

MEDC 210, Insurance Claim Procedures, Syllabus (3 credits)

COURSE DESCRIPTION

This course offers an in-depth review of insurance documents, procedures for processing claims, procedures for handling rejections and denials of claims, billing and collection procedures, ethical standards, and reimbursement cash flow.

REQUIRED TEXTS & RESOURCES

- Fordney, M. (2018). *Insurance Handbook for the Medical Office* (14th ed.). Saunders.
- https://www.youtube.com/watch?v=A4-pklsDT_Q
- <https://www.youtube.com/watch?v=Dqabs9xysYA>

COURSE SCHEDULE

Each course begins on a Wednesday with a Getting Started module before moving into the week 1-7 content. The introduce yourself forum is required during the Getting Started module in order to be counted present during this half-week of instruction. The introduce yourself forum is open from the start of the course to the first Sunday. All posts are due by Sunday at 11:59 p.m. Participation is required to be marked present for this time period. Keep in mind that in future weeks, forum due dates may be different.

Unless stated otherwise, graded assignments are due on the last day of the course week (Sunday). <http://point.edu/course-schedules/>

Learning Activities	Graded Assignments	
Preview Week	Course Introduction	
	Review the Syllabus	
	Review Preview Week Introduction	
	Participate in Course Orientation	
	Introduce Yourself Forum (registers attendance)	mandatory
Week 1		
	Unit 1: Compliance, Privacy, Fraud and Abuse in Insurance Billing	
	Welcome Discussion (Introductions and meet and greet your classmates)	Due in Preview Week by Day 3 (Wednesday)
	Read Chapter 2: Compliance, Privacy, Fraud, and Abuse in Insurance Billing	N/A

	Review Lecture PPT Presentation: Chapter 2	N/A
	Online Discussion Questions Asynchronous Discussion 1: Nancy receives a call from the human resources manager at a nearby hospital. He wants to verify that a prospective employee had been treated for drug addiction and is no longer receiving treatment for this ailment since the hospital's insurance does not cover such treatment. Nancy remembers this patient and is anxious to help her get a good job. She pulls the patient's chart and gives the information necessary to verify that the patient was no longer under treatment for drug addiction. What, if anything, did Nancy do wrong?	Due Week 1 Day 5 (Friday) Initial Post. One participation post response by the end of the week Due Week 1 Day 7 (Sunday)
	Assignment #1: Discuss the difference in fraud and abuse and give an example of each one. This will be a 500-750 word paper written in APA format. At least one source will be needed and it will be listed in APA format as well.	Due Week 1 Day 7 (Sunday)
	Project #1: Consent vs. Authorization. Students will create a powerpoint that tells the difference in these. They will need to include at least 10 slides and include speakers notes on each slide as well.	Due Week 1 Day 7 (Sunday)
	Complete Quiz #1 – Chapter 2	Due Week 1 Day 7 (Sunday)
Week 2		
	Unit 2: Basics of Health Insurance and Medical Documentation and the Electronic Health Record	
	Read Chapter 3: Basics of Health Insurance	N/A

	Read Chapter 4: Medical Documentation and the Electronic Health Record	N/A
	Review Lecture PPT Presentation: Chapter 3	N/A
	Review Lecture PPT Presentation: Chapter 4	N/A
	Online Discussion Questions Asynchronous Discussion 2: Mrs. Cassidy called her physician's office complaining that her insurance company was billed twice for her office visit on November 19. Carole pulled Mrs. Cassidy's file and verified this was true. She apologized for the error and assured Mrs. Cassidy she would correct this error. What steps should be taken to avoid duplicate billing?	Due Week 2 Day 5 (Friday) Initial Post. One participation post response by the end of the week Due Week 2 Day 7 (Sunday)
	Assignment #2: Students will create manuals or study guides for insurance billing specialists in which they describe how to perform prospective and retrospective reviews. They should include tips and strategies on when and how often to perform these reviews.	Due Week 2 Day 7 (Sunday)
	Final Project #2: Discuss methods of keeping "tickler" files. What are some different ways of maintaining these files? What are some filing systems that can be used? Students will create a powerpoint that tells the difference in these. They will need to include at least 10 slides and include speakers notes on each slide as well.	Due Week 2 Day 7 (Sunday)
	Complete Quiz #2: Chapters 3 and 4	Due Week 2 Day 7 (Sunday)
Week 3		
	Unit 3: Diagnostic and Procedural Coding	

