

MA 167B Course Outline as of Spring 2006**CATALOG INFORMATION**

Dept and Nbr: MA 167B Title: INTER DIAG CODING

Full Title: Intermediate Diagnostic and Procedural Coding

Last Reviewed: 3/12/2012

Units		Course Hours per Week		Nbr of Weeks	Course Hours Total	
Maximum	1.50	Lecture Scheduled	2.00	8	Lecture Scheduled	16.00
Minimum	1.50	Lab Scheduled	3.00	1	Lab Scheduled	24.00
		Contact DHR	0		Contact DHR	0
		Contact Total	5.00		Contact Total	40.00
		Non-contact DHR	0		Non-contact DHR	0

Total Out of Class Hours: 32.00

Total Student Learning Hours: 72.00

Title 5 Category: AA Degree Applicable

Grading: Grade Only

Repeatability: 00 - Two Repeats if Grade was D, F, NC, or NP

Also Listed As:

Formerly: MA 67B

Catalog Description:

Continuation of MA 67A, Basic Diagnostic Coding, with emphasis on intermediate ICD-9CM (International Classification of Diseases, 9th Clinical Modification) diagnostic coding, and ICD-9CM and CPT (Current Procedural Coding) procedure coding. Both coding systems will be used in coding various types of ambulatory cases, such as physician office records, outpatient surgery records, and emergency department records, as well as some inpatient cases. The course also includes an overview of reimbursement systems, medical record documentation, and medical data abstraction.

Prerequisites/Corequisites:

Course Completion or Current Enrollment in MA 167 (or MA 167A or MA 67A or MA 68.5 or MSR 68.5) and Course Completion of MA 169 (or MA 68.4 or MSR 68.4)

Recommended Preparation:

Eligibility for ENGL 100 or ESL 100

Limits on Enrollment:**Schedule of Classes Information:**

Description: Continuation of MA 67A with emphasis on intermediate ICD-9CM (International

Classification of Diseases, 9th Clinical Modification) diagnostic coding, and ICD-9CM and CPT (Current Procedural Terminology) procedure coding. Both coding systems will be used in coding various types of ambulatory cases, as well as some inpatient cases. (Grade Only)

Prerequisites/Corequisites: Course Completion or Current Enrollment in MA 167 (or MA 167A or MA 67A or MA 68.5 or MSR 68.5) and Course Completion of MA 169 (or MA 68.4 or MSR 68.4)

Recommended: Eligibility for ENGL 100 or ESL 100

Limits on Enrollment:

Transfer Credit:

Repeatability: Two Repeats if Grade was D, F, NC, or NP

ARTICULATION, MAJOR, and CERTIFICATION INFORMATION:

AS Degree:	Area	Effective:	Inactive:
CSU GE:	Transfer Area	Effective:	Inactive:
IGETC:	Transfer Area	Effective:	Inactive:
CSU Transfer:		Effective:	Inactive:
UC Transfer:		Effective:	Inactive:

CID:

Certificate/Major Applicable:

Both Certificate and Major Applicable

COURSE CONTENT

Outcomes and Objectives:

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

1. Code procedures related to all major body systems using ICD-9CM (International Classification of Diseases - 9th Clinical Modification).
2. Compare and contrast current reimbursement procedures.
3. Describe the various components of a medical record and their usefulness in the coding process.
4. Interpret the medical record through evaluation of the documentation.
5. List the steps involved in coding a medical record.
6. Apply the diagnostic and procedural definitions by choosing the correct principal diagnosis and principal procedure when coding a medical record.
7. Apply the diagnostic and procedural definitions by choosing the correct secondary diagnoses and procedures when coding a medical record.
8. Demonstrate knowledge of proper sequencing of secondary diagnoses and procedures through the application of comorbidity, complication, and/or procedure definitions.
9. Demonstrate accurate medical record coding through the use of official guidelines from ICD-9CM and PPS (Prospective Payment

System).

10. Demonstrate accurate medical record coding through the use of official guidelines from CPT (Current Procedural Terminology).
11. Name the UHDDS (Uniform Hospital Discharge Data Set) items.
12. Abstract UHDDS items from a medical record.

Topics and Scope:

- I. ICD-9CM procedural coding
 - A. Alphabetic index
 - B. Tabular listing
 - C. Operations related to various body systems
 - D. Procedures related to various body systems
 - E. Unique procedural coding situations
- II. Reimbursement systems
 - A. Overview and purpose of PPS (Prospective Payment System)
 - B. PPS components
 - C. Coding under PPS
- III. Overview of a medical record
 - A. Component parts of a medical record
 - B. Documentation requirements
 - C. Physician office records
 - D. Outpatient surgery records
 - E. Emergency department records
 - F. Inpatient medical records
 - G. Reading and interpreting the medical record
- IV. Medical record coding
 - A. Review of important diagnostic and procedural definitions, such as principal diagnosis, principal procedure, and comorbidity
 - B. Review of basic coding book symbols and guides
 - C. Coding book symbols and guides related to reimbursement
 - D. Review of basic coding guidelines
 - E. Coding guidelines related to reimbursement
 - F. Sequencing of diagnoses
 - G. Sequencing of procedures
 - H. Medical record coding steps
5. Medical record abstracting
 - A. Overview of UHDDS
 - B. UHDDS items
 - C. Abstraction of medical data

Assignment:

1. ICD-9CM procedure coding exercises, 3-6 (50% problem solving; 50% skill demonstration).
2. Medical record interpretations, 5-10 (50% problem solving; 50% skill demonstration).
3. Intermediate coding exercises, 15-30 (50% problem solving; 50% skill demonstration).
4. Medical record coding exercises, 5-10 (50% problem solving; 50% skill demonstration).
5. Coding interview.

6. Textbook reading, 10-20 pages per week
7. Coding article review (2-5 pages).
8. Medical record abstracting exercises, 3-6 50% problem solving; (50% skill demonstration).
9. Coding skills performance exam.
10. Quizzes (2-5); final exam.

Methods of Evaluation/Basis of Grade:

Writing: Assessment tools that demonstrate writing skills and/or require students to select, organize and explain ideas in writing.

Coding interview; article review.

Writing
5 - 10%

Problem Solving: Assessment tools, other than exams, that demonstrate competence in computational or non-computational problem solving skills.

Coding exercises.

Problem solving
10 - 25%

Skill Demonstrations: All skill-based and physical demonstrations used for assessment purposes including skill performance exams.

Class performances, Performance exams, Coding exercises.

Skill Demonstrations
10 - 25%

Exams: All forms of formal testing, other than skill performance exams.

Multiple choice, Matching items, Completion

Exams
40 - 65%

Other: Includes any assessment tools that do not logically fit into the above categories.

None

Other Category
0 - 0%

Representative Textbooks and Materials:

ICD-9CM Intermediate Coding Handbook, American Health Information Management Association, (updated yearly).

ICD-9CM Coding Book, Channel Publishing, (updated yearly).

CPT Coding Book, American Medical Association, (updated yearly).