Common Course Outline
HIIT 205
ICD-10 Medical Coding
3 Credits

Community College of Baltimore County

Description

HIIT 205 – ICD-10 Medical Coding prepares students to code medical records using the International Classification of Diseases (ICD-10) classification system. Students learn ICD-10 Clinical Modification (ICD-10 CM) and ICD-10 PCS (Procedural Coding System) coding guidelines for coding diseases, conditions, injuries, complications, and inpatient procedures. Students code a variety of sample medical records, including records for inpatient, outpatient, same-day surgery, emergency room, clinic, and physician office settings.

3 Credits: 3 lecture hours; 1 lab hour

Prerequisites: HIIT 101 and MDAS 141
Co-requisite: BIOL 160

Overall Course Objectives

Upon completion of this course students will be able to:
1. spell, define, build, and pronounce medical terms;
2. identify the basic parts of inpatient and outpatient medical records;
3. differentiate among various types of medical records and the coding guidelines that apply to each;
4. recognize the appropriate coding methodology for physician offices, emergency departments, acute care hospitals, ambulatory clinics, and other healthcare settings;
5. apply official ICD-10 CM/PCS coding guidelines;
6. code medical records using the ICD-10 PCS coding system;
7. identify discrepancies between coded data and supporting documentation;
8. defend and discuss the logic of choosing a particular ICD-10 CM/PCS code;
9. audit medical records coded by others;
10. abstract codes from medical records;
11. evaluate the accuracy of diagnostic/procedural groupings;
12. discuss the proper procedures for making coding corrections to a medical record;
13. apply confidentiality, privacy, and security regulations, laws, policies, and procedures to protect health information;
14. utilize coding resources, including websites, publications, and organizations;
15. utilize computerized Encoder program and compliance software; and
16. explain the relationship between reimbursement and coding.

Major Topics
I.   ICD-10 Classification System
II.   ICD-10 CM/PCS Coding Guidelines
III. Diagnostic Related Group (DRG)
IV.   Reimbursement
    A. Diagnostic Related Groups (DRG)
    B. Medicare Severity Diagnosis Related Groups (MS-DRG)
    C. All Patient Diagnosis Related Groups (APR-DRG)
V.   National Correct Coding Initiative (NCCI)
VI.   Legal, Security, and Privacy Regulations
VII. Electronic Coding and Auditing of Medical Records
VIII. Encoder and Other HIM Software Programs

Course Requirements

Grading procedures will be determined by the individual faculty member but will include the following:

Grading/exams
- A minimum of 5 weekly coding assignments
- A minimum of 2 graded discussion board assignments
- A minimum of 4 quizzes
- Comprehensive coding project
- Midterm
- Comprehensive final exam

Date Revised: 05/04/2017