	Read Chapter 5: Diagnostic Coding	N/A
	Read Chapter 6: Procedural Coding	N/A
	Review Lecture PPT Presentation: Chapter 5	N/A
	Review Lecture PPT Presentation Chapter 6	N/A
	Online Discussion Questions Asynchronous Discussion 3: Phil was seen for lower back pain. The doctor listed kidney infection as the diagnosis. Why wouldn't he or she use lower back pain as the diagnosis?	Due Week 3 Day 5 (Friday) Initial Post. One participation post response by the end of the week Due Week 3 Day 7 (Sunday)
	Assignment #3: Create timelines showing the history of diagnostic coding. They should include landmark national or world events at or near each entry to round out the timeline and help them remember the dates. This will be done in a chart format. References must be cited.	Due Week 3 Day 7 (Sunday)
	Final Project #3: Have students create a reference manual, which lists and explains each section and component of the Current Procedural Terminology (CPT) code book. Include the code categories and appendices, as well as the subcategories, categories II and III codes, and symbols. Use APA format for references.	Due Week 3 Day 7 (Sunday)
	Complete Quiz #3 : Chapters 5 and 6	Due Week 3 Day 7 (Sunday)
Week 4		
	Unit 4: The Paper Claim CMS1500 and the Electronic Claim	
	Read Chapter 7: The Paper Claim CMS-1500	N/A

	Read Chapter 8: The Electronic Claim	N/A
	Review Lecture PPT Presentation: Chapter 7	N/A
	Review Lecture PPT: Presentation: Chapter 8	N/A
	<p>Online Discussion Questions Asynchronous Discussion 4: Mr. Parker recently applied for life insurance. He called his primary care physician because the application form had a section to be filled out by his physician. He had a complete physical examination only 2 months ago and hoped another visit would be unnecessary. What are the guidelines in this case?</p> <p>Assignment #4: Discuss steps that can be taken to minimize the number of returned claims. This will be a 500-750 word paper written in APA format. At least one source will be needed and it will be listed in APA format as well.</p>	<p>Due Week 4 Day 5 (Friday) Initial Post. One participation post response by the end of the week</p> <p>Due Week 4 Day 7 (Sunday)</p>
	Final Project #4: create a secure flow process to safeguard information in various forms, such as patient health information, medical records files and databases, a lab report, a fax from a referring physician, etc. This can be done in an infographic format.	Due Week 4 Day 7 (Sunday)
	Complete Quiz #4 : Chapters 7 and 8	Due Week 4 Day 7 (Sunday)
Week 5		
	Unit 5: Receiving Payments and Insurance Problem Solving and Office and Insurance Collection Strategies	

	Read chapter 9: Receiving Payments and Insurance Problem Solving	N/A
	Read chapter 10: Office and Insurance Collection Strategies	N/A
	Review lecture PPT Presentation: Chapter 9	N/A
	Review lecture PPT Presentation: Chapter 10	N/A
	Online Discussion Questions Asynchronous Discussion 5: A multiple EOB/RA comes back to a large group practice filled with details of the status of claims including a voucher (check), suspended claims, denials, and rejections for various patients and physicians. What are some steps the medical office administrator can take to record the completed transactions and address any outstanding problems?	Due Week 5 Day 5 (Friday) Initial Post. One participation post response by the end of the week Due Week 5 Day 7 (Sunday)
	Assignment #5: Students will write about the Medicare Part B levels of redetermination. This will be a 500-750 word paper written in APA format. At least one source will be needed and it will be listed in APA format as well.	Due Week 5 Day 7 (Sunday)
	Final Project #5: Students will create an outline for a patient information letter welcoming them to the practice and spelling out copayment requirements and patient responsibilities, payment options, etc.	Due Week 5 Day 7 (Sunday)
	Complete Quiz #5: Chapters 9 and 10	Due Week 5 Day 7 (Sunday)
Week 6		
	Unit 6: The Blue plans, Private Insurance, Managed Care Plans, Medicare, Medicaid and other state programs	

