



Medical Coding and Billing Part 2

Welcome to MC012: Medical Coding and Billing Part 2!

Please read the information in this syllabus before proceeding to the course materials.

Credits 1 credit hour

Prerequisites MC011

INSTRUCTIONAL TEAM

Our Academic Advisors are available to help you when you need it. They are trained to provide answers to your questions about the course or program.

Phone: 1-800-224-7234

Hours: 8:30AM – 8:30PM (Eastern Standard Time), Monday-Friday

MAIL

James Madison High School
6625 The Corners Parkway, Suite 500
Norcross, GA 30092

TEXTBOOKS

Buck's Physician Coding Exam Review 2021

Buck's Step-by-Step Medical Coding, 2021 Edition

The Electronic Health Record for the Physician's Office, 3rd Edition

Buck's 2021 ICD-10-CM for Physicians

Buck's 2021 HCPCS Level II

CPT: 2021 Professional Edition

COURSE DESCRIPTION

Students learn the fundamentals of medical billing and coding and are prepared to take the Certified Billing and Coding Specialist (CBCS) exam from the National Healthcareer Association, the Certified Professional Coder (CPC®) exam from the American Academy of Professional Coders (AAPC), and the Certified Coding Associate (CCA®) exam from the American Health Information Management Association (AHIMA). Program topics include EOBs, refunds, and appeals; and workers' compensation. Students receive in-depth training on ICD-10-CM/PCS, CPT, and HCPCS code assignment.

IMPORTANT NOTE: The exam costs are not covered by JMHS. CBCS and CCA candidates must be High School graduates. Additional requirements such as membership and applications can be found with each certifying agency: [CBCS](#), [CPC®](#), [CCA®](#)



LEARNING OBJECTIVES

After completing Medical Coding and Billing Part 2, students will be able to:

- Summarize the life cycle of a typical insurance claim and explain the processing steps that must be completed before claims and other forms can be submitted to the insurance company
- Explain the purpose of medical coding and accurately code diagnoses and procedures using industry-standard coding systems published by the World Health Organization (WHO) and the American Medical Association (AMA)
- Accurately assign ICD-10-CM/PCS, CPT, and HCPCS codes for diagnoses, procedures, and medical services as part of the insurance reimbursement process

LESSONS	TOPICS
Lesson 1: Electronic Health Records and Security	Explanation of an EHR, who is able to document in the EHR, and the owner of the EHR. Further, the lesson discusses the transition from paper records and functions of the electronic software. The lesson ends with both the advantages and disadvantages of EHR
Lesson 2: Administrative and Clinical Use of the EHR	This lesson describes the bigger picture of how electronic health records are used to document patient encounters to create a full picture of a patient visit. Then, you'll learn how the EHR is composed and how the fields of the EHR are filled in.
Lesson 3: Reimbursement and Personal Health Records	Your third lesson begins with healthcare reimbursement through third-party payers and the revenue cycle. You'll learn about coding systems for diagnosis and services rendered at a patient's visit and how these are related to medical necessity, in addition to the documents needed for proper claims to the health plans. The lesson ends with types of personal health records, advantages of using a patient health record, how to create a personal health record, and patient portals that are tethered through EHRs.
Lesson 4: Electronic Medical Records Final Graded Project	To complete this graded project, you'll use the SimCharts simulation. This simulation is offered through the online Evolve platform. Access to this simulation is provided with your course. Using SimCharts will give you the opportunity to apply what you have learned in this course.
Lesson 5: Introduction to Coding	This lesson will introduce you to the exciting field of medical coding. You'll learn about ICD-10 medical codes and the steps involved in assigning codes using code will lead you step by step through a wide range of ICD-10 coding examples, offering invaluable tips and suggestions along the way. The tips and suggestions in Basic Medical Coding Using ICD-10 will serve as a foundation for your next two courses, Intermediate Medical Coding and Advanced Medical Coding. Be sure to complete all Quick Checks and Exercises in your textbook to help you fine-tune coding skills and master the fine points of ICD-10 coding and a wide range of medical terms. Doing so will further sharpen your skills, strengthen your ability to accurately interpret terms, and translate terms into accurate codes.



