
SECTION HEADING

HIMC 1110: Diagnosis Coding

Description

Diagnosis Coding will introduce the student to the ICD-10-CM classification system with an emphasis on the correct process of utilizing the alphabetic index and tabular list for code assignment. The focus will be on rules, conventions, instructions of ICD-10-CM as well as the chapter specific (pregnancy, injury, etc.) including criteria for assignment of principal and additional diagnoses in various patient settings will be addressed. The impact of proper code assignment, MS-DRGs and reimbursement will also be covered.

Credits

3

Prerequisite

HC 1151, HC 1180 or BIOL 2245

Topics to be Covered

1. Study of the International Classification of Disease (ICD-10-CM) codes
2. ICD-CM coding book format
3. Official conventions and guidelines for ICD-CM coding system
4. Appropriately apply ICD-CM codes and guidelines in medical setting
5. Documentation requirements.

Learning Outcomes

1. Describe the history of ICD-CM classification system, as well as current use in the delivery of healthcare.
2. Verify documentation in the health record is timely, complete, and accurate.
3. Utilize various coding references for ICD-CM in code selection and assignment.
4. Analyze the documentation in the health record to ensure it supports the diagnosis and reflects the patient's progress from clinical findings to discharge status.
5. Apply knowledge of medical terminology, anatomy and physiology, pathophysiology, pharmacology, and medical-surgical techniques.
6. Validate assignment of diagnostic codes in accordance with official guidelines.
7. Determine diagnosis codes according to official guidelines.
8. Analyze current regulations and established guidelines in clinical classification systems.
9. Develop appropriate physician queries to resolve data and coding discrepancies

Credit Details

Lecture: 3

Lab: 0

OJT: 0