



INSTRUCTIONAL PACKAGE

AHS 176

PATIENT CARE CLERICAL PRINCIPLES

201720

SPRING 2018

INSTRUCTIONAL PACKAGE

PART I: COURSE INFORMATION

Effective Term: 201720 – Spring 2018

COURSE PREFIX: AHS176

COURSE TITLE: Patient Care Clerical Principles

CONTACT HOURS: 4-0-4

CREDIT HOURS: 4

RATIONALE FOR THE COURSE:

Patient care technicians / medical assistants now fulfill an ever-expanding and varied role in the medical office, both clinically and administratively. With increased responsibilities, however, comes a greater need for professional knowledge and skills. This class has been designed to provide the basics of clerical principle competency.

COURSE DESCRIPTION:

This course provides a study of the practical applications related to receptionist and patient care clerical duties such as data entry, transferring physician orders, and coordinating unit communications in a variety of health care settings.

PREREQUISITES/CO-REQUISITES:

Prerequisites: English 100 with a grade of "C" or better or appropriate placement scores

Corequisites: AHS 175

REQUIRED MATERIALS:

1. Bonewitt-West *Today's Medical Assistant*. Elsevier, 2016. Print ISBN:978-0-323-31127-4
2. Bonewitt-West *Today's Medical Assistant Study Guide*. Elsevier, 2016. Print ISBN:978-0-323-31128-1

Please visit the Bookstore online site for most current textbook information. Use the direct link below to find textbooks.

<http://hortec.bncollege.com/webapp/wcs/stores/servlet/TBWizardView?catalogId=10001&langId=-1&storeId=51560>.

Enter the semester, course prefix, number and section when prompted and you will be linked to the correct textbook.

ADDITIONAL REQUIREMENTS:

None

TECHNICAL REQUIREMENTS:

Access to Desire2Learn (D2L), HGTC's student portal for course materials. WaveNet and D2L email access.

CLASSROOM ETIQUETTE:

As a matter of courtesy to other students and your professor, please turn off cell phones and other communication/entertainment devices before class begins. If you are monitoring for an emergency, please notify your professor prior to class and switch cell phone ringers to vibrate.

PART II: STUDENT LEARNING OUTCOMES

Upon successful completion of this course each student will be able to:

1. Collaborate effectively with other health care professionals in a way that contributes to successful working relationships and person-centered care.
2. Apply working knowledge of the legal and ethical aspects of working within health care.
3. Use an informed approach and problem solving skills to communicate with patients and families, exhibiting an awareness of cultural, social and religious needs.
4. Respond to enquiries in a clear, informative and professional manner, directing appropriate resources accordingly.
5. Navigate health information systems effectively, performing accurate data entry and word processing
6. Define and transcribe diagnostic and laboratory tests and schedule the procedures.

COURSE LEARNING OUTCOMES and ASSESSMENTS:**Material Covered:**

Chapters 38-51

Assessments:

Quizzes

Written Assignments

Tests

Final Exam

Learning Outcomes:

Chapter 38 – The Medical Record

1. Explain the difference between a paper-based medical record and an electronic medical record (EMR).
2. List the general functions of EMR software.
3. Describe the organization of a source-oriented medical record and a problem-oriented medical record.

4. List and define the four subcategories included in the progress notes of a problem-oriented record (POR).
5. Describe the usual format of an EMR.
6. List the categories of information obtained on the new patient information form.
7. Describe the function of the Notice of Privacy Practices.
8. Identify the information obtained in each of the following consent documents: consent to treatment and release of medical information.
9. Give examples of correspondence and telephone messages often found in the medical record.
10. List and describe the components of the medical record database.
11. Describe how the problem list is coordinated with billing in the EMR.
12. Explain the necessity to finalize progress notes in the EMR.
13. Compare storage of laboratory reports, diagnostic tests, and reports of diagnostic tests in the paper-based medical record and the EMR.
List and describe other clinical reports that may be found in a medical record.
14. List and describe the seven sections of the health history.
15. List the guidelines that should be followed in recording the chief complaint.
16. List and describe the guidelines to follow to ensure accurate and concise documentation.
17. List and describe the types of progress notes that may be documented by the medical assistant.
18. List examples of subjective symptoms and objective symptoms.
19. List and describe common symptoms

Chapter 39 – Patient Reception

1. Describe how to open the medical office and prepare for the day's activities.
2. Compare and contrast the tasks necessary to open and close the medical office.
3. Discuss measures to protect the confidentiality of patients in the reception areas.
4. List information that must be obtained from new patients.
5. Describe the proper procedure to check in a new or established patient.
6. Discuss procedures that are necessary to validate that a patient's insurance will pay the bill.
7. List information that must be given to a new patient about the practice.
8. Describe different types of informational materials for new and prospective patients.

