ADMM1152 - Outpatient Coding

Credits:	4 (3/1/0)
Description:	Medical codes are used to identify procedures and diagnoses that pertain to a patient's health care encounter. This course is an introduction to medical coding and emphasizes coding in medical offices and other outpatient care facilities. Course topics include ICD-10 (International Classification of Disease 10th revision), CPT (Current Procedural Terminology) and HCPCS (Healthcare Common Procedural Coding System), and legal and ethical issues related to outpatient coding practices.
Prerequisites:	• ADMM1104 Medical Language Applications I OR HLTH1110 Introduction to Anatomy & Physiology
Corequisites:	
Pre/Corequisites[*]:	
Competencies:	1. Demonstrate professional work habits of medical coders. 2. Explain CPT (Current Procedural Terminology) coding manual format. 3. Determine documentation guidelines. 4. Determine correct E/M (evaluation and management) procedure codes. 5. Determine correct anesthesia procedure codes. 6. Determine correct pathology and laboratory procedure codes. 7. Determine correct surgery procedure codes. 8. Determine correct radiology procedure codes. 9. Determine correct HCPCS II (Healthcare Common Procedural Coding System Level II) procedure codes. 10. Determine correct usage of modifiers. 11. Explain ICD (International Classification of Disease) manual format. 12. Determine correct health status (Z) codes. 13. Determine correct external cause of injury codes. 14. Utilize the Table of Drugs and Chemicals to select correct codes. 15. Utilize neoplasm table to select correct codes. 16. Determine correct diagnosis codes. 17. Explain third-party payer requirements. 18. Utilize computer technology. 19. Determine correct medicine procedure codes.
MnTC goal areas:	None

[*]Can be taking as a Prerequisite or Corequisite.