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Basic Course Information

Semester:	Fall 2023	Instructor Name:	Lidia Trejo, CCS, CCMA-AC
Course Title & #:	MA 075	Email:	lidia.trejo@imperial.edu
CRN #:	10809	Webpage (optional):	N/A
Classroom:	2152	Office #:	N/A
Class Dates:	10/09/23-12/09/23	Office Hours:	N/A for part time
Class Days:	Thursday & Friday	Office Phone #:	760-358-6348 (Nursing office)
			Beatriz Trillas-Martinez
Class Times:	4:00-8:20	Emergency Contact:	760-355-6468
Units:	3	Class Format:	Face to face

Course Description

The course provides an overview, instruction and practice on financial procedures, third party billing, insurance, collections and coding practices used in medical offices, outpatient, ambulatory and hospital settings. Introduces Current Procedural Terminology (CPT), Healthcare Common Procedure Coding System (HCPCS), and International Classification of Disease (ICD) procedural principles. The relationship between coding, reimbursement, collections, insurance, administrative procedures and billing are explored. (Nontransferable, AA/AS degree only)

Course Prerequisite(s) and/or Corequisite(s)

MA 071 with a grade of "C" or better. Concurrent enrollment in MA073. AHP 100 with a grade of "C" or better

Student Learning Outcomes

Upon course completion, the successful student will have acquired new skills, knowledge, and or attitudes as demonstrated by being able to:

- 1. Identify the laws and/or regulations related to bookkeeping, billing and collection in a medical office. (ILO2)
- 2. Demonstrate proper coding techniques utilizing current coding processes (ILO2)

Course Objectives

Upon satisfactory completion of the course, students will be able to:

- 1. Define the basic bookkeeping terms such as a. charges, b. payments, c. accounts receivable, d. accounts payable, e. adjustments. (VII.C.1)
- 2. Describe banking procedures as related to ambulatory care setting. (VII.C.2)
- 3. Identify precautions for accepting the following types of payment: a. cash, b. check, c. credit card, d. debit card (VII.C.3)
- 4. Describe types of adjustments made to patient accounts including: a. non-sufficient funds (NSF) check, b. collection agency transaction, c. credit balance, d. third party (VII.C.4)
- 5. Identify types of information contained in the patient's billing record (VII.C.5)
- 6. Explain patient financial obligations for services rendered (VII.C.6)



- 7. Identify types of third-party plans, information required to file a third-party claim and the steps for filing a third-party claim (VIII.C.1)
- 8. Outline managed care requirements for patient referral (VIII.C.2)
- 9. Describe processes for verification of eligibility for services, precertification, and preauthorization (VIII.C.3)
- 10. Differentiate between fraud and abuse (VIII.C.4)
- 11. Describe how to use the most current procedural coding system (IX.C.1)
- 12. Describe how to use the most current diagnostic coding classification system (IX.C.2)
- 13. Describe how to use the most current HCPCS level II coding system (IX.C.3)
- 14. Discuss the effects of: a. upcoding; b. down coding (IX.C.4)
- 15. Define medical necessity as it applies to procedural and diagnostic coding (IX.C.5)
- 16. Utilize medical necessity guidelines (IX.P.3)

Textbooks & Other Resources or Links

[Describe which textbooks and/or other resources are required for the course. Be sure to include ISBN.]
Joanne D Valerius, Nenna L Bayes, Cynthia Newby and Amy L Blochowiak 2020. Medical Insurance. A Revenue Cycle Process Approach. McGraw Hill Education ISBN: 978-1-259-60855-1
Darline Foltz and Karen Lankisch 2018. Exploring Electronic Health Records 3rd. Paradigm ISBN: 9780763881368

Connect. Lab software for Medical Insurance. A Revenue Cycle Process Approach

Course Requirements and Instructional Methods

Class Activity

Group activity may include but not limited to: determine a simulated insurance billing problem Mid-Term/Final Exam(s)

Oral Assignments

Demonstrate skill mastery of assigned topic

Problem Solving Exercise

Individual or group activity in a simulated exercise

Quizzes

Skill Demonstration

Lab assignment, including computer simulated problem

Written Assignments

Out-of-class, or in class written assignment

Out of Class Assignments: The Department of Education policy states that one (1) credit hour is the amount of student work that reasonably approximates not less than one hour of class time and two (2) hours of out-of-class time per week over the span of a semester. WASC has adopted a similar requirement.



Course Grading Based on Course Objectives

Testing: Every student is responsible for taking all examinations. THERE ARE NO MAKE-UPS! Unless prior arrangements are made with the instructor, except for written final or skills final.

