Course Number and Title	HI212 Healthcare Reimbursement

Credit Hours	2

Course Description	This course addresses healthcare reimbursement methodologies in health care settings, healthcare insurance plans and reimbursement systems, applying payment methodologies and systems, the billing process as it relates to health information management, charge master, revenue cycle management, coding compliance, utilization review and management, and data quality.

Prerequisite(s) and/or Corequisite(s)	HI110 Outpatient Coding I and MA105 Billing and Coding I

Required Textbooks/References/Course Materials:

Principles of Healthcare Reimbursement and Revenue Cycle Management	7th	Anna B. Cast, Susan White	AHIMA	158426800X

	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	Demonstrate healthcare reimbursement methodologies	C - APPLYING (3)	5	1	0	2	1	2	0
2	Identify HIPAA approved code sets.	C - REMEMBERING (1)	3	0	0	0	1	0	0
3	Describe coding compliance issues that influence reimbursement	C - ANALYZING (4)	5	1	0	0	2	1	0
4	Identify commercial healthcare insurance plans.	C - REMEMBERING (1)	5	0	0	2	1	2	0
5	Explain provisions and functions of healthcare insurance plans.	C-UNDERSTANDING (2)	5	1	0	0	2	1	0
6	Discuss Government sponsored healthcare programs.	A-RESPONDING TO PHENOMENA (2)	5	2	0	1	1	1	0
7	Explain the characteristics and types of Managed Care Plans.	C-UNDERSTANDING (2)	5	2	0	2	1	1	1
8	Demonstrate the concepts and elements of Medicare-Medicaid Prospective Payment Systems for inpatient services.	C-APPLYING (3)	5	1	0	2	2	2	0
9	Describe ambulatory and other Medicare-Medicaid reimbursement systems.	C - REMEMBERING (1)	5	1	0	1	2	2	0
10	Discuss Medicare-Medicaid prospective payment systems for postacute care facilities.	A-RESPONDING TO PNENOMENA (2)	5	1	0	2	1	2	0
11	Explain revenue cycle management structure.	C-UNDERSTANDING (2)	5	1	0	1	1	2	0
12	Describe Value-Based Purchasing payment systems.	C-EVALUATING (5)	5	1	0	1	1	0	1

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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