MIDSTATE COLLEGE

411 W. Northmoor Road Peoria, IL 61614 (309) 692-4092 (800) 251-4299 (Winter 2017)

COURSE: AH 220 Medical Office Procedures IV

CREDIT HOURS: 4 quarter credit hours METHOD OF DELIVERY: Arranged

COURSE DESCRIPTION: This course exposes the student to government regulations and procedures for claims filed with Medicare, Medicaid, commercial and private health insurance, managed care systems, Worker's Compensation, and disability benefit programs. The student also learns fee schedule usage, claim-filing processes, tracing delinquent claims, computer/electronic filing, and completion of paper claims. Students will discuss current issues related to private healthcare, managed care systems, access to care and Medicaid/Medicare.

PREREQUISITE: AH 200 Medical Office Procedures III or Department Director Approval

TEXT: EAL Today's Medical Assistant, 3rd Edition

ISBN: 9780323401289

PUBLISHER: Elsevier

TEXT: SimChart for the Medical Office: Learning the Medical Office Workflow, 1st Edition

ISBN: 9780323394239

PUBLISHER: Elsevier

TEXT: Today's Medical Assistant: Clinical and Administrative Procedures, 3rd Edition

ISBN: 9780323312073

PUBLISHER: Elsevier

MATERIALS NEEDED: Taber's Medical Dictionary

REQUIREMENTS FOR COMPLETING THE COURSE:

All competencies must be passed at 70% or better to pass this course regardless of classroom grades. Attendance at 75% or greater and compliance with dress code is required to pass the professionalism competency. Skill competencies may not be attempted more than 3 times. After the first attempt, the best grade attainable will be 70% for that competency. Students must complete assessment tools to the satisfaction of the instructor and standard departmental AH220 exams. Department policy prohibits extra credit work.

Competencies for AH 220 are:

- 1. Perform accounts receivable procedures to patient accounts including posting:
 - a. Charges
 - b. Payments
 - c. adjustments
- 2. VII.p.2 Prepare a bank deposit
- 3. VII.p.3 Obtain accurate patient billing information
- 4. VII.p.4 Inform a patient of financial obligations for services rendered
- 5. VII.a.1 Demonstrate professionalism when discussing patient's billing record
- 6. VII.a.2 Display sensitivity when requesting payment for services rendered

- 7. VIII.p.1 Interpret information on an insurance card
- 8. VIII.P.2 Verify eligibility for services including documentation
- 9. VIII.p.3 Obtain precertification or preauthorization including documentation
- 10. VIII.p.4 Complete an insurance claim form
- 11. VIII.a.1 Interact professionally with third party representatives
- 12. VIII.a.2 Display tactful behavior when communicating with medical providers regarding third party requirements
- 13. VIII.a.3 Show sensitivity when communicating with patients regarding third party requirements
- 14. MSC Perform in a professional manner

Required curriculum topics are preceded by numerical mapping to MAERB core curriculum 2015.

TOPICS: Reimbursement, Health insurance crisis, Reimbursement crisis, Sources for additional information on reimbursement

LEARNING OBJECTIVES: Upon completion of this course, the student will be able to:

