I. Basic Course Information

A. Course Number and Title: HITC 152 Basic ICD Coding

B. New or Modified Course: Modified

C. Date of Proposal: Semester: Fall Year: 2018

D. Effective Term: Fall 2019

E. Sponsoring Department: Health Science Education

F. Semester Credit Hours: 3

G. Weekly Contact Hours: Lecture: 3
Out of class student work per week: 6

H. Corequisites: HLTH 107 Pathophysiology
HLTH 109 Pharmacology

I. Laboratory Fees: None

J. Name and Telephone Number or E-Mail Address of Department Chair and Divisional Dean at time of approval: Beryl Stetson, Beryl.Stetson@raritanval.edu
Divisional Dean: Terence Lynn, Terence.Lynn@raritanval.edu

II. Catalog Description

Corequisites: HLTH 107 Pathophysiology
HLTH 109 Pharmacology

Diagnostic coding is used to identify accurately the reason for the physician service and support the medical necessity of services rendered. This course earmarks the various tables and volumes used, indicates the usage of ICD codes for statistical and tracking purposes, and identifies the unique skill sets specific to the professional coding setting. Emphasis is placed on the principals of coding and classification systems used in the assignment of valid diagnostic and/or procedure codes.
III. Statement of Course Need

A. This course fulfills the “knowledge cluster content and competency” required by the American Health Information Management Association. Earning a credential validates one’s competence as a professional in the health information management industry to employers and the public. This credential requires an associate’s degree and successful performance on the RHIT certification exam. Students must successfully complete and meet the learning objectives as defined for this course in order to qualify to take the national certification examination.

B. There is no lab component.
C. This course is not designed to transfer.

IV. Place of Course in College Curriculum

A. Free Elective
B. This course does not serve as General Education course.
C. This course meets a program requirement for the Health Information Technology A.A.S. degree program and the Medical Coding Certificate program.
D. To see course transferability: a) for New Jersey schools, go to the NJ Transfer website, www.njtransfer.org; b) for all other colleges and universities, go to the individual websites.

V. Outline of Course Content

A. Introduction to ICD Classification
B. ICD Conventions
C. UHDDS
D. Medical Record as a Source Document
E. Basic Coding Steps
F. Basic Coding Guidelines
G. Coding Guidelines for Operations and Procedures
H. Signs, Symptoms and Ill-defined Conditions
I. Infectious & Parasitic Diseases
J. Endocrine Diseases & Immunity
K. Mental Disorders
L. Diseases of the Blood & Blood Forming Organs
M. Diseases of the Nervous System & Sense Organs
N. Diseases of the Respiratory System
O. Diseases of the Digestive System
P. Diseases of the Genitourinary System
Q. Diseases of the Skin & Subcutaneous Tissue
R. Diseases of the Musculoskeletal System & Connective Tissue
S. Complications of Pregnancy, Childbirth & Puerperium
T. Abortion & Ectopic Pregnancy
U. Congenital Anomalies
V. Perinatal Conditions
W. Diseases of the Circulatory System
X. Neoplasms  
Y. Injuries  
Z. Burns  
   AA. Poisoning and Adverse Effects  
   BB. Complications of Surgery & Medical Care

VI. General Education and Course Learning Outcomes

A. General Education Learning Outcomes:

The student will develop industry-valued coding knowledge and skills:
1. Use and maintain electronic applications and work processes to support clinical classification and coding (GE-1, 4).
2. Apply diagnosis/procedure codes according to current nomenclature (GE-1, 4).
3. Ensure accuracy of diagnostic/procedural groupings such as DRG, MSDRG, APC, and so on (GE-1, 4).
4. Adhere to current regulations and established guidelines in code assignment (GE-1).
5. Validate coding accuracy using clinical information found in the health record (GE-1, 4).
6. Use and maintain applications and processes to support other clinical classification and nomenclature systems (ex. DSM, SNOMED-CT) (GE-1, 4).
7. Resolve discrepancies between coded data and supporting documentation (GE-1, 4).

B. Course Learning Outcomes:

The student will be able to:
1. State the purpose of classification and coding systems
2. Define coding classification terminology and coding conventions that relate to MSDRG (diagnosis related groups) assignment and reimbursement.
3. Identify the basic characteristics, conventions and principles of the ICD coding system.
4. Assign codes for diseases, conditions, operations and nonsurgical procedures using current nomenclature.
5. Abstract, code and sequence diagnostic information from health records.
6. Apply principles of pharmacology to assigned coding cases.

C. Assessment Instruments
1. Quizzes
2. Exams
3. Assignments
VII. Grade Determinants

A. quizzes  
B. exams  
C. assignments

Given the goals and outcomes described above, LIST the primary formats, modes, and methods for teaching and learning that may be used in the course:

A. lecture/discussion  
B. computer-assisted instruction  
C. independent study

VIII. Texts and Materials

A. Textbooks:
   - ICD-10-CM/PCS Coding: Theory & Practice, current edition
     Author: Lovaasen, Elsevier  
   - Workbook for ICD-10-CM/PCS Coding: Theory & Practice, current edition
     Author: Lovaasen, Elsevier  

B. Online coding reference websites

(Please Note: The course outline is intended only as a guide to course content and resources. Do not purchase textbooks based on this outline. The RVCC Bookstore is the sole resource for the most up-to-date information about textbooks.)

IX. Resources

A. computer with internet access