EXCELSIOR COLLEGE

7 Columbia Circle, Albany, NY 12203-5159
Phone: **518.608.8211** | Toll Free: **888.647.2388** | Fax: 518.464.8777
WWW.EXCELSIOR.EDU/CPD

CENTER FOR PROFESSIONAL DEVELOPMENT

ADMINISTRATIVE MEDICAL SPECIALIST WITH MEDICAL BILLING AND CODING

300 Hours/12 Months/Instructor-Facilitated
Course Code: **CPD023**

OVERVIEW

Excelsior College has partnered with ed2go to bring you this program which will give you the skills you need to find the job you are looking for as an Administrative Medical Specialist (AMS), Medical Billing Specialist, Medical Coder, and/or Medical Office Manager. In addition to the extensive Medical Billing information, you will be taught every aspect of the Medical Receptionist/Front Desk position.

Upon successful completion of the Administrative Medical Specialist with Medical Billing and Coding course, students will be prepared for an entry-level position doing medical billing or coding in a medical office setting and will be prepared to sit for the Certified Billing and Coding Specialist (CBCS) exam and the Certified Medical Administrative Assistant (CMAA) exam offered by National Healthcareer Association (NHA).

OBJECTIVES

Upon successful completion of the Administrative Medical Specialist with Medical Billing and Coding program, you will:

- Be proficient in skills such as communication, telephone techniques, organization and time management.
- Have knowledge of medical practice settings and specialties, as well as the differences in Traditional and Managed Healthcare.
- Understand the differences between Commercial, HMO/PPO, Federal and State insurance plans, including eligibility and coverage, preauthorization, certification, and referrals, as well as reimbursement methodologies.
- Explain the legal and ethical responsibilities of an administrative medical specialist, including the HIPAA mandates, the rules for maintaining privacy of medical records and protected health information, and the types of consents and disclosures that are required in a medical office environment.
- Perform tasks associated with a typical patient encounter including reception, appointment scheduling, chart preparation and maintenance, and charge ticket processing at check-out.
- Perform tasks associated with billing and reimbursement, including insurance and patient billing, payment processing, and claims review, correction, and appeals.
- Perform traditional business office tasks for Accounts Receivable, Accounts Payable, and bookkeeping maintenance.
- Demonstrate a proficiency in diagnostic and procedural coding using the ICD-9, CPT, and HCPCS coding manuals.

- Perform data entry tasks, run office reports, and process insurance claims using Medical Office Simulation Software (MOSS©).
- Be prepared to take advanced education courses, including advanced coding, healthcare administration, and health information management.

MATERIALS INCLUDED

In partnership with the National Healthcareer Association (NHA), you may register for the Medical Administrative Assistant/Medical Billing and Coding (CMAA/CBCS) exam after you have completed your program. Your registration fees are included with the cost of your program.

Excelsior College / ed2go will provide the following materials:

- *Administrative Medical Assisting- Text & Workbook (Fordney)*
- *Getting Started in the Computerized Medical Office: Fundamentals & Practice with Medical Office Simulation Software (MOSS©) (Correa)*
- *Understanding Health Insurance: A Guide to Insurance Billing (Green, Rowell, Williamson)*
- *Current Year's CPT Coding Manual*
- *Current Year's HCPCS Coding Manual*
- *Merriam-Webster's Medical Desk Dictionary*
- *Current Year's ICD-9-CM Coding Manual*

OUTLINE

Lesson 1: Introduction to Health Care
- Program Introduction and Overview
- Medical Assisting as a Profession
- Health care: Past, Present, and Future
- Communication Skills
- Introduction to Medical Office Simulation Software (MOSS)

Lesson 2: Law, Ethics, and HIPAA
- Health Insurance Portability and Accountability Act (HIPAA)
- Law and Ethics

