

COURSE OUTLINE

Coding Certification Test Preparation

Course Description

BE 128. Coding Certification Test Preparation. 3 hours credit. Prerequisite: BE 127 with a C or better. This course will enable the student to meet the requirements to take a national coding certification test. The student will extensively review the proper assignment of CPT, ICD-9, and HCPCS codes.

Course Relevance

The review of the proper assignment of CPT, ICD-9, and HCPCS codes will prepare the student to sit for a national coding certification test. Passing of this test will enable the student to be qualified to apply for a coder position in a medical facility.

Required Materials

Physician's Current Procedural Terminology (CPT), current edition

American Medical Association. *International Classification of Disease - Clinical Modifications (ICD-9-CM)*, current edition

HCPCS Level II, current edition

Learning Outcomes

The intention is for the student to be able to

1. Accurately assign CPT, ICD-9, and HCPCS codes for case studies.

Learning PACT skills that will be developed and/or documented in this course

Through the student's involvement in this course, he/she will develop his/her ability in the following PACT skill areas:

Analytical Thinking Skills

1. Critical Thinking
 - Through applying Centers for Medicare and Medicaid Services (CMS) guidelines in coding diagnoses and procedures the student develops critical thinking skills

Major Summative Assessment Task

These learning outcomes and the Learning PACT skills will be demonstrated by:

1. Completing a final project that uses a case study demonstrating the student's ability to accurately assign codes for diagnosis and procedures

Course Content

- I. Themes - Key recurring concept that run throughout this course:
 - A. Precisely code diagnoses and procedures
- II. Issues - Key areas of conflict that must be understood in order to achieve the intended outcome.

- A. Reading comprehension
- B. Following instructions
- III. Concepts - Key concepts that must be understood to address the issues:
 - A. Proper use of CPT, ICD-9, and HCPCS codes
 - B. Proper use of modifiers
- IV. Skills/Competencies - Actions that are essential to achieve the course outcomes
 - A. Assign accurate ICD-9 codes per case studies
 - B. Assign accurate HCPCS codes per case studies
 - C. Assign accurate CPT codes per case studies
 - D. Demonstrate an understanding of the purpose of modifiers

Learning Units

- I. ICD-9 Codes
 - A. Alphabetical and tabular index, descriptions of symbols, indentation system, and guidelines for specificity
 - B. Various coding tables (neoplasm, drug and chemical, hypertension.)
 - C. Assign diagnosis codes to case studies
- II. CPT Codes
 - A. Conventions used in the coding book
 - B. Procedure codes to case studies
- III. HCPCS
 - A. HCPCS levels
 - B. Characteristics of the HCPCS Level II coding system
 - C. HCPCS codes to case studies

Learning Activities

Learning activities will be geared toward developing a confidence in assigning ICD-9, CPT, and HCPCS codes in case studies. These will include exercises and tests.

Grade Determination

The student will be graded on learning activities and assessment tasks. Grade determinants may include the following: daily work, quizzes, chapter or unit tests, comprehensive examinations, student projects, student presentations, class participation, and other methods of evaluation employed at the discretion of the instructor.