- 1. Define bookkeeping terms.
 - a. VII.c.1a Define the following bookkeeping terms charges
 - b. VII.c.1b Define the following bookkeeping terms payments
 - c. VII.c.1c Define the following bookkeeping terms accounts receivable
 - d. VII.c.1d Define the following bookkeeping terms accounts payable
 - e. VII.c.1e Define the following bookkeeping terms adjustments
- 2. VII.c.2 Describe banking procedures as related to the ambulatory care setting
- 3. Identify precautions for accepting payments
 - a. VII.c.3a Identify precautions for accepting the following types of payments cash
 - b. VII.c.3b Identify precautions for accepting the following types of payments check
 - c. VII.c.3c Identify precautions for accepting the following types of payments credit card
 - d. VII.c.3d Identify precautions for accepting the following types of payments debit card
- 4. Describe types of adjustments
 - a. VII.c.4a Describe types of adjustments made to patient accounts including non-sufficient funds check
 - b. VII.c.4b Describe types of adjustments made to patient accounts including collection agency transaction
 - c. VII.c.4c Describe types of adjustments made to patient accounts including credit balance
 - d. VII.c.4d Describe types of adjustments made to patient accounts including third party
- 5. VII.c.5 Identify types of information contained in the patient billing record
- 6. VII.c.6 Explain patient financial obligations for services rendered
- 7. Identify necessary information and filing steps for third party plans
 - a. VIII.c.1a Identify types of third party plans
 - b. VIII.c.1b Identify information required to file a third party claim
 - c. VIII.c.1c Identify the steps for filing a third party claim
- 8. VIII.c.2 Outline managed care requirements for patient referral
- 9. VIII.c.3a Describe processes for verification of eligibility for services
- 10. VIII.c.3b Describe processes for precertification
- 11. VIII.c.3c Describe processes for preauthorization
- 12. Describe coding systems and terms
 - a. IX.c.1 Describe how to use the most current procedural coding system
 - b. IX.c.2 Describe how to use the most current diagnostic classification system
 - c. IX.c.3 Describe how to use the most current HCPCS level II coding system

- d. IX.c.4a Discuss the effects of upcoding
- e. IX.c.4b Discuss the effects of downcoding
- f. IX.c.5 Define medical necessity as it applies to procedural and diagnostic coding

GRADING SCALE:

90 – 100 A

80 - 89 B

70 – 79 C*Students must have a grade of 70% or better on all competencies to pass this course.

60-69 D

0-59 F

MIDSTATE PLAGIARISM POLICY:

Plagiarism is using another person's words without giving credit to the author. Original speeches, publications, and artistic creations are sources for research. If students use the author's words in a paper or assignment, they must acknowledge the source. Plagiarism is strictly against the academic policy of the college and is grounds for failing the course. If repeated, plagiarism may result in suspension from the college. (See the Midstate College catalog and/or Student Handbook for additional information.)

In courses containing writing assignments, the college promotes the use of an electronic resource which compares the student's writing against previously submitted papers, journals, periodicals, books, and web pages. Students and instructors can use this service to reduce the incidence of plagiarism. This electronic resource has been found to conform to legal requirements for fair use and student confidentiality. It is able to provide a report to the student indicating the parts of the assignment that match.

Student Success:

The Office of Student Success is available to students seeking tutoring for individual classes or who need assistance with writing assignments. Information is also available on test taking techniques, how to take notes, developing good study skills, etc. Contact Student Success in Room 110 (in person); (309) 692-4092, extension 1100 (phone); studentsuccess@midstate.edu (email).

This is a standardized syllabus for AH 220. All modifications will be made by the Allied Health program director to maintain consistency. 7/1/15 as

Instructor Information:

Margaret Markley Office 204 692-4092

Office Hours: Posted

E-mail: mmarkley@midstate.edu

Participation Requirements/Policies and Procedures:

- 1. All work is to be completed on time unless unusual circumstances occur. If you miss class, you are expected to use your course outline to determine what you missed. You will have seven days to make arrangements to make up the missed work without penalty. The grade will drop 10% for each week you delay in completing material.
- 2. You are expected to attend all classes and be on time. If you must arrive late or leave during class, please do so quietly. Class is like having a job. Excessive absence will hurt your performance and your ability to pass this class. Excessive absence is more than 6 day classes or more than 3 night classes. If this amount is missed you will fail your professionalism competency and therefore will need to retake this course. If for some reason you are not able to attend class, I am not available to re-teach the missed lesson on a one to one basis. Attendance is expected...not suggested.
- 3. Academic dishonesty is never tolerated and will be referred to the dean.
- 4. You must pass all competencies **BEFORE** taking the final exam.
- 5. Black Ink must be used on all written assignments. Ragged edged paper is not acceptable for assignments. Work should be portfolio quality.
- 6. Please make certain that you cell phone is turned off or on "vibrate" if it must be on. If you must take a call during class, please step out of the class quietly to avoid disrupting the rest of the class. Absolutely no text messaging will be allowed during class time. No phone calls will be allowed during testing.
- 7. You are expected to dress professionally. Either scrubs which consists of white pants or skirt, a royal blue scrub top, and a white lab coat or business casual dress (dress pants or skirt and a nice blouse). Any questions regarding this issue, please don't hesitate to ask.

