SECTION HEADING

HIMC 1120: Procedure Coding

Description

Procedure Coding will demonstrate the application of principles, guidelines, and conventions of procedure coding by using the current International Classification of Diseases (ICD), Procedure Classification System (PCS) coding manual. Coding characteristics, conventions and guidelines will be applied in identifying and accurately assigning codes to procedures. Health records, manual and computerized coding methods, and coding references will be utilized in the coding process. Prerequisites: HC 1151, HC 1180 or BIOL 2245.

Credits

3

Prerequisite

HC 1151, HC 1180 or BIOL 2245

Topics to be Covered

1. Study of the International Classification of Disease (ICD-10-PCS) procedure coding system codes

2. ICD-PCS coding book format

3. Official conventions and guidelines for ICD-PCS coding system

4. Appropriately apply ICD-10-PCS codes and guidelines in medical setting

5. Documentation requirements.

6. Support accurate billing through coding.

Learning Outcomes

1. Apply procedure codes according to current guidelines

2. Verify documentation in the health record is timely, complete, and accurate.

3. Utilize various coding references for ICD-10-PCS in code selection and assignment.

4. Analyze the documentation in the health record to ensure it supports the procedure and reflects the patient's progress, clinical findings, and discharge status.

5. Apply knowledge of medical terminology, anatomy and physiology, pathophysiology, pharmacology, and medical-surgical techniques.

6. Validate coding accuracy using clinical information found in the health record.

7. Adhere to current regulations and established guidelines in code assignment.

8. Apply ethical standards of practice.

Credit Details

Lecture: 3

Lab: 0

OJT: 0