	Read Chapter 11: The Blue plans, Private Insurance, and Managed Care Plans	N/A
	Read Chapter 12: Medicare	N/A
	Read Chapter 13: Medicaid and Other State Programs	N/A
	Review Lecture PPT Presentation: Chapter 11	N/A
	Review Lecture PPT Presentation: Chapter 12	N/A
	Review Lecture PPT Presentation: Chapter 13	N/A
	Online Discussion Questions Asynchronous Discussion 6: Lucy, a 22-year-old, just entered the workforce and must choose a health care plan offered through her new company. She says she is daunted not only by the variety of managed care plan options, but by all the acronyms associated with those options. She asks you what the main differences are among IPAs, PPOs, and POSs.	Due Week 6 Day 5 (Friday) Initial Post. One participation post response by the end of the week Due Week 6 Day 7 (Sunday)
	Assignment #6: Students should come up with five categories of eligibility for Medicare and write them in an infographic. They will also include the different Medicare Plans, such as A, B, D	Due Week 6 Day 7 (Sunday)
	Final Project #6: Students will create a powerpoint with examples of Medicaid health services for mothers and children. They will also discuss the federal medical assistance percentage, Medicaid's eligibility verification system, and Medicaid's remittance advice.	Due Week 6 Day 7 (Sunday)
	Complete Quiz #6: Chapters 11, 12, 13	Due Week 6 Day 7 (Sunday)
Week 7		

	Unit 7: Tricare, Veterans Health Care, Workers' Compensation and Disability Programs	
	Read Chapter 14: TRICARE and Veterans' Health Care	N/A
	Read Chapter 15: Workers' Compensation	N/A
	Read Chapter 16: Disability Income Insurance and Disability Benefit Programs	N/A
	Review lecture PPT Presentation: Chapter 14	N/A
	Review lecture PPT Presentation: Chapter 15	N/A
	Review lecture PPT Presentation: Chapter 16	N/A
	Online Discussion Questions Asynchronous Discussion 7: Mrs. Harlan is the wife of an active duty service member who is enrolled in TRICARE Standard. She has battled postpartum depression since the birth of her second child, two months earlier, and has decided to seek the services of a mental health professional. What procedure must she follow for these services to be covered by TRICARE Standard?	Due Week 7 Day 5 (Friday) Initial Post. One participation post response by the end of the week Due Week 7 Day 7 (Sunday)
	Assignment #7: Students will create scenarios for different patients who have a preexisting condition and are injured at work. It should detail how the medical office should handle documentation and record keeping to ensure completeness and accuracy.	Due Week 7 Day 7 (Sunday)
	Final Project #7: Students will list additional documents that may be required by insurance companies to complete a disability claim. They should explain why each document might be needed and	Due Week 7 Day 7 (Sunday)

	give examples of when it would be necessary.	
	Complete Quiz #7 : Chapters 14, 15, 16	Due Week 7 Day 7 (Sunday)

GRADING POLICIES

Course Evaluation Plan

An assessment instrument (checklist, rubric, quiz, etc.) will accompany each major graded assignment. See the instructions for specific assignment criteria and accompanying grading instruments.

Points Distribution

Graded assignments will be distributed as follows:

Graded Assignments	Points Possible
Weekly Course Discussions – 60 points each	420
Weekly Faith Integration Discussions - 60 points each	420
Learning Activity – Assignment #1	200
Learning Activity – Project #1	200
Learning Activity – Assignment #2	200
Learning Activity – Project #2	200
Learning Activity – Assignment #3	200
Learning Activity – Project #3	200
Learning Activity – Assignment #4	200
Learning Activity – Project #4	200
Learning Activity – Assignment #5	200
Learning Activity – Project #5	200
Learning Activity – Assignment #6	200
Learning Activity – Project #6	200
Learning Activity – Assignment #7	200
Learning Activity – Project #7	200
Weekly Quizzes – 90 points each	630
Total Points:	4,270

Final Grades

The following scale will be used when calculating final grades:

A	90-100%	D	60-69%
B	80-89%	F	0-59%
C	70-79%		

Final grades will be posted according to the Academic Calendar:

<http://point.edu/academic-calendar/>

COURSE LEARNING GOALS & OBJECTIVES

TIME REQUIREMENTS & COMMITMENTS

This course is 3 credit hours. Regarding time on task, students can expect to spend approximately 16 hours per week for an undergraduate course.

