



BROWARD COLLEGE COURSE OUTLINE

LAST REVIEW:

(i.e. 2003-2004)

NEXT REVIEW:

(i.e. 2008-2009)

STATUS: A

(A, I, D)

COURSE TITLE: Reimbursement Methodology

COMMON COURSE NUMBER: HIM 1260

CREDIT HOURS: 2

CONTACT HOUR BREAKDOWN

(per 16 week term)

CLOCK HOURS:

(Voc. Course ONLY)

Lecture: 32

Lab: 0

Clinic: 0

Other: 0

PREREQUISITE(S): HIM 1000, HIM 1253, HIM 1253L

COREQUISITE(S):

PRE/COREQUISITE(S):

COURSE DESCRIPTION: *(750 characters, maximum)*

This course examines the complex financial systems within today's healthcare environment and provides an understanding of the basics of health insurance and public funding programs, managed care contracting and how services are paid. In addition to the step by step details about how each payment system functions, a brief historical review is also provided the student for a greater understanding of the impact has had on all stakeholders.

UNIT TITLES

1. Introduction to Healthcare Reimbursement
2. The Clinical Coding Reimbursement Connection
3. Healthcare Insurance Plans
4. Government Sponsored Healthcare Programs
5. Managed Care Plans
6. Prospective Payment Systems
7. Ambulatory Payment Systems
8. Revenue Cycle Management
9. Quality Issues
10. CMS 1500 and UB 04 Billing Fundamentals Review

EVALUATION:

Please provide a brief description *(250 characters maximum)* that details how students will be evaluated on the course outcomes.

Assessment, Learning Activities assigned and presentations prepared by students.

Common Course Number: HIM 1260

UNITS

Unit 1 Introduction to Healthcare Reimbursement

General Outcome:

- 1.0 The student shall: be able to explain basic concepts and principles of healthcare reimbursement in step by step simple terms.**

Specific Measurable Learning Outcomes:

Upon successful completion of this unit, the student shall be able to:

- 1.1** to use basic language with healthcare reimbursement methodology
- 1.2** to differentiate payment methods on unit of payment, time frame and risk
- 1.3** to distinguish major payment methods in the United States

Unit 2 The Clinical Coding – Reimbursement Connection

General Outcome:

- 2.0 The student shall: be able to explain the interrelationship between clinical coding and reimbursement.**

Specific Measurable Learning Outcomes:

Upon successful completion of this unit, the student shall be able to:

- 2.1** differentiate the different code sets approved by HIPAA 1996
- 2.2** explain the impact of clinical coding on reimbursement

Unit 3 Healthcare Insurance Plans

General Outcome:

- 3.0 The student shall: gain an understanding of healthcare insurance policy**

Specific Measurable Learning Outcomes:

Upon successful completion of this unit, the student shall be able to:

- 3.1** differentiate major types of voluntary healthcare insurance plans
- 3.2** define basic language associated with reimbursement by commercial healthcare insurance plans and by Blue Cross and Blue Shield plans
- 3.3** explain common models and policies of payment for commercial healthcare insurance plans and for Blue Cross and Blue Shield plans

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Unit 4 Government Sponsored Healthcare Plans

General Outcome:

4.0 The student shall: explain the impact that government sponsored healthcare plans have on the American healthcare systems

Specific Measurable Learning Outcomes:

Upon successful completion of this unit, the student shall be able to:

- 4.1 differentiate among and to identify the various government sponsored healthcare programs
- 4.2 understand the history of the Medicare and Medicaid programs in the United States
- 4.3 recognize the impact of government sponsored healthcare programs on the American healthcare system

Unit 5 Managed Care Plans

General Outcome:

5.0 The student shall: discuss the origins, evolution and principles of managed care and understand the numerous types of plans that have emerged.

Specific Measurable Learning Outcomes:

Upon successful completion of this unit, the student shall be able to:

- 5.1 describe the origins of managed care
- 5.2 trace evolution of managed care
- 5.3 describe the types of managed care plans

Unit 6 Prospective Payment Systems

General Outcome:

6.0 The student shall: gain an understanding of prospective payment systems and the impact on healthcare systems of the United States.

Specific Measurable Learning Outcomes:

Upon successful completion of this unit, the student shall be able to:

- 6.1 differentiate major types of Medicare and Medicaid prospective payment systems for inpatients
- 6.2 define basic language associated with reimbursement under Medicare and Medicaid prospective payment systems
- 6.3 explain common models and policies of payment for inpatient Medicare and Medicaid PPS

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Unit 7 Ambulatory Payment Systems

General Outcome:

7.0 The student shall: explain common models and policies of payment for ambulatory payment systems at different levels of care.

Specific Measurable Learning Outcomes:

Upon successful completion of this unit, the student shall be able to:

- 7.1 Differentiate major types of Medicare and Medicaid reimbursement systems for beneficiaries
- 7.2 Define basic language associated with reimbursement under Medicare and Medicaid healthcare payment systems
- 7.3 Explain common models and policies of payment for Medicare and Medicaid healthcare payment systems for physicians and outpatient settings.

Unit 8 Revenue Cycle Management (RCM)

General Outcome:

8.0 The student shall: be able to explain the components of revenue cycle management, defines and describe the connection between effective RCM and providers' fiscal stability.

Specific Measurable Learning Outcomes:

Upon successful completion of this unit, the student shall be able to:

- 8.1 understand the components of the revenue cycle
- 8.2 define revenue cycle management
- 8.3 describe the importance of effective revenue cycle management in a provider's fiscal stability
- 8.4 explain the HIM roles in an effective RCM process

Unit 9 Quality Issues

General Outcome:

9.0 The student shall: understand the history of pay for performance in the USA and the quality initiatives for hospital inpatient and outpatient settings.

Specific Measurable Learning Outcomes:

Upon successful completion of this unit, the student shall be able to:

- 9.1 use basic language associated with healthcare reimbursement methodologies
- 9.2 differentiate payment methods on unit of payment, time frame and risk
- 9.3 distinguish major payment methods in the United States

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Unit 10 CMS 1500 and UB 04 Insurance and Billing Fundamentals Review

General Outcome:

10.0 The student shall: have a basic understanding of CMS 1500 and UB04 field requirements for insurance billing

Specific Measurable Learning Outcomes:

Upon successful completion of this unit, the student shall be able to:

- 10.1** Explain claims forms and when each is type is used
- 10.2** Describe patient data requirements for CMS 1500 and UB 04