

# HIM 285 : REVENUE CYCLE MANAGEMENT

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## Transcript title

Revenue Cycle Management

## Credits

5

## Grading mode

Standard letter grades

## Total contact hours

80

## Lecture hours

20

## Other hours

60

## Prerequisites

Instructor approval required based on completion of first-year HIM curriculum.

## Course Description

Provides an in-depth study of revenue cycle management from a multi-disciplinary approach. Includes the components of the revenue cycle across health care settings and from the facility/provider prospective versus the patient perspective. Application of knowledge, skills, and abilities accumulated in prior terms related to classification and reimbursement systems.

## Course learning outcomes

1. Compare and contrast components of the revenue cycle, including chargemaster structure and fee schedule structure.
2. Evaluate coding management practices and compliant coding.
3. Analyze and audit claim processing and collection activities.
4. Classify and examine revenue cycle performance indicators and Clinical Documentation Improvement programs.
5. Develop policies and procedures for revenue cycle compliance.

## Content outline

1. Components of the revenue cycle
2. Chargemaster structure, maintenance, and compliance
3. Fee schedule structure, maintenance, and compliance
4. Claims processing, remittance, collection activities
5. Revenue cycle key performance indicators
6. Coding management practices
7. Examine NCCI, NDC, LDC (used in compliant coding)
8. Justify Clinical Documentation Improvement programs
9. Develop revenue cycle compliance policy and procedure
10. Perform revenue cycle analysis

## Required materials

Required textbook. Computer and reliable internet access. Portable storage device (ie. usb drive).