HEALTH CARE INSURANCE SURVEY
OST 2950

Class Hours: 3.0  Credit Hours: 3.0
Laboratory Hours: 0.0  Revised: Spring 03

NOTE: This course is not designed for transfer credit.

Catalog Course Description:

Introduction to the practical knowledge of health care insurance as it relates to accreditation, licensure, certification, regulatory, and mandatory governmental guidelines. The basics of health care insurance standards and managed care will be presented.

Entry Level Standards:

Students must be able to read, write, and spell at the college level. Successful completion of the medical terminology course sequence is required.

Prerequisites:

OST 2920 or department approval

Textbook(s) and Other Reference Materials Basic to the Course:


I. Week/Unit/Topic Basis:

<table>
<thead>
<tr>
<th>Week</th>
<th>Topic</th>
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<tbody>
<tr>
<td>1</td>
<td>Career and Legal Issues</td>
</tr>
<tr>
<td>2</td>
<td>Basics of Health Insurance</td>
</tr>
<tr>
<td>3</td>
<td>Managed Care Systems</td>
</tr>
<tr>
<td>4</td>
<td>Medical Documentation</td>
</tr>
<tr>
<td>5</td>
<td>Diagnostic and Procedural Coding</td>
</tr>
<tr>
<td>6</td>
<td>Health Insurance Claim Forms</td>
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</tbody>
</table>
II. Course Objectives*:

A. Exhibit an understanding of the role of mandatory regulatory and governmental agencies within the medical practice setting. XI, XII

B. Demonstrate knowledge of medical office staff roles and the requirements for proper licensure, accreditation, and certification within a medical setting. III, VI

C. Describe insurance plans that will be present within a medical setting. III, V, XI

D. Demonstrate knowledge of problem-solving in the area of claim processing, delinquent claims, carrier denials, and compliance programs. III, V, VI, VIII, XI

E. Acquire an understanding of basic risk management principles within a medical setting. XI

F. Prepare universal insurance claim forms for reimbursement of medical claims. V, X, XI, XII

*Roman numerals after course objectives reference goals of the OST program.

III. Instructional Processes*:

Students will:

1. Initiate a personal library of reference material including medical dictionaries, common abbreviates/eponyms which will allow accurate and timely interpretation of the medical terms necessary for effective communication (both verbal and written) in a medical environment. Personal Development Outcome

2. Solve medical insurance problems in a simulated real world environment like a medical office or affiliated health care practice to allow accurate and efficient communication. Problem Solving and Decision Making Outcome, Transitional Strategies
3. Research the Internet to find the latest technologies used in medical fields and to relate this to medical terminology employed in the Health Care environment. Information Literacy Outcome

4. Access Pellissippi State User Account to find library resources pertaining to Health Care Insurance, and evaluate these resources with particular reference to billing. Information Literacy Outcome

5. Use independently gathered material and oral presentation skills to review specific medical specialty topics with special emphasis on medical insurance, the tests ordered, the abbreviations employed, and the medical diagnoses most frequently employed for that specialty. Communication Outcome, Information Literacy Outcome

6. Learn to use a computer software package to evaluate insurance and billing questions. Practice communication skills by use of E-Mail to other students and to communicate with the lead instructor. Technological Literacy Outcome

7. Internalize the work ethic by regularly attending class, being punctual, dependable, cooperating with the teacher and other classmates, completing class project, and acting in a professional manner. Personal Development Outcome

*Strategies and outcomes listed after instructional processes reference Pellissippi State's goals for strengthening general education knowledge and skills, connecting coursework to experiences beyond the classroom, and encouraging students to take active and responsible roles in the educational process.

IV. Expectations for Student Performance*:

Upon successful completion of this course, the student should be able to:

1. Discuss legal/ethical issues regarding insurance filing/billing. A, B

2. Identify and define the role of mandatory, regulatory, and governmental agencies within the medical office setting. A

3. Discuss the requirements for proper licensure, accreditation and certification. B

4. Explain the differences in various health insurance plans: HMO, POS, PPO, Medicaid, and Medicare. C

5. Understand how different health care settings are organized and operate. B

6. Describe the information needed to complete each portion of the insurance claim form(s). C, F

7. Apply principles of risk management to reduce medical practice liability. E

8. Identify problem claims, trace delinquent claims and insurance problems. D

9. Complete insurance claim forms with data provided. F

10. Define terms, phrases and abbreviations specific to each health insurance plan. C

*Letters after performance expectations reference the course objectives listed above.

V. Evaluation:
A. Testing Procedures: 40% of grade

A midterm examination and a final examination will be given for this course. Information from class lectures, the text, and any guest speakers will also be covered on the examinations.

B. Homework Expectations: 40% of grade

Homework assignments will be given on each topic. Each student is expected to complete all homework assignments. Homework assignments will be turned in for a grade and will be calculated into the final grade as shown.

C. Field Work:

Plan 2-4 hours of study for each one hour of class. If you are experiencing problems, please consult the instructor.

D. Other Evaluation Methods: 20% of grade

One special outside assignment will be presented orally to the class for 10% of final grade. Class participation will also count 10% of final grade.

E. Grading Scale:

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<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>A</td>
<td>93-100</td>
</tr>
<tr>
<td>B+</td>
<td>90-92</td>
</tr>
<tr>
<td>B</td>
<td>85-89</td>
</tr>
<tr>
<td>C+</td>
<td>80-84</td>
</tr>
<tr>
<td>C</td>
<td>75-79</td>
</tr>
<tr>
<td>D</td>
<td>70-74</td>
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<tr>
<td>F</td>
<td>Less than 69</td>
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In order for grades to be calculated, all assigned work must be submitted in a timely fashion. Assigned work must be turned in by date designated.

VI. Policies:

A. Attendance Policy:

Pellissippi State Technical Community College expects students to attend all scheduled instructional activities. As a minimum, students in all courses must be present for at least 75 percent of their scheduled class and laboratory meetings in order to receive credit for the course. [NOTE: No differentiation is noted for excused/unexcused absences. These will be treated as an absence.]

Regular attendance is required to receive veteran’s benefit pay. Instructors are required to report non-attendance to the Veterans Affairs Office which reports non-attendance to the Veterans Administration Regional Office. Payments are adjusted or canceled if attendance is not regular.

B. Academic Dishonesty:

Plagiarism, cheating, and other form of academic dishonesty are prohibited. Students guilty of academic misconduct, either directly or indirectly through participation or assistance, are immediately responsible to the instructor of the class. In addition to other possible disciplinary sanctions which may be imposed through the regular Pellissippi State procedures as a result of academic misconduct, the instructor has the authority to assign an F or a zero for the exercise or
examination or to assign an F in the course.

C. Other Policies:

Students must have a valid PSTCC ID to be presented on demand to gain access to PSTCC facilities.