Chapter 40 – Medical Office Computerization

1. Explain the difference between data and a program.
2. Explain the purpose of each of the following parts of the data processing cycle: input, processing, and output.
3. List examples of input and output devices.
4. Explain the difference between software and hardware.
5. Explain the function of an operating system.
6. State the function of application software.
7. List common types of application software and describe how each works.
8. Describe the care and maintenance of the main computer unit.

9. Describe the function, care, maintenance, and ergonomics of the computer monitor.
10. List and describe the function of the special keys on a computer keyboard.
11. Describe the care, maintenance, and ergonomics of a computer keyboard.
12. Identify the guidelines to follow in the care and maintenance of a printer.
13. List and describe the storage devices used with microcomputer systems.
14. Explain why it is important to have a foundation in computer concepts before engaging in hands-on computer operations.
15. List and explain the advantages and disadvantages of medical office computerization.
16. List and describe measures that can be taken to promote the efficient running of a computerized medical office.
17. Describe the processes for obtaining information from the Internet and sharing information electronically.
18. Describe the methods used to maintain security of the medical office computer system.
19. List and describe methods used to back up computer data in the medical office.
20. State the various types of system maintenance that should be performed on a computer system.
21. List the various types of service agreements available for a computer system.

Chapter 41 – Telephone Techniques

1. Describe the importance of effective telephone courtesy and a pleasing telephone personality for the medical assistant.
2. Explain the use of multiline telephones, cell phones, smartphones, and pagers in the medical office.
3. Differentiate between incoming telephone calls the medical assistant can handle and other incoming calls.
4. Describe the correct procedure for screening incoming calls.
5. Describe the correct procedure for taking messages and transcribing messages recorded on an answering machine or voicemail.
6. Identify the correct steps to respond to a telephone call regarding an emergency or urgent medical problem.
7. Describe how to deal with problem calls.
8. Explain how the medical assistant should make outgoing telephone calls.

Chapter 42 – Scheduling Appointments

1. Describe how scheduling appointments efficiently meets the needs of both physicians and patients.
2. Describe the correct use of computer scheduling to make appointments.
3. Explain why the medical office must retain an official record of patients seen each day (daily appointment schedule).
4. Describe several types of scheduling, including stream scheduling, wave scheduling, modified wave scheduling, double booking, open booking, and patient self-scheduling.
5. Identify types of patient appointments that may be clustered in the appointment schedule.
6. Identify factors to be considered when setting up the appointment schedule.

7. Explain how to set up the appointment schedule.
8. Differentiate between the information needed to make an appointment for a new patient and an established patient.
9. Differentiate among medical conditions that require emergency care, urgent care, and routine care.
10. Describe how to schedule appointments for individuals who are not patients.
11. Describe the method for changing or canceling appointments.
12. Describe how to document changes to the appointment schedule and cancellations or no-shows in the medical record.
13. Identify three methods to remind patients to make or keep appointments.
14. Discuss the storage of appointment schedules and/or daily schedules.
15. Identify how to schedule inpatient and outpatient diagnostic tests and procedures.
16. Identify how to schedule hospital admissions and surgery.

Chapter 43 – Medical Record Management

1. Identify supplies and equipment needed to create and store paper medical records.
2. Describe how to create a new paper-based medical record.
3. Describe different types of filing systems.
4. List principles of alphabetic and numeric filing.
5. Describe the process of filing reports and patient records.
6. Compare and contrast advantages and disadvantages of alphabetic numeric filing systems for paper-based medical records.
7. Describe the implications of the paper-based medical record and the electronic medical record for medical record management.
8. Differentiate between storage of active and inactive records.
9. Identify methods for retention and disposition of paper-based medical records.

Chapter 44 – Written Communication

1. Define the parts of a business letter.
2. Identify different formats for preparing business letters.
3. Explain how to format and compose a business letter.
4. Identify how to respond to written communication from business and patients.
5. Discuss the importance of using correct grammar and spelling in written communication.
6. Describe the process of creating memoranda.
7. Explain how to prepare and proofread documents.
8. Compare the use and style of business letters and electronic communication, such as e-mail or secure messaging within the EMR.
9. Explain how to use e-mail and attachments for business communication.
10. Explain how to transmit information using a fax machine.
11. Describe how to make copies of multiple-page documents.