To be eligible for a make-up exam, you must notify me (by email) before the start of the exam as to why you cannot be present for the exam. Make-up exams must be taken within one week of the scheduled exam day.

Tests are usually given at the beginning of lecture. Tardy people may attempt the exam if he or she arrives before the last non-tardy student has turned his or her test. When the last non-tardy person turns in the test, all others must be turned in at that time.

Grading is based on points possible therefore I do not use a curve to grade. You must have a "C" or better to continue to each session of the program.

A 90-100% of points possible

B 80-89 % of points possible

C 70-79% of points possible (Minimal requirement to pass this class and to advance to MA074.

Required Information: Provide detailed information related to grading practices and grading scale, including values and totals. Consider adding final grade calculation, rubrics, late assignment policy, and other grading practices.]

Grading Sca	ale (%)
90-100	А
80 - 89	В
70 - 79	С
60 - 69	D
0 - 59	F

Course Policies

ATTENDANCE

- A student who fails to attend the first meeting of a class or does not complete the first mandatory
 activity of an online class will be dropped by the instructor as of the first official meeting of that class.
 Should readmission be desired, the student's status will be the same as that of any other student who
 desires to add a class. It is the student's responsibility to drop or officially withdraw from the class.
 See General Catalog for details.
- Regular attendance in all classes is expected of all students. A student whose continuous, unexcused absences exceed the number of hours the class is scheduled to meet per week may be dropped. For



online courses, students who fail to complete required activities for two consecutive weeks may be considered to have excessive absences and may be dropped.

• Absences attributed to the representation of the college at officially approved events (conferences, contests, and field trips) will be counted as 'excused' absences.

ACADEMIC HONESTY

Academic honesty in the advancement of knowledge requires that all students and instructors respect the integrity of one another's work and recognize the important of acknowledging and safeguarding intellectual property.

There are many different forms of academic dishonesty. The following kinds of honesty violations and their definitions are not meant to be exhaustive. Rather, they are intended to serve as examples of unacceptable academic conduct.

- Plagiarism is taking and presenting as one's own the writings or ideas of others, without citing the source. You should understand the concept of plagiarism and keep it in mind when taking exams and preparing written materials. If you do not understand how to "cite a source" correctly, you must ask for help.
- Cheating is defined as fraud, deceit, or dishonesty in an academic assignment, or using or attempting to use materials, or assisting others in using materials that are prohibited or inappropriate in the context of the academic assignment in question.

Anyone caught cheating or plagiarizing will receive a zero (0) on the exam or assignment, and the instructor may report the incident to the Campus Disciplinary Officer, who may place related documentation in a file. Repeated acts of cheating may result in an F in the course and/or disciplinary action. Please refer to the General Catalog for more information on academic dishonesty or other misconduct. Acts of cheating include, but are not limited to, the following: (a) plagiarism; (b) copying or attempting to copy from others during an examination or on an assignment; (c) communicating test information with another person during an examination; (d) allowing others to do an assignment or portion of an assignment; (e) using a commercial term paper service.

CLASSROOM ETIQUETTE

- Electronic Devices: Cell phones and electronic devices must be turned off and put away during class, unless otherwise directed by the instructor.
- Food and Drink are prohibited in all classrooms. Water bottles with lids/caps are the only exception. Additional restrictions will apply in labs. Please comply as directed by the instructor.
- Disruptive Students: Students who disrupt or interfere with a class may be sent out of the room and told to meet with the Campus Disciplinary Officer before returning to continue with coursework. Disciplinary procedures will be followed as outlined in the General Catalog.
- Children in the classroom: Due to college rules and state laws, only students enrolled in the class may attend; children are not allowed.

IVC Student Resources

IVC wants you to be successful in all aspects of your education. For help, resources, services, and an explanation of policies, visit http://www.imperial.edu/studentresources or click the heart icon in Canvas.