Lesson 6: Diagnosis Coding with ICD-10-CM	In this lesson, you'll learn how medical coders use ICD-10-CM to assign codes to diagnoses. It's vital that medical coders understand codes should be assigned following first-listed diagnosis guidelines to ensure accurate billing. Additionally, medical coders must always follow a number of steps in order to assure accurate codes. You'll learn about both first-listed diagnosis and the steps to assign proper codes in this lesson.
Lesson 7: Specific Guidelines for Using ICD-10-CM	In this lesson, you'll learn many of the chapter-specific guidelines that govern code assignments in the ICD-10-CM. These chapter-specific guidelines are organized by certain systems of the body. As you'll learn, each system has a number of guidelines that must be considered when assigning codes for organs in that system. Following the instructions in the ICD-10-CM and knowing where to look in each category will ensure you assign codes accurately.
Lesson 8: Procedure Coding with ICD-10-PCS	In this lesson, you'll learn about the next manual in your study of medical coding, ICD-10-PCS. This code set is used to assign procedures from a patient's medical record. As with the ICD-10-CM, there are many guidelines that must be followed in order to ensure accurate coding. The ICD-10-CM and the ICD-10-PCS codes combined will provide an accurate record of the diagnosis and procedures for each patient.
Lesson 9: Basic Medical Coding Graded Project	Now that you're familiar with the ICD-10-CM and ICD-10-PCS coding manuals, you're ready to try your hand at assigning codes to medical records. Be sure to use your knowledge of the guidelines governing each code set as you look up and assign each code. Once you've mastered these coding sets, you'll be ready to move on to the next part of your training to become a medical coder in Intermediate Medical Coding.
Lesson 10: Introduction to CPT Coding	HCPCS Level I and HCPCS Level II are the two code sets used to assign procedure codes in the outpatient setting. HCPCS Level I is the Current Procedural Terminology (CPT) manual. Updated and published annually by the American Medical Association, the CPT manual is used to describe and report medical procedures and services performed by physicians and other healthcare professionals. Note CPT codes focus specifically on procedures, not diagnoses or conditions. HCPCS Level II covers patient services not covered under CPT. Coders will use the HCPCS Level II to code certain types of medical supplies, such as drugs and special types of medical equipment, and for certain groups of healthcare professionals, such as ambulance personnel, orthodontists, and dentists.
Lesson 11: Evaluation and Management and Anesthesia Coding	<p>This lesson starts with a review of the first section in the CPT manual, which is the one you'll use most often: Evaluation and Management (E/M). It's important to note this particular section isn't broken down by specialty; but by type of setting where the patient sees their doctor.</p> <p>You'll also learn how to apply codes in the Anesthesia section when billing for the anesthesiologist's services, as well as the special modifiers that apply to anesthesia coding only.</p>
Lesson 12: Surgical CPT Coding, Part 1	Codes in the Integumentary System section cover procedures performed on the skin, nails, breasts, and other areas of the integumentary system. You'll assign codes from the Musculoskeletal System section when a patient is seen for the repair of bone fractures and dislocations, wound explorations, grafts, spinal fixation procedures, cast and splint applications, as well as other procedures. Patients presenting with respiratory disorders such as asthma and bronchitis will receive treatments classified to the Respiratory System



	<p>section. In the Respiratory System section, you'll code for endoscopies, removal of lesions and foreign bodies, as well as other procedures. Procedures coded to the Cardiovascular System section include pacemaker insertions, removal of tumors in the heart, coronary artery bypass, excision of blood clots and blood masses, and other cardiovascular procedures.</p>
Lesson 13: Surgical CPT Coding, Part 2	<p>The hemic system consists of blood and bone marrow, which produces blood. The lymphatic system plays an important role in maintaining the immune system and in the transportation of fluids, proteins, and fats.</p> <p>The digestive system includes structures that process food, disseminate nutrients, and eliminate wastes from the body. Digestive system codes report procedures performed on the lips, mouth, pharynx, palate, uvula, intestines, appendix, colon, rectum, anus, and liver. The urinary system section contains procedures that pertain to the kidney, urethra, ureter, and bladder. The male genital system section contains codes for procedures that pertain to the male anatomy, such as the penis, testis, scrotum, and vas deferens.</p>
Lesson 14: Surgical CPT Coding, Part 3	<p>Codes in the Endocrine and Nervous Systems have to do with hormones secreted directly into the bloodstream and with response mechanisms and nerve impulses transmitted throughout the body. Codes in the Eye, Ocular Adnexa, and Auditory Systems cover surgical procedures related to the eyes and ears. Radiology lists codes for x-rays, ultrasounds, and nuclear medicine procedures.</p> <p>Pathology/Laboratory includes codes for chemistry panels, drug assays, organ and disease panels, anatomic pathology, and cytopathology, among others. Medicine codes are used for many procedures, including dialysis, ophthalmology, allergy testing, and right and left heart catheterization.</p>
Lesson 15: Graded Project	<p>Now that you've learned how CPT and HCPCS Level II codes are assigned, you'll use your skills by completing a graded project. In the project, you'll assign codes for a number of procedures using the CPT and HCPCS Level II manuals.</p>
Lesson 16: Anatomy, Terminology, and Pathophysiology	<p>This lesson will reinforce the anatomy, terminology, and pathophysiology of the various body systems. This lesson should serve largely as a review of what you've already learned about body systems. If you find yourself struggling with any areas in this lesson, be sure to stop and carefully review the content in your review textbook.</p>
Lesson 17: Reimbursement Issues and HCPCS Coding	<p>You'll begin this lesson by reviewing how to resolve and prevent reimbursement issues. You'll review E/M and anesthesia coding. Finally, you'll review HCPCS coding.</p>
Lesson 18: CPT Coding	<p>In this lesson, you'll review the guidelines for coding for services using the CPT manual. You'll review each section of the CPT and the specific guidelines that pertain to each section.</p>
Lesson 19: ICD-10-CM Coding	<p>In this lesson, you'll review the codes assigned from the ICD-10-CM manual. You'll first review the overview and guidelines for the ICD-10-CM. Then, you'll review each chapter of the ICD-10-CM to refresh yourself on the chapter-specific guidelines for each chapter. Finally, you'll review outpatient coding.</p>
Lesson 20: Post Exam	<p>When you began your Billing and Coding Professional Certification Exam Review course, you took a Pre-Exam to assess your understanding of the concepts you've learned throughout your program. The Post-Exam you take in this lesson will allow you to see how you've improved and where you might need to review as you prepare to take the Final Exam for this course.</p>