Chapter 45 – Mail

1. Identify the function of the U.S. Postal Service (USPS).

2. State the purpose of the ZIP and ZIP+4 systems.
3. Describe the use of the following USPS mail classifications: Priority Mail Express, Priority Mail, First-Class Mail, Standard Post, and Media Mail.
4. Correlate available insurance and delivery confirmation services to their appropriate use in the medical office.
5. Compare and contrast the use of private package delivery services with the use of the USPS.
6. List and describe the steps for processing incoming mail.
7. List and describe the USPS recommended addressing standards that should be followed to prepare mail.
8. List and describe the equipment used to prepare envelopes for mailing.
9. Compare and contrast postage meters and online postage services.

Chapter 46 – Managing Practice Finances

1. Describe manual and computerized methods of maintaining patient accounts.
2. Differentiate between a simple charge slip and a charge slip with diagnosis and procedure codes (superbill).
3. Describe how charges are entered on a charge slip or superbill.
4. Identify the information contained on a fee schedule, and describe how it is used.
5. Describe the information contained in a patient account ledger.
6. List the steps to post charges, payments, and/or adjustments to the patient account.
7. Describe the process to print patient ledgers, day sheets, or other reports using a practice management computer system.
8. Differentiate between accounts receivable and accounts payable.
9. Identify various types of bank accounts.
10. Discuss the information printed on a check.
11. Describe various methods to write checks.
12. Describe precautions to take when accepting checks, credit cards, or debit cards
13. Discuss methods to transfer funds electronically.
14. Describe how to balance a cash drawer.
15. Describe how a bank deposit is prepared and made.
16. Describe how entries are made in the cash disbursement journal.
17. Describe how to maintain a petty cash fund.

Chapter 47 – Medical Coding

1. Describe the history and rationale for using coding systems in medical card.
2. Describe the levels of Healthcare Common Procedure Coding System (HCPCS) codes.
3. Describe the type of codes included in each section of the Current Procedural Terminology (CPT) manual (Level I HCPCS codes).
4. Describe how to locate an accurate CPT code.
5. Identify when HCPCS Level II codes should be used.
6. Describe how to locate an accurate HCPCS Level II code.
7. Perform procedural coding.

8. Describe the format and use of International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM) codes.
9. Describe how to select an accurate code with the correct level of detail using ICD-9-CM codes.
10. Describe the format and use of the ICD-10-CM codes.
11. Describe how to select an accurate code with the correct level of detail using ICD-10-CM codes.
12. Perform diagnostic coding.
13. Explain how procedure and diagnosis coding are used by third-party payors to validate medical necessity.

Chapter 48 – Medical Insurance

1. Trace the history of health insurance in the United States.
2. Identify and describe three ways to obtain health insurance.
3. Explain regulations that control the amount of health insurance reimbursement for an individual claim.
4. Compare and contrast traditional fee-for-service health insurance plans with managed care insurance plans.
5. Identify and define various types of managed care plans.
6. Describe eligibility and benefits for the Medicare plan.
7. Explain the general provisions of the Medicaid plan and the state children's insurance program.
8. Describe government programs available to dependents of the armed services and veterans.
9. Explain when workers' compensation covers medical care, and compare it with other insurance plans.
10. Describe how to collect information from patients for insurance billing.
11. Describe the process for verifying eligibility and covered services.
12. Correlate preauthorization and precertification requirements to the utilization review process.
13. Describe the referral process for managed care.
14. Identify information contained on an insurance form.
15. Recognize potential errors in a completed insurance form.
16. Describe the process for submission and payment of a health insurance claim following insurance guidelines.
17. Categorize common errors that result in denied insurance claims.
18. Demonstrate effective communication skills with managed care and/or insurance providers and patients.

Chapter 49 – Billing & Collections

1. Describe the process of billing and collections.
2. Describe problems that can occur when patients pay by check.
3. Explain how to adjust patient accounts for an overpayment and process a refund.
4. Develop a collection system.

5. Identify past due accounts and the actions needed.
6. Describe the information to include in a collection letter.
7. Identify legal requirements that affect collections for the medical office.
8. Describe special circumstances affecting collections in the medical office.

