HITM2264 - Revenue Cycle Management

Credits:	3 (2/1/0)
Description:	This course covers the current revenue cycle systems used in the healthcare industry, from initial patient encounter to receipt of payment.
Prerequisites:	• HITM1151 • HITM1236 • MATH0070
Corequisites:	
Pre/Corequisites*:	
Competencies:	1. Define revenue life cycle management, from initial patient contact through billing, payment adjudication and cash posting. 2. Support patients in navigating the healthcare system, including reimbursement and access to services. 3. Perform revenue cycle functions following regulatory requirements. 4. Apply diagnostic and procedural coding knowledge to support reimbursement methodologies and payment systems. 5. Locate and navigate the CMS transmittal and other payor portals. 6. Facilitate prior authorization and insurance eligibility activities. 7. Identify and correct problems with billing, coding and documentation to improve accepted claims. 8. Manage the revenue cycle audit process. 9. Identify the reporting requirements associated with healthcare fraud and abuse. 10. Analyze data and reports to identify trends and patterns of fraud or abuse. 11. Follow an established pricing estimate protocol to generate a transparent and compliant patient estimate of proposed services.
MnTC goal areas:	None

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

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