Washtenaw Community College Comprehensive Report

MBC 224 Medical Insurance and Reimbursement Effective Term: Winter 2020

Course Cover

Division: Health Sciences **Department:** Health Science

Discipline: Medical Billing and Coding

Course Number: 224 Org Number: 15900

Full Course Title: Medical Insurance and Reimbursement

Transcript Title: Med Ins and Reimbursement

Is Consultation with other department(s) required: No

Publish in the Following: College Catalog, Time Schedule, Web Page **Reason for Submission:** Three Year Review / Assessment Report

Change Information:

Consultation with all departments affected by this course is required.

Rationale: Master syllabus update. Proposed Start Semester: Fall 2019

Course Description: This introductory course is for students interested in a career in a medical office as a medical assistant, a receptionist or an insurance biller/coder. The course covers the fundamentals of health insurance, including plan options, carrier requirements, state and federal regulations, selecting relevant information from source documents, accurately completing claim forms and coding diagnoses and procedures. The student will be introduced to a variety of medical insurers, including Medicare, Medicaid, Blue Cross/Blue Shield, Tricare, CHAMPVA, Workers' Compensation and other third-party payers. Students should have basic computer and data entry skills. Medical software will be utilized to complete billing and coding exercises.

Course Credit Hours

Variable hours: No

Credits: 4

Lecture Hours: Instructor: 60 Student: 60

Lab: Instructor: 0 **Student:** 0 **Clinical: Instructor:** 0 **Student:** 0

Total Contact Hours: Instructor: 60 Student: 60

Repeatable for Credit: NO Grading Methods: Letter Grades

Audit

Are lectures, labs, or clinicals offered as separate sections?: NO (same sections)

College-Level Reading and Writing

College-level Reading & Writing

College-Level Math

Requisites

Prerequisite

HSC 124 minimum grade "C"

and

Prerequisite

BIO 109 minimum grade "C"

or

Prerequisite

BIO 111 minimum grade "C"

General Education

General Education Area 7 - Computer and Information Literacy

Assoc in Arts - Comp Lit

Assoc in Applied Sci - Comp Lit

Assoc in Science - Comp Lit

Request Course Transfer

Proposed For:

Student Learning Outcomes

1. Identify diagnoses and procedures from source documents (medical charts, encounter forms, provider notes).

Assessment 1

Assessment Tool: Exam

Assessment Date: Winter 2021

Assessment Cycle: Every Three Years

Course section(s)/other population: All sections Number students to be assessed: All students How the assessment will be scored: Answer key

Standard of success to be used for this assessment: 75% of students will score 75% or higher.

Who will score and analyze the data: Departmental faculty

2. Recognize types of medical insurance and identify characteristics that differentiate them from one another.

Assessment 1

Assessment Tool: Exam

Assessment Date: Winter 2021

Assessment Cycle: Every Three Years

Course section(s)/other population: All sections Number students to be assessed: All students How the assessment will be scored: Answer key

Standard of success to be used for this assessment: 75% of students will score 75% or higher.

Who will score and analyze the data: Departmental Faculty

3. Complete medical insurance claim forms for third-party payers.

Assessment 1

Assessment Tool: Exam

Assessment Date: Winter 2021

Assessment Cycle: Every Three Years

Course section(s)/other population: All sections Number students to be assessed: All students How the assessment will be scored: Answer key

Standard of success to be used for this assessment: 75% of students will score 75% or higher.

Who will score and analyze the data: Departmental faculty

Course Objectives

1. Determine diagnoses and procedures from charts, encounter forms, and operative reports.

- 2. Discuss the processing of payers' remittance advices (RAs/EOBs) and patient billing/collections.
- 3. Process charges, payments, and adjustments to patient accounts.
- 4. Complete HIPAA-compliant health care claims for Medicare, Medicaid, and TRICARE/CHAMPVA.
- 5. Complete HIPAA-compliant health care claims for Workers' Compensation.
- 6. Complete HIPAA-compliant health care claims for private payers, including Blue Cross and Blue Shield Plans, commercial carriers, and managed care organizations.
- 7. Demonstrate a working knowledge of HIPAA, legal, and ethical consideration with emphasis on confidentiality.
- 8. Demonstrate a working knowledge of HIPAA, legal, and ethical consideration with emphasis on fraud related to insurance.
- 9. Follow the steps involved in the billing cycle.

New Resources for Course

Course Textbooks/Resources

Textbooks Manuals Periodicals Software

Equipment/Facilities

Reviewer	Action	Date
Faculty Preparer:		
Kiela Samuels	Faculty Preparer	Jun 26, 2019
Department Chair/Area Director:		
Rene Stark	Recommend Approval	Jul 01, 2019
Dean:		
Valerie Greaves	Recommend Approval	Jul 12, 2019
Curriculum Committee Chair:		
Lisa Veasey	Recommend Approval	Aug 14, 2019
Assessment Committee Chair:		
Shawn Deron	Recommend Approval	Aug 29, 2019
Vice President for Instruction:		
Kimberly Hurns	Approve	Sep 04, 2019