**Medical Office Procedures – OCP-C**

**Chapters 4-8**

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| Course ObjectivesThe Student will be able to : | * Explain how proper triage of patients during a phone conversation can assist the office environment. (4.1)
* Recall and explain two different types of scheduling options and provide examples of practices that would be suited to each of the schedules. (4.2)
* Recall the steps in processing incoming mail and discuss related safety recommendations. (4.3)
* Classify various uses of computer technology. (5.1)
* Recall reasons for maintaining a medical chart and documents that comprise the medical chart. (5.2)
* Discuss the advantages and challenges of electronic health records implementation. ( 5.3)
* List three medical abbreviations not to be used that have been targeted by [The Joint Commission](https://www.jointcommission.org/standards_information/npsgs.aspx) (5.4)
* Discuss various input technologies used to create medical documentation. (5.5)
* Identify Components of a paper based medical record and explain how the same components will be compiled in an electronic health record format. (5.6)
* Distinguish among active, inactive, and closed files. (5.7)
* Differentiate among records management systems that may be used in a medical office. (5.8)
* Design a medical Office waiting area that exhibits the priority of patient comfort. (6.1)
* Identify three stress triggers in your own life and define at least one method of reducing the associated negative stress. (6.2)
* Differentiate among three common leadership/management styles. (6.3)
* Explain why an administrative medical assistant needs to know how to collect and assimilate research data. (6.4)
* Classify items into major categories of needed information when making travel arrangements. (6.5)
* Justify why a policies and procedures manual should be developed and used in a medical office.
* Define medical insurance and coding terminology. (7.1)
* Explain the differences among the types of insurance plans. (7.2)
* Compare and contrast PAR and nonPAR and the methods insurance companies use to determine how much a provider is paid. (7.3)
* Apply *ICD-10-CM* conventions, abbreviations, and guidelines to properly code diagnoses in an outpatient setting. (7.4)
* Apply *CPT* conventions and guidelines to properly code procedures and supplies in an outpatient setting. (7.5)
* Explain the effects of coding compliance errors on the revenue cycle in the medical office setting. (7.6)
* Recognize and calculate charges for medical services and process patient statements based on the patient encounter form and the physician's fee schedule. (8.1)
* Compare and contrast the process of completing and transmitting insurance claims using both hardcopy and electronic methods. (8.2)
* Describe the different types of billing options used by medical practices for billing patients. (8.3)
* Paraphrase the procedures and options available for collecting delinquent accounts. (8.4)
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| Competencies | 37, 38 |
| Module Materials | Medical Office Procedures 8th Edition textbookDownload Working Papers Click Here |
| **Assignment and Point Value** | **Chapter Four : Office Communications: Phone, Scheduling, and Mail** * Read Chapter 4.
* Project 4.1 Taking Messages using WP 10-17. (10 Points)
* Project 4.2 Scheduling Decision Making using WP 18. (10 points)
* Project 4.3 Setting up Dr. Larsen’s Practice –Medisoft (10 points)
* Project 4.4 Scheduling Appointments – Medisoft
* Project 4.5 Rescheduling Appointments- Medisoft
* Project 4.6 Out-of-Office Scheduling using WP 37
* In a Word document, give the answers for the Review Questions on Page 135-137. (10 points)
* In the same Word document, type the Thinking It Through questions as well as answers using complete sentences. (20 points)
* Study the chapter and let your instructor know when you are ready to take the written exam. Please be aware that these exams are quite long and cover most of the material presented in the chapter. (40 points)

**Chapter Five: Managing Health Information*** Read Chapter 5.
* Project 5.1 Computer Terms using WP 38. (10 Points)
* Project 5.2 Computer Technology using WP 39. (10 points)
* Project 5.3 Preparing Patient Files (10 points)
* Project 5.4 Chart Entries
* Project 5.5 Lab Message Entries
* Project 5.6 Chart Transcription
* Project 5.7 Knowledge of the EHR using WP 40
* Project 5.8 Internet Research: Using [AHIMA](http://www.ahima.org) as a Resource
* Project 5.9 Cross Referencing
* Project 5.10 Using Subject Filing
* Project 5.11 Entering Patient Information – Medisoft
* Project 5.12 Editing Patient Information – Medisoft
* In a Word document, give the answers for the Review Questions on Page 194-196. (10 points)
* In the same Word document, type the Thinking It Through questions as well as answers using complete sentences on page 197. (20 points)
* Study the chapter and let your instructor know when you are ready to take the written exam. Please be aware that these exams are quite long and cover most of the material presented in the chapter. (40 points)

**Simulation 1: (50 Points)*** Read Pages 198- 201
* Gather Materials (WP, Binder & Dividers)
* For Audio files and Dictation Files Click [here](http://highered.mheducation.com/sites/0077862031/student_view0/projects_and_simulations.html)
* For Patient Information Forms Click here
* Refer to Appendix A for Specific Instructions on Medisoft
* For additional Forms go to [www.mhhe.com/bayes8e](http://www.mhhe.com/bayes8e) (Student Edition)
* See Instructor for Lesson on Medisoft

**Chapter 6 : Office Management** * Read Pages 202-232
* Project 6.1 – Design a Waiting Area
* Project 6.2 – Analyze Usage of Time
* Project 6.4 – Internet Research: Journal Articles and Patient Education Form. Include Bibliography data using APA format.
* Project 6.5 – Internet Research: [OSHA](https://www.osha.gov/Publications/OSHA3187/osha3187.html) Compliance Plan for the Medical Office
* In a Word document, give the answers for the Review Questions on Page 236-238. (10 points)
* In the same Word document, type the Thinking It Through questions as well as answers using complete sentences on page 238. (20 points)
* Study the chapter and let your instructor know when you are ready to take the written exam. Please be aware that these exams are quite long and cover most of the material presented in the chapter. (40 points)

**Chapter 7: Insurance and Coding*** Read Pages 240-271
* Project 7.1 – Insurance Terminology
* Project 7.3 – Insurance Plans, Payers, and Payment Methods
* Project 7.4 – Identifying Diagnostic and Procedure Codes
* Project 7.5 Optional Diagnostic and Procedure Coding exercises.
* In a Word document, give the answers for the Review Questions on Page 275-277. (10 points)
* In the same Word document, type the Thinking It Through questions as well as answers using complete sentences on page 277. (20 points)
* **Study the chapter** and let your instructor know when you are ready to take the written exam. Please be aware that these exams are quite long and cover most of the material presented in the chapter. (40 points)

**Chapter 8: Billing, Reimbursement, and Collections** * Read pages 278 - 309
* Project 8.1 - Updating Patient Statements
* Project 8.3 - Completing Claim Forms
* Project 8.4 - Posting Payments
* Project 8.5 Preparing an Effective Collection Letter
* In a Word document, give the answers for the Review Questions on Page 315-317. (10 points)
* In the same Word document, type the Thinking It Through questions as well as answers using complete sentences on page 317. (20 points)
* **Study the chapter** and let your instructor know when you are ready to take the written exam. Please be aware that these exams are quite long and cover most of the material presented in the chapter. (40 points)
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| Assessment | Chapter work graded for completeness and accuracy of work.Chapter tests require an 80% passing score. |