MOHAWK VALLEY COMMUNITY COLLEGE, UTICA-ROME, NY

COURSE OUTLINE

1. COURSE DESCRIPTION:

**HM221 Reimbursement Methodologies** C-2, P-3, Cr-3

This course includes a study of classification and coding systems, health information technologies, the revenue cycle and reimbursement, coding compliance, and clinical documentation improvement. (Online Only)

**Prerequisites:** HM201 CPT and HCPCS Level II Coding.

1. STUDENT LEARNING OUTCOMES

**Upon completion of this course the student will be able to:**

1. Utilize technologies for health information management.
2. Validate assignment of diagnostic and procedural codes and groupings in accordance with official guidelines.
3. Describe components of revenue cycle management and clinical documentation improvement.
4. Summarize regulatory requirements and reimbursement methodologies.
5. Determine diagnosis and procedure codes according to official guidelines.
6. Evaluate revenue cycle processes.
7. Evaluate compliance with regulatory requirements and reimbursement methodologies.
8. MAJOR TOPICS:
9. Health Insurance Specialist Career
10. Introduction to Health Insurance
11. Managed Health Care
12. Processing an Insurance Claim
13. Legal and Regulatory Issues
14. ICD-10-CM Coding
15. CPT Coding
16. HCPCS Level II Coding
17. CMS Reimbursement Methodologies
18. Coding Compliance and Clinical Documentation Improvement
19. Essential CMS-1500 Claims Instructions
20. Commercial Insurance
21. BlueCross BlueShield
22. Medicare
23. Medicaid
24. TRICARE
25. Workers’ Compensation