

PELLISSIPPI STATE COMMUNITY COLLEGE  
MASTER SYLLABUS

**HEALTH CARE INSURANCE SURVEY  
OST 2950**

**Class Hours: 3.0**

**Credit Hours: 3.0**

**Laboratory Hours: 0.0**

**Revised: Spring 2010**

NOTE: This course is not designed for transfer credit.

**Catalog Course Description:**

A study of insurance plans and payers, claim form completion specific to the insurance carrier and reimbursement issues.

**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 2940

**Textbook(s) and Other Course Materials:**

**Required:**

Fordney, M: *Insurance Handbook for the Medical Office*, Saunders Publishing Co., most recent edition.

Fordney, M: *Student Workbook*. Saunders Publishing Co., most recent edition.

ICD-9-CM with Volumes 1 & 2 and HCPCS Level II and CPT-4 code books used in OST 2940 or current issue.

**I. Week/Unit/Topic Basis:**

<b>Week</b>	<b>Topic</b>
1	Role of an Insurance Billing Specialist and Employment
2	HIPAA Compliance and Privacy in Insurance Billing
3	The Claims Process and Medical Documentation
4	Diagnostic and Procedural Coding; Paper Claim
5	The Blue Plans, Private Insurance, and Managed Care Plans
6	<b>EXAM - Theory</b> and Electronic Data Interchange
7	Medicare
8	Medicare/Medigap, MSP, ABN

- 9 Medicaid
- 10 **EXAM – Completion of Claim Forms** and TRICARE and CHAMPVA
- 11 Receiving Payments and Insurance Problem Solving
- 12 Insurance Collection Strategies
- 13 Workers Compensation and Disability Insurance/Disability Benefit Programs
- 14 **EXAM – Completion of Claim Forms**
- 15 **EXAM Theory**

## 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
- G. Develop job seeking skills (III, IV, VI, IX, VI)

\*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 abbreviations/eponyms which will allow accurate and timely interpretation of the medical terms necessary for effective communication (both verbal and written) in a medical environment. (*Communication Outcome*)
2. Resolve medical insurance problems in a simulated medical office practice using accurate and efficient communication. (*Active Learning Strategy*)
3. Develop research skills using the Internet and library resources to find information pertinent to topics related to health insurance and billing. (*Active Learning Strategy*)
4. Access Pellissippi State User Account to find library resources pertaining to Health Care Insurance, and evaluate these resources with particular reference to billing. (*Technological Literacy Outcome*)

5. Develop oral presentation skills to present individual and team information from research. *(Technological Literacy Outcome, Communication Outcome, and Active Learning Strategy)*
6. Use the computer to complete HCFA 1500 claim form. 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 completing assignments, being punctual, dependable, cooperating with the teacher and other classmates, completing class project, and acting in a professional manner. *(Active Learning Strategy, Transitional Strategy)*
8. Read assigned materials and participate in class discussions. *(Communication Outcome, Active Learning Strategy)*
9. Collaborate in teams to analyze claim forms, determine errors, and make corrections. *(Communication Outcome, Active Learning Strategy)*
10. Prepare sample of work for portfolio. *(Transitional Strategy, Communication Outcome, Active Learning Strategy)*

\*Strategies and outcomes listed after instructional processes reference TBR'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
11. Explain the importance of correct information needed to complete each portion of the insurance claim form. (D, E, F)

12. Describe how a coding specialist could unwittingly be involved in a case of fraud. (A, B, C, E)
13. Describe how a medical office employee could be charged with breach of confidentiality. (A, B, C, E)
14. Explain the significance of having the patient's signature on a "Release of Medical Information" statement. (A, C, D, E)
15. Prepare a resume and complete a job application for a position in a health care office. (G)

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

## **V. Evaluation:**

### A. Testing Procedures: 60% of grade

There will be four (4) exams given during the semester. Two consist of objective questions in the form of multiple choice, true/false, short answer, or short essay covering the class lectures, text, and speakers. Application assessment activities will consist of claim form completion for two of the four exams.

### B. Laboratory Expectation:

N/A

### C. Field Work:

N/A

### D. Other Evaluation Methods: 40% of grade

35% – Class work, homework, weekly quizzes, and participation make up 35% of the final grade. Each student is expected to complete all homework assignments. In order for grades to be calculated, all assigned work must be submitted by the designated date.

05% – A research assignment will be presented orally to the class for 5% of final grade.

A portfolio documenting samples of work for courses leading to an AAS or certificate is expected to be completed by all students whether completing the program this term or a future term. It will be evaluated as part of OST 2950 unless evaluated as part of OST 2010 during the current term.

### E. Grading Scale:

A	93-100
B+	90-92
B	85-89
C+	80-84
C	75-79
D	70-74
F	Less than 69

## **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.] (*Pellissippi State Online Catalog*)

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. (*Pellissippi State Online Catalog*)

C. Accommodations for disabilities:

Students who need accommodations because of a disability, have emergency medical information to share, or need special arrangements in case the building must be evacuated should inform the instructor immediately, privately after class or in her or his office. Students must present a current accommodation plan from a staff member in Services for Students with Disabilities (SSWD) in order to receive accommodations in this course. Services for Students with Disabilities may be contacted by going to Goins 134 or 126 or by phone: 694-6751(Voice/TTY) or 539-7153. More information is available at [www.pstcc.edu/departments/swd/](http://www.pstcc.edu/departments/swd/).

D. Other Policies:

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

Computer Usage Guidelines:

College-owned or –operated computing resources are provided for use by students of Pellissippi State. All students are responsible for the usage of Pellissippi State's computing resources in an effective, efficient, ethical and lawful manner. (*Pellissippi State Online Catalog*)