

COURSE OUTCOME MATRIX

COURSE SYLLABUS

PART 2 of 3

Course Number and Title	HI125 Inpatient Coding II
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Credit Hours	3
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Course Description	This course is a continuation of HI 120, Inpatient Coding I, and will continue to cover health care reimbursement systems and payers (Medicare, Managed Care Plans). The student will learn basic knowledge of the billing processes, revenue cycle management and prospective payment systems.
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Prerequisite(s) and/or Corequisite(s)	HI120 Inpatient Coding I
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Required Textbooks/References/Course Materials:

Buck's 2021 ICD-10-PCS Professional Edition	2021	Carol Buck	Elsevier Science	0323762816
ICD-10-CM/PCS Coding: Theory and Practice, 2021/2022 Edition, - With Access	2021	Karla R. Lovaasen	Elsevier Science	0323764142
Buck's 2021 ICD-10-CM Hospital, Prof. Edition	2021	Carol J. Buck	Elsevier Science	0323762824

General Education Outcomes	
1	Utilize written and verbal language to discuss and comprehend information, incorporating a variety of technologies, such as text, data, and images (written language, verbal language, and information technology).
2	Identify and interpret relevant information in order to formulate an opinion or conclusion (critical thinking).
3	Demonstrate and communicate computational methods and mathematical reasoning in a variety of formats (using words, tables, graphs, mathematical equations, etc., as appropriate) (quantitative literacy and fluency).
4	Communicate in appropriate ways with those who are culturally diverse (intercultural competence).

Program Outcomes	
1	Describe professional ethics required in the medical coding field.
2	Illustrate knowledge of medical terminology, anatomy and physiology and pathologies of all the body systems when assigning diagnosis and procedure codes.
3	Accurately assign ICD-10-CM/PCS, CPT and HCPCS codes for diagnoses and procedures across all patient care types.
4	Apply the Official Coding Guidelines and Conventions when assigning diagnosis and procedure codes to all patient care types.
5	Differentiate healthcare payment systems, their functions, and their impact on healthcare reimbursement.

	Course Outcomes (CO)	Bloom's Domain for CO (C, A, P), Category, and Level	Program Outcome(s)	Written Language	Verbal Language	Information Technology	Critical Thinking	Quantitative Literacy and Fluency	Intercultural Competence
1	Assign diagnosis and procedure codes using ICD-10-CM/PCS.	C-APPLYING (3)	2,3,4	2	0	2		0	0
2	Apply current ICD-10-CM/PCS Official Guidelines for Coding and Reporting when assigning codes.	C-APPLYING (3)	3,4	2	0	2	2	0	0
3	Identify principal diagnosis and principal procedure by applying the current Official Guidelines for Coding and Reporting.	C-APPLYING (3)	2,3,4	2	0	2	2	0	0
4	Define the approaches and the root operations/types of each all ICD-10-PCS.	C-REMEMBERING (1)	3,4	2	0	2	2	0	0
5	Recognize the importance of the Standards of Ethical Coding.	C-REMEMBERING (1)	1	1	0	0	1	0	0
6	Identify opportunities for physician queries.	C-APPLYING (3)	2,3,4	2	0	2	2	0	0
7	Calculate case-mix-index.	C-UNDERSTANDING (2)	5	1	0	1	1	1	0
8	Recognize the significance of code assignment in relation to MS-DRGs for Reimbursement including the impact of Present on Admission (POA) Indicators.	C-REMEMBERING (1)	3,4,5	2	0	2	2	0	0

Bloom's Domain Legend

C = Cognitive
A = Affective
P = Psychomotor

General Education Outcome Legend

2 = Included and Measurable
1 = Introduced and/or Minimally Addressed and Not Measurable
0 = Not included

Approved: May 2021
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