
<td>Explain the purposes of classification and coding systems used in health care claims processing.</td>
<td>Chapter 4</td>
<td>Clinical Documentation Abstraction and Coding Exercises</td>
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<td>Classroom discussion : Classification and Coding Systems</td>
</tr>
<tr>
<td>5</td>
<td>Identify and explain characteristics and conventions used in ICD-9-CM</td>
<td>Chapter 5</td>
<td>Discussion: Characteristics and Conventions in ICD-9 CM</td>
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<td>Virtual Lab Coding Exercise</td>
</tr>
<tr>
<td>6</td>
<td>Select the principal diagnosis, principal procedure, additional diagnoses and other significant procedures requiring coding based on the UHDDS definitions.</td>
<td>Chapter 6</td>
<td>Coding Activities: Workbook and/or Virtual Lab and Blackboard</td>
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<td>Analyze and abstract pertinent clinical documentation from health care records.</td>
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<tr>
<td>Chapter</td>
<td>Task Description</td>
<td>Chapter</td>
<td>Discussion/Exercise Title</td>
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<tr>
<td>7</td>
<td>Define and explain the purpose of case mix indexes.</td>
<td>Chapter 7</td>
<td>Class Discussion: Case Mix Indices</td>
</tr>
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<td>8</td>
<td>Identify the levels of severity in MS-DRGs (MCC, CC, No CC).</td>
<td>Chapter 8</td>
<td>Class Discussion: Identification of Severity Index Levels</td>
</tr>
<tr>
<td>10</td>
<td>Differentiate between outpatient and inpatient ICD-9-CM coding guidelines for compliant reporting.</td>
<td>Chapter 10</td>
<td>Case Scenarios: Inpatient and Outpatient ICD-9 Compliance Reporting</td>
</tr>
<tr>
<td>11</td>
<td>Differentiate between outpatient and inpatient ICD-9-CM coding guidelines for compliant reporting. Explain the purpose of &quot;present on admission&quot; indicator with diagnosis codes.</td>
<td>Chapter 11</td>
<td>Compliance Exercise: Outpatient and Inpatient records ICD-9 coding</td>
</tr>
<tr>
<td>12</td>
<td>Describe the hospital inpatient prospective payment system including how base payment rates are determined and the formula for computing hospital payment.</td>
<td>Chapter 12</td>
<td>Prospective Payment System Exercise</td>
</tr>
<tr>
<td>13</td>
<td>Identify components of billing and payment to include the coding system(s), billing claim form, and payment system used for compliance reporting for the following delivery settings: Physician Office, Hospital Outpatient/ASC and Inpatient.</td>
<td>Chapter 13</td>
<td>Case Study: EOB/ABN and Electronic Data Interchange</td>
</tr>
<tr>
<td>14</td>
<td>Explain the purpose of Quality Improvement Organizations (QIO) and Recovery Audit Contractors (RAC).</td>
<td>Chapter 14</td>
<td>Class Discussion: Q10 and RAC</td>
</tr>
<tr>
<td>15</td>
<td>Explain the revenue cycle monitor.</td>
<td>Chapter 15</td>
<td>Classroom Discussion: Revenue Cycle Monitors</td>
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<tr>
<td>Chapter 16</td>
<td>Final Exam</td>
<td>Final Exam</td>
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