9/9/2024   DATE
☑ REQUIRED COURSE
☐ ELECTIVE COURSE

BUS   DIVISION
☐ NEW COURSE
☑ REVISION

Lake Land College
Course Information Form

COURSE NUMBER:	MCS-060		TITLE: *(30 Characters Max)*		Medical Ins Reimbursement		

SEM CR HRS:	3	Lecture:		3	Lab:	0		ECH:	3

Course Level:	☐ Gen Ed / IAI ☐ Baccalaureate /Non-IAI	☑ Career/Technical ☐ Dev Ed/ Not in Degree Audit	Clinical Practicum:	0	Work-based Learning:	0	WBL ECH:	0

COURSE PCS #	12 - 51.0707	IAI Code	N/A	Contact Hours (Minutes/Week)		

Repeatable (Y/N):	N	Pass/Fail (Y/N):	N	Variable Credit (Y/N):	N	Min:	Max:	16 Wks	150	8 Wks	300

Prerequisites:	None
Corequisites:	None
Catalog Description: (40 Word Limit)	An advanced course concerning medical insurance billing and reimbursement. This course will focus on insurance companies such as Blue Cross and Blue Shield, Medicare and Medicaid.

List the Major Course Segments (Units)	Contact Lecture Hours	Contact Lab Hours	Clinical Practicum	Work-based Learning
Healthcare Reimbursement Methodologies	5			
Clinical Coding and Coding Compliance	6			
Voluntary Healthcare Insurance Plans	5			
Government-Sponsored Healthcare Programs	6			
Managed Care Plans	5			
Medicare-Medicaid Prospective Payment System for Inpatients	7			
Ambulatory and Other Medicare-Medicaid Reimbursement Systems	5			
Revenue Cycle Management	6			
TOTAL	45	0	0	0

EVALUTION

QUIZZES ☑	EXAMS ☑	ORAL PRES ☐	PAPERS ☑
LAB WORK ☐	PROJECTS ☑	COMP FINAL ☑	OTHER ☐

COURSE MATERIALS

TITLE:	Principles of Healthcare Reimbursement with CD
AUTHOR:	Anne Casto and Elizabeth Layman
PUBLISHER:	American Health Information Management Association
VOLUME/EDITION/URL:	7th Edition
COPYRIGHT DATE:	2021

MAJOR COURSE SEGMENT	HOURS	LEARNING OUTCOMES
		The student will be able to:
Healthcare Reimbursement Methodologies	5	1. Describe basic language associated with healthcare reimbursement methodologies. 2. Differentiate payment methods on unit of payment, timeframe, and risk. 3. Distinguish major payment methods in the United States. 4. Discuss concepts and definitions related to the types of healthcare reimbursement methodologies. 5. Research state insurance commissions and state insurance departments.
Clinical Coding and Coding Compliance	6	1. Differentiate the different code sets approved by the Health Insurance Portability and Accountability Act of 1996. 2. Name the structure of approved code sets. 3. Examine coding compliance issues that influence reimbursement. 4. Develop ongoing review and monitoring schedules for audit reviews on coding and coding compliance. 5. Research the Office of Inspector General and guidelines for current year reviews. 6. Introduce ICD-10-CM.

Voluntary Healthcare Insurance Plans	5	1. Differentiate major types of voluntary healthcare insurance plans. 2. Define basic language associated with reimbursement by commercial healthcare insurance plans and by Blue Cross and Blue Shield Plans. 3. Explain common models and policies of payment for commercial healthcare insurance plans and for Blue Cross and Blue Shield plans. 4. Research several voluntary healthcare insurance plans and provide the differences between each plan. 5. Evaluate and compare high-risk insurance plans offered to patients in individual states.
Government-Sponsored Healthcare Programs	6	1. Differentiate among and identify the various government-sponsored healthcare programs. 2. Understand the history of the Medicare and Medicaid programs in America. 3. Recognize the impact that government-sponsored healthcare programs have on the American healthcare system. 4. Describe the Tricare program and the different coverage provided by each division. 5. Name the requirements for Worker's Compensation coverage. 6. Research Medicare Part A, B, and D and explain the differences among coverage.
Managed Care Plans	5	1. Describe origins of managed care. 2. Trace the evolution of managed care. 3. Describe types of managed care plans. 4. Name the steps necessary to appeal a denial of health care coverage. 5. Research the Medicaid program and managed care options in your state.
Medicare-Medicaid Prospective Payment System for Inpatients	7	1. Differentiate major types of Medicare and Medicaid prospective payment systems for inpatients. 2. Define basic language associated with reimbursement under Medicare and Medicaid prospective payment systems. 3. Explain common models and policies of payment for inpatient Medicare and Medicaid prospective payment systems. 4. Research the Medicare Provider Analysis and Review file maintained by the Centers for Medicare and Medicaid Services. 5. Compare the prospective payment systems for a Skilled Nursing Facility, Long-Term Care Hospital, and In-patient Rehabilitation Facility. 6. Review the Federal Register and regulations regarding current prospective payment systems. 7. Calculate the adjusted payment rate for a Skilled Nursing Facility, Long-Term Care Hospital, and In-patient Rehabilitation Facility.
Ambulatory and Other Medicare-Medicaid Reimbursement Systems	5	1. Differentiate major types of Medicare and Medicaid reimbursement systems for beneficiaries. 2. Define basic language associated with reimbursement under Medicare and Medicaid healthcare payment systems. 3. Explain common models and policies of payment for Medicare and Medicaid healthcare payment systems for physician and out-patient settings. 4. Research the development of resource-based relative value scale (RBRVS). 5. Compare the cost and reimbursement of procedures performed in different settings.
Revenue Cycle Management	6	1. Understand the components of the revenue cycle. 2. Define revenue cycle management. 3. Describe the importance of effective revenue cycle management in a provider's fiscal stability. 4. Name the different components of an integrated revenue cycle. 5. Research articles concerning the revenue cycle and management. 6. Identify the need for an annual audit on the revenue cycle.
	45	

Outcomes*	At the successful completion of this course, students will be able to:
Course Outcome	Describe basic language associated with healthcare reimbursement methodologies
Course Outcome	Compare and contrast high-risk insurance plans offered to patients in individual states
Course Outcome	Define Medicare Part A, B and D and explain the differences among coverage
Primary Laker Learning Competency	Information & Technology Literacy: Students not only identify when information is necessary, but they also find, evaluate and use that information effectively with the appropriate technological tools.
Secondary Laker Learning Competency	Critical Thinking: Students connect knowledge from various disciplines to formulate logical conclusions and judgments.

Course and program outcomes will be used in the software for outcomes assessment and should include at least 1 primary and 1 secondary Laker Learning Competency. Limit to 3-5.