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Lesson 21: Final Exam

Now that you've reviewed the body systems and how to code using each of the coding manuals, you'll complete another sample certification exam. This final exam will allow you to demonstrate the progress you've made by studying throughout this course.



GRADING

The following point totals correspond to the following grades:

POINTS	GRADE
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100-90	A
89-80	B
79-70	C
65-69	D
Below 65	F

James Madison High School allows 2 attempts on exams. If a student is not satisfied with his/her score on the 1st attempt, an exam may be resubmitted. The 2nd attempt is not required as long as the final course average is above 65%. The higher of the 2 attempts will be the score that counts towards the final average.

Exams are timed and once you begin an exam, the timer runs continuously, even if you leave the course. Refer to the exam instructions for the time limit (in most cases 3 hours), but the time limit cannot be spread over multiple days.





GRADE WEIGHT

TOPIC	ACTIVITY	PERCENTAGE
Lesson 1: Electronic Health Records and Security	MC Quiz	4.76%
Lesson 2: Administrative and Clinical Use of the EHR	MC Quiz	4.76%
Lesson 3: Reimbursement and Personal Health Records	MC Quiz	4.76%
Lesson 4: Electronic Medical Records Final Graded Project	MC Quiz	4.76%
Lesson 5: Introduction to Coding	MC Quiz	4.76%
Lesson 6: Diagnosis Coding with ICD-10-CM	MC Quiz	4.76%
Lesson 7: Specific Guidelines for Using ICD-10-CM	MC Quiz	4.76%
Lesson 8: Procedure Coding with ICD-10-PCS	MC Quiz	4.76%
Lesson 9: Basic Medical Coding Graded Project	Assignment	4.76%
Lesson 10: Introduction to CPT Coding	MC Quiz	4.76%
Lesson 11: Evaluation and Management and Anesthesia Coding	MC Quiz	4.76%
Lesson 12: Surgical CPT Coding, Part 1	MC Quiz	4.76%



Lesson 13: Surgical CPT Coding, Part 2	MC Quiz	4.76%
Lesson 14: Surgical CPT Coding, Part 3	MC Quiz	4.76%
Lesson 15: Graded Project	Assignment	4.76%
Lesson 16: Anatomy, Terminology, and Pathophysiology	MC Quiz	4.76%
Lesson 17: Reimbursement Issues and HCPCS Coding	MC Quiz	4.76%
Lesson 18: CPT Coding	MC Quiz	4.76%
Lesson 19: ICD-10-CM Coding	MC Quiz	4.76%
Lesson 20: Post Exam	Assignment	0%
Lesson 21: Final Exam	Assignment	4.8%

ACADEMIC AND COURSE POLICIES

Please see the Academic Policies section in the James Madison High School Catalog for information on Course policies, including the Exam/Assignment Retake Policy, Grading Policy, Academic Honesty Policy, and Student Conduct Policy.