

Course Objectives/Course Outline
Spokane Community College

Course Title: Ambulatory Care Coding
Prefix and Course Number: HIM 214

Course Learning Outcomes:

By the end of this course, a student should be able to:

- Use and maintain electronic applications and work processes to support clinical classification and coding.
- Apply diagnosis/procedure codes according to current nomenclature
- Adhere to current regulations and established guidelines in code assignment
- Validate coding accuracy using clinical information found in the health record.
- Resolve discrepancies between coded data and supporting documentation
- Compile patient data and perform data quality reviews to validate code assignment and compliance with reporting requirements, such as outpatient prospective payment systems

Course Outline:

I. Data Analysis and Management

A. Describe how documentation is abstracted for CPT coding

II. Coding

A. Apply coding guidelines to HCPCS, surgical, radiology, medicine, anesthesia, pathology, and laboratory coding

B. Define CPT conventions, characteristics, and category codes

C. Assign E/M codes based on coding guidelines

D. Assign CPT & HCPCS codes to procedures

E. Choose the appropriate E/M code based on documentation

F. Explain how to look up a CPT code and the general rules for CPT coding

G. Describe how modifiers are assigned to CPT codes and assign modifiers to CPT codes

H. Explain surgical packages

I. Identify the general principles for health record documentation

J. Determine if documentation is appropriate for each E/M code assigned

K. Select the correct CPT & HCPCS code for surgical, E/M, radiology, pathology, anesthesia, and laboratory coding

L. Choose the correct E/M & CPT code based on abstracted data from health record documentation

M. Arrange CPT & HCPCS codes in the correct order

N. Identify when a physician should be queried

O. Describe the national correct coding initiative and coding edits

III. Knowledge Statement

A. Describe how CPT, HCPCS, ICD-9, & ICD-10 codes assist in reimbursement

B. Explain Level I & II HCPCS codes

C. Explain CPT category codes

D. Explain how facilities are reimbursed under OPSS

E. Explain the claims submission process using the UB-04 claim form

F. Explain the claims submission process using the CMS-1500 claim form