COURSE GOALS AND OBJECTIVES		Program Objective(s)
Goal 1: Compliance, Privacy, Fraud, and Abuse in Insurance Billing		
	Objective 1.1: Students will have the opportunity to become familiar with the electronic health information process	1.2, 2.6
	Objective 1.2: Students will have the opportunity to apply necessary knowledge for the release of patient information and maintain HIPAA privacy rules.	1.2, 2.6
	Objective 1.3: Students will have the opportunity to utilize consent forms, authorization forms, and develop guidelines for a compliance plan.	1.2, 2.6
Goal 2: Basics of Health Insurance and Medical Documentation and the Electronic Health Record		
	Objective 2.1: Students will have the opportunity to become familiar with the four concepts of a valid insurance contract and how to explain the difference between an implied and express physician-patient contract.	1.2, 2.6
	Objective 2.2: Students will have the opportunity to describe, in general terms, the important federal, state, and private health insurance plans.	1.2, 2.6
	Objective 2.3: Students will have the opportunity to learn list four actions to prevent problems when given signature authorization for insurance claims.	1.2, 2.6
	Objective 2.4: Students will have the opportunity to learn how to handle insurance claims in the physician's office to obtain payment and minimize rejection by insurance carriers.	1.2, 2.4, 2.6
	Objective 2.5: Students will have an opportunity to identify steps in the medical documentation process, explain why medical documentation is required, and discuss principles of documentation.	1.2, 2.1, 2.2, 2.6
	Objective 2.6: Students will have an opportunity to learn about the documents required for an internal review of medical records, and they will be able to learn how to describe the difference between a prospective and retrospective review of records.	1.1, 1.2, 2.3, 2.6
	Objective 2.7: Students will have an opportunity to learn why an insurance company decides to perform an external audit of medical records and how to identify principles relating to the release and retention of medical records.	1.2, 2.6

	Objective 2.8: Students will have an opportunity to learn how to formulate a procedure for termination of a case and prepare letters of appeal.	1.2, 2.6
	Objective 2.9: Students will have an opportunity to learn techniques used for fax confidentiality and how to respond appropriately to the subpoena of a witness or record.	1.2, 2.6
Goal 3: Diagnostic and Procedural Coding		
	Objective 3.1: Students will have the opportunity to learn the history of diagnostic coding and the purpose and importance of coding diagnoses.	1.1, 1.2, 2.1, 2.3
	Objective 3.2: Students will have the opportunity to learn procedural terminology and how to properly use a procedure code book.	1.1, 1.2, 2.2, 2.3
	Objective 3.3: Students will have the opportunity to learn the difference between CPT and RVS coding systems, as well as various methods of payment by insurance companies and state and federal governments.	1.2, 2.2, 2.3
Goal 4: The Paper Claim CMS1500 and the Electronic Claim		
	Objective 4.1: Students will have the opportunity to learn the history of the Health Insurance Claim Form (CMS-1500 [02-12]) and when the claim form may or may not be used	1.2, 2.4, 2.5
	Objective 4.2: Students will have the opportunity to learn the differences among clean, pending, rejected, incomplete, and invalid claims.	1.2, 2.4, 2.5
	Objective 4.3: Students will have the opportunity to learn reasons why claims are rejected, and how to abstract relevant information from the patient record for properly completing the CMS insurance claim form will be discussed.	1.2, 2.4, 2.5
	Objective 4.4: Students will have the opportunity to learn how to select an office computer system, types of carrier agreements, the use of forms, and other materials and processes that are part of electronic claim submission.	1.2, 2.5
Goal 5: Receiving Payments and Insurance Problem Solving and Office and Insurance Collection Strategies		
	Objective 5.1: Students will have the opportunity to learn about the overall picture of where and when insurance claim problems occur, as well as some potential solutions to those problems.	1.2, 2.4, 2.5, 2.6
	Objective 5.2: Students will have the opportunity to learn about claim policy provisions, the role of the state insurance commissioner, claim management techniques, and specifics on appeals processes, including Medicare and TRICARE review and appeal.	1.2, 2.5, 2.6
	Objective 5.3: Students will have the opportunity to learn about accounts receivable (A/R), including payments and unpaid	1.2, 2.5, 2.6