Lesson 3: The Patient Encounter
- Telephone Procedures
- Appointment Scheduling
- MOSS Appointment Scheduling
- Filing Procedures
- Medical Records Management
- The Receptionist and the Facility Environment
- MOSS Patient Registration
- Drugs and Medications
- MOSS Procedure and Payment Posting

Lesson 4: Billing and Reimbursement
- Medical Insurance Overview
- Billing and Reimbursement

CMS-1500 Claim Form (Provider)
MOSS Insurance Processing
Insurance Carriers
    Blue Cross/Blue Shield
    Medicare and Medicaid
    TRICARE
    Worker's Compensation
Reimbursement and Follow-up

Lesson 5: Diagnostic Coding
Diagnostic Coding Overview
Abstracting from the Medical Document
ICD9 Conventions, Layout, and Guidelines
Steps for Diagnostic Coding
ICD9 Guidelines by Body System

Lesson 6: Procedural Coding
CPT Overview
Evaluation and Management Coding
Anesthesia Coding
Surgery Coding (By Body and Organ System)
Laboratory and Pathology Coding
Radiology Coding
Medicine Coding
HCPCS Level II Coding

Lesson 7: Business Office Practices and Management
Daily Financial Practices
Accounting Practices
Medical Office Simulation Software (MOSS)
Office Management
Human Resources Management

Lesson 8: Completion and Certification Preparation
Instructions for Program Completion
Employment Strategies
Certification
- Steps to Access: National Health careers Association
- Certification Preparation
- Certification Handbook and Study Guide
- Certification Exam

COMPUTER REQUIREMENTS

Important Note: This program cannot be taken on a Mac.

- This program must be taken on a PC running Windows XP/Vista/7
- CD ROM drive, sound card or integrated sound support, headset or speakers
- Word-processor, preferably Microsoft Word
- Internet access (high-speed connection recommended)

INSTRUCTOR BIOS

Carline Dalgleish has worked in medical office administration, including billing and coding, for over 30 years. She holds a bachelor's degree in Business Information Systems and a master's degree in Leadership. She is an AHIMA Approved ICD-10-CM/PCS Trainer and is a member of the American Health Information Management Association (AHIMA) and the American Association of Healthcare Administrative Management (AAHAM). She owns her own consulting firm, AnnGrant Education Services, Inc. She is currently completing a textbook on the new ICD-10 coding system and is completing a bachelor's degree in Health Information Management with a Registered Health Information Administrator (RHIA) certification.

Shonda Miles is a Certified Professional Coder, Certified Professional Medical Auditor, and holds an Executive Masters of Business Administration, Master's Degree in Business Administration with a concentration in Human Resources and a Bachelor's degree in Business Administration (Management). Shonda has over 6 ½ years in the healthcare industry. She has expertise in coding and chart auditing Inpatient, Outpatient, and ER medical records. Ms. Miles is a member of AAPC, NAMAS and ACHE. She is currently employed with a university hospital as a Compliance Auditor.

Tina Williams has worked as a healthcare reimbursement specialist project manager, a Director of A/R, Regional Billing manager, reimbursement analyst, and professional coder for over 30 years. She holds a Bachelor's Degree in Organizational Management, a Master's Degree in Human Service Administration, and has completed her Doctorate coursework in Healthcare Administration. She is an AHIMA Certified Coding Specialist-Physician and is a member of the American Health Information Management Association (AHIMA). She is an AAPC (American Academy of Professional Coders) Certified Professional Coder, Instructor and Certified Professional Coder. She owns her own consulting firm, San Francisco Medical Coding Institute, Inc., providing medical coding certification training and revenue cycle consultancy to Bay Area healthcare providers.

Ms. Williams currently works as a Learning Consultant with one of California's largest HMO and healthcare providers. Her principle responsibilities include the development of inpatient and outpatient professional fee service coding training for the Northern California region. She is EPIC certified in Resolute Professional Billing and is well versed in EMR (electronic medical records). In the past 10 years, she has worked as an undergraduate faculty member and written several educational programs on revenue cycle, EMR, and hospital professional fee coding.