Anticipated Class Schedule/Calendar

Week/date	Topics discussed	Pages/ Due Dates/Tests
Week 1 October 12	First day of class. Syllabus & Introduction. List the main learning objectives or topics covered during this class period.	Read Chapter 1
October 13	Chapter 1 Working in the Medical Insurance Field Medical Insurance Basics Healthcare Plans Health Maintenance Organizations Preferred Provider Organizations Consumer-Driven Health Plans Medical Insurance Payers The Revenue Cycle Achieving Success	Read Chapters 3-4 Tutorials & assignments
Week 2	Chapter 3	
October 19	 New Versus Established Patients Information for New Patients Information for Established Patients Verifying Patient Eligibility for Insurance Benefits Determining Preauthorization and Referral Requirements Determining the Primary Insurance Working with Encounter Forms Understanding Time-of-Service (TOS) Payments Calculating TOS Payments 	Tutorials & assignments
October 20	Chapter 4 ICD-10-CM Organization of ICD-10-CM The Alphabetic Index ICD-10-CM Official Guidelines for Coding and Reporting Overview of ICD-10-CM Chapters Coding Steps ICD-10-CM and ICD-9-CM	Read Chapter 5-6 Tutorials & assignments
Week 3 October 26	Chapter 5 • Current Procedural Terminology, Fourth Edition (CPT)	TEST: CHAPTERS 1, 3 & 4
	 Organization Format and Symbols CPT Modifiers Coding Steps Evaluation and Management Codes 	Tutorials & assignments



Week/date	Topics discussed	Pages/ Due Dates/Tests
	Anesthesia codes	
October 27	Chapter 6	
October 27	Compliance Billing	
	Knowledge of Billing Rules	Read Chapters 7-8
	Compliance Errors	Tutorials & assignments
	Strategies for Compliance	
	• Audits	
	Physician Fees	
	Payer Fee Schedules	
	Calculating RBRVS Payments	
	Fee-Based Payment Methods	
	Capitation	
	Collecting TOS Payments and Checking Out Patients	
Week 4	Chapter 7	
November 2	Introduction to Healthcare Claims	
november 2	 Completing the CMS-1500 Claim: Patient Information 	Tutorials & assignments
	Section	
	• Types of Providers	
	Completing the CMS-1500 Claim: Physician/Supplier	
	Information Section	
	The HIPAA 837P ClaimChecking Claims Before Transmission	
	 Checking Claims Before Transmission Clearinghouses and Claim Transmission 	
	Great inghouses and Gaini Transmission	
November 3	Chapter 8	
	Group Health Plans	Read Chapters 9-10
	Types of Private Payers	Tutorials & assignments
	Consumer-Driven Health Plans	8
	Major Private Payers and the BlueCross BlueShield Association	
	Affordable Care Act (ACA) Plans	
	Participation Contracts	
	Interpreting Compensation and Billing Guidelines	
	Private Payer Billing Management: Plan Summary	
	Grids	
	Preparing Correct Claims	
	• Capitation Management	
Week 5	Chapter 9	
	Eligibility for Medicare	TEST: CHAPTERS 5,6,7 &
November 9	The Medicare Program	8
	Medicare Coverage and Benefits	O O
	Medicare Participating Providers	Tutorials 0 assistant
	Original Medicare Plan	Tutorials & assignments
	Medicare Advantage Plans	
	 Additional Coverage Options 	
	 Preparing Primary Medicare Claims 	



Week/date	Topics discussed	Pages/ Due Dates/Tests
November 10 Week 6	Chapter 10 The Medicaid Program Eligibility State Programs Medicaid Enrollment Verification Covered and Excluded Services Plans and Payments Third-Party Liability Claim Filing and Completion Guidelines Chapter 11	Read Chapters 11-12 Tutorials & assignments
November 16	 The TRICARE Program Provider Participation and Nonparticipation TRICARE Prime TRICARE Select CHAMPVA Filing Claims 	Tutorials & assignments
November 17 Deadline to drop WITH "W"	 Chapter 12 Federal Workers' Compensation Plans State Workers' Compensation Plans Workers' Compensation Terminology Claim Process Disability Compensation and Automotive Insurance Plans 	Read Chapters 13-14 Tutorials & assignments
Week 7 November 30	 Chapter 13 Claims Adjudication Monitoring Claim Status The Remittance Advice (RA) Reviewing RAs Procedures for Posting Appeals Post-payment Audits, Refunds, and Grievances Billing Secondary Payers The Medicare Secondary Payer (MSP) Program, Claims, and Payments 	TEST: CHAPTERS 9,10,11 & 12 Tutorials & assignments
December 1	 Chapter 14 Patient Financial Responsibility Working with Patients' Statements The Billing Cycle Organizing for Effective Collections Collection Regulations and Procedures Credit Arrangements and Payment Plans 	Tutorials & assignments Study for Final
Week 8 December 7	***FINAL TEST***	TEST: CHAPTERS 13 & 14



Week/date	Topics discussed	Pages/ Due Dates/Tests

^{***}Tentative, subject to change without prior notice***