	balances due from patients; setting, adjusting, and collecting fees; payment options; and billing and collecting.	
	Goal 6: The Blue plans, Private Insurance, Managed Care Plans, Medicare, Medicaid and other state programs	
	Objective 6.1: Students will have the opportunity to learn the differences between private insurance and managed care and how managed care options affect reimbursement.	1.2, 2.6
	Objective 6.2: Students will have the opportunity to learn the essentials of Medicare policies and regulations, payment, and reimbursement.	1.2, 2.6
	Objective 6.3: Students will have the opportunity to learn about Medicaid and other state-administered health programs, including eligibility criteria, benefits, managed care coverage, and claim and after-claim procedures.	1.2, 2.6
	Objective 6.4: Students will also have an opportunity to become familiar with printouts from a point-of-service device and the Medicaid remittance advice form.	1.2, 2.6
	Goal 7: Tricare, Veterans Health Care, Workers' Compensation and Disability Programs	
	Objective 7.1: Students will have the opportunity to learn the eligibility criteria and regulations of TRICARE and Veterans Health Administration health care programs for military personnel and dependents.	1.2, 2.6
	Objective 7.2: Students will have the opportunity to demonstrate completion of a CHAMPVA claim form.	1.2, 2.6
	Objective 7.3: Students will have the opportunity to learn about the background, purpose, and correct application of workers' compensation insurance.	1.2, 2.6
	Objective 7.4: Students will have the opportunity to learn about disability income insurance terminology and various benefit program options.	1.2, 2.6
	Objective 7.5: Students will have the opportunity to learn about federal and state disability programs including eligibility criteria, reporting mechanisms, and documentation processes used to file medical reports for disability claims.	1.2, 2.6

DISABILITY SERVICES

Point University is committed to providing qualified students with disabilities an equal opportunity to access a Point education through the provision of reasonable and appropriate accommodations and support services. Accordingly, Point complies with Title IX (<https://point.edu/title-ix>) of the Educational Amendments of 1972 and the subsequent reauthorization of that act, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990 and subsequent amendments to that act. For more information about Disability Support Services, see the "Consumer Information" section of the website

(<http://point.edu/disclosures>) and the “Student Services” section of this catalog, or contact the Director of Disability Services and College Section 504 Coordinator, at disability.services@point.edu.

COURSE EXPECTATIONS

Attendance

A student is expected to actively participate in each week of the class in which he or she is enrolled. Active participation each academic week includes submitting classwork in one or more of the following activities within the course during the week they are due: discussion forums, assignments such as (but not limited to) projects, papers, presentations, case studies, quizzes, or exams. Students may be absent up to 25% of the class. After absences exceed 25% of the session or term’s total – in either consecutive or cumulative days – the student will be withdrawn from the class roster and assigned a grade on the basis of work completed at the time of withdrawal unless, because of exceptional circumstances, prior arrangements have been made with the professor and the Chief Academic Officer.

Students representing the university, such as student-athletes, remain responsible for submitting work online within the week it is due to be counted present. No student will be disadvantaged while representing the university. However, the responsibility is on the student to notify faculty no later than one week before missing class for any reason, to ensure time for content to be made available to them and for make-up work to be considered and arranged. It is expected that students will limit their absences outside of these required absences, as they will be dropped if they overcut the allowed number of absences.

The full attendance policy is found in the catalog (<https://point.edu/catalogs/>).

Etiquette & Netiquette

Students are expected to be respectful and well-mannered towards the instructor and their peers, whether in the physical classroom or the online course site. For guidance on meeting this expectation, particularly in the online environment, please see the materials provided during student orientation or reach out to advising.center@point.edu.

Policies

For academic policies governing attendance, late assignments, and student support, please refer to the Academic Catalog directly (<https://point.edu/catalogs/>).

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