Examination Information: During this course, the student will be expected to complete thirteen competencies, seven quizzes, a midterm and final exam. Competencies will be performance based and require the student to read a case study and fill out a CMS-1500 form for various types of insurances. Competencies will be averaged together and will be equivalent to a test grade. Quizzes and exams will consist of multiple choice, fill in the blank and true/false questions.

Methods of evaluating student performance: There will be weekly quizzes, discussion articles, four competencies and two tests. The competencies will consist of completing forms for case studies.

Grading Specifications:

	TOTAL POINTS	389
Exams		123
Quiz		100
Competencies Average (Pass/Fail)		C
Homework		166

Lesson Plan

Tutus disations mariany and all disasses assess to all a
Introductions, review syllabi, discuss competencies
Lecture: Chapter 46 Topic: Managing Practice Finances
Objectives:
Define bookkeeping terms
Identify precautions for accepting payments - Describe toward of a live two cuts.
Describe types of adjustments
Identify types of information contained in the patient billing record
• Explain patient financial obligations for services rendered
Complete the Chapter 46 Homework assignment in the eLearning module
Chapter 46 Quiz (25 pts)
This week you need to set up your SIMS account. Please use the number provided
in the book and not on the card that sometimes comes with the book. Complete the following SIMS exercises:
the following Shvis exercises.
12. Complete New Patient Registration for Malcolm Little on page 56
14. Schedule Appointment and Prepare New Patient Forms for Al Neviaser on page 64
15. Schedule Appointment and Prepare New Patient Forms for Ella Rainwater on page 68
62. Document Progress Note and Submit Superbill for Walter Biller page 223 (Note: step 15 you may need to click to the last page of the superbill to get to the screen shown in figure 4-3)
63. Document Medications and Problem List, then Submit Superbill, Update Ledger, and Submit Claim for Norma Washington on page 228
Lecture: Chapter 47
Topic: Medical Coding
Objectives: Describe coding systems and terms
This week you will need to do the following SIMS exercises for the following patients:
64. Talibah Nesser on page 234

	65. Ella Rainwater on page 240
	66. Amma Patel on page 244
	67. Amma Patel on page 246
	68. Diego Lupez on page 249
	69. Ella Rainwater on page 254
	Also review the lecture posted, Read Chapter 47, and complete Chapter 47 Homework in the eLearning module for this course
Week 4	This week you will be completing SIMS exercises 70-75 and completing the Chapter 47 Quiz.
Week 5	Exam over Chapters 46 & 47 Complete SIMS exercises 76-80
Week 6	Lecture: Chapter 48 Part 1 & 2 Topic: Medical Insurance Objectives: • Identify necessary information and filing steps for third party plans • Outline managed care requirements for patient referral • Describe process for verification of eligibility for services • Describe process for precertification • Describe processes for preauthorization • Define a patient centered medical home SIMS Exercises: Complete exercises 81-85 Homework: Read Chapter 48
Week 7	Lecture: Chapter 48 part 3 Topic: Medical Insurance Objectives: • Identify necessary information and filing steps for third party plans • Outline managed care requirements for patient referral • Describe process for verification of eligibility for services • Describe process for precertification • Describe processes for preauthorization SIMS Exercises: Complete exercises 86-90
Week 8	Chapter 48 part 3 Quiz
Week 9	SIMS Exercises: Complete exercises 91-95
Week 10	Lecture Chapter 49 Topic: Billing and Collections Objectives:

	 Explain patient financial obligations for services rendered Identify precautions for accepting payments SIMS Exercises: Complete exercises 96-99 and 106 Homework: Read Chapter 49 and complete Chapter 49 Homework on the eLearning module Final Exam Study Guide
Week 11	Chapter 49 Quiz
	On-campus Competencies (You must make arrangements with me to take your competencies this week)
Week 12	Final Exam