

HIM 286 : CODING CLASSIFICATIONS III

Transcript title

Coding Classifications III

Credits

4

Grading mode

Standard letter grades

Total contact hours

50

Lecture hours

30

Other hours

20

Prerequisites

HIM 284: Coding Classifications II.

Course Description

Provides intermediate skill development in correct code assignment based on the health record documentation and application of coding standards, guidelines, and conventions for the Current Procedural Terminology Coding System and the Healthcare Common Procedure Coding System (HCPCS) Level I and Level II.

Course learning outcomes

1. Apply service guidelines, conventions, and compliant coding standards for coding and reporting of health care services.
2. Abstract appropriate information from health record documentation and correctly code for healthcare procedures, services, and equipment the patient receives.
3. Apply correct code for the purpose of identifying additional services, supplies, transport, and/or drugs used during the course of patient services and procedures.
4. Determine diagnosis, procedure, and service codes utilizing encoder software.

Content outline

1. Format and structure of Current Procedural Terminology (HCPCS Level I)
2. Indexing in CPT
3. Appendixes and Modifiers
4. CPT service guidelines for coding and reporting
5. CPT Category I Sections (E/M, Anesthesia, Surgery, Radiology, Pathology and Laboratory, Medicine)
6. Evaluation and Management Codes (Used to report physician services)
7. Format and structure of HCPCS level II code
8. Service guidelines for coding and reporting HCPCS Level II

Required materials

Required textbook(s) and the current year CPT and ICD-10-CM codebooks. Computer and reliable internet access.