Chapter 50 – The Medical Assistant as Office Manager

1. Describe routine maintenance activities in the medical office.
2. Identify methods to maintain a safe environment and prevent injury to patients and employees.
3. Explain how safety signs, instructions, and labels contribute to a safe office environment.
4. Describe an efficient system of maintaining equipment inventory lists and operator manuals.
5. Maintain administrative and clinical equipment.
6. Describe the process of obtaining new equipment.
7. Explain procedures for taking inventory.
8. Describe an effective method for ordering, receiving, and storing supplies.
9. Explain how to manage office payroll.
10. Describe ways to enhance teamwork in the medical office.
11. Describe the medical assistant's role in orienting and training new employees.
12. Manage the physician's professional schedule.
13. Differentiate between medical office policies and procedures.
14. Create and/or revise medical office policies and procedures as needed to promote smooth office functioning.
15. Locate community resources to assist patient and medical office staff.
16. List types of liability protection for physicians, the medical office, and medical assistants.
17. Describe the process of compliance reporting for unsafe activities, errors in patient care, and conflicts of interest.
18. Describe how incident reports should be used to protect the medical office.

Chapter 51 – Obtaining Employment

1. Describe the process for locating potential employers when looking for a job.
2. Discuss the steps in preparing a résumé.
3. Describe how to write a cover letter.
4. Differentiate between information placed on a résumé and information required on an employment application.
5. Explain how to provide potential employers with a résumé by mail, using a fax, or using Internet access.
6. Prepare to answer questions commonly asked in a job interview.
7. Describe measures to prevent job burnout.
8. Identify two professional organizations to which a medical assistant may belong.
9. Identify benefits of joining a professional organization.
10. Discuss why lifelong learning is vital for a medical assistant after graduation.

EVALUATION

Assignments, Papers	20%
Tests	60%
Final Exam	20%
Total	100%

GRADING SYSTEM

100%-90%	A
80%-89%	B
70%-79%	C
60%-69%	D
59% or less	F

Grades earned in courses impact academic progression and financial aid status. Before withdrawing from a course, be sure to talk with your instructor and financial aid counselor about the implications of that course of action. Ds, Fs, Ws, WFs and Is also negatively impact academic progression and financial aid status.

The Add/Drop Period is the first 5 days of the semester for **full term** classes. Add/Drop periods are shorter for accelerated format courses. Please refer to the academic calendar for deadlines for add/drop (<http://www.hgtc.edu/academics/academiccalendars.html>). You must attend at least one meeting of all of your classes during that period. If you do not, you will be dropped from the course(s) and your Financial Aid will be reduced accordingly.

PART IV: ATTENDANCE

Students are responsible for all course work and class assignments; therefore, they are expected to regularly and promptly attend each meeting of classes for which they are enrolled. Students should limit absences to those that are unavoidable and, with the professor's consent, should make up all work missed. Unannounced quizzes will *not* be made up and late homework will *not* be accepted. Two consecutive absences will result in a student/advisor conference. Tardiness should be avoided. Three tardies count as one absence.

PART V: STUDENT RESOURCES

The Student Success and Tutoring Center (SSTC)

The SSTC offers to all students the following free resources:

1. Academic coaches for most subject areas, Writing Center Support, and college success skills.
2. On-line student success and academic support resources.

Visit the SSTC website: www.hgtc.edu/sstc and visit the student services tab in your WaveNet account to schedule appointments using TutorTrac. For more information, call: SSTC Conway, 349-7872; SSTC Grand Strand, 477-2113; and SSTC Georgetown, 520-1455. Room locations and Live Chat is available on the SSTC website.

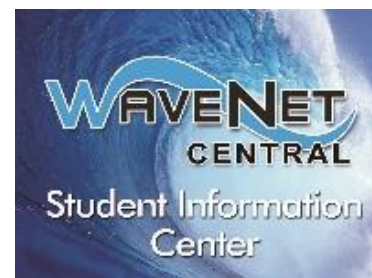


Student Information Center: WaveNet Central (WNC)

WNC offers to all students the following free resources:

1. Getting around HGTC: General information and guidance for enrollment!
2. Use the Online Resource Center (ORC) for COMPASS support, technology education, and online tools.
3. Drop-in technology support or scheduled training in the Center or in class.
4. In-person workshops, online tutorials and more services are available.

Visit the WNC website: www.hgtc.edu/wavenetcentral. Live Chat and Center locations are posted on the website. Or please call one of the following locations: WNC Conway, 349-5182; WNC Grand Strand, 477-2076; and WNC Georgetown, 520-1473.



Disability Services:

HGTC is committed to providing an accessible environment for students with disabilities. Inquiries may be directed to Jocelyn Williams, Director of Student Development on the Conway Campus Jaime Davis, Counselor/Advisor on the Georgetown Campus or Jim Ratliff, Counselor on the Grand Strand Campus. These individuals will review documentation of the student's disability and, in a confidential setting with the student, develop an educational accommodation plan.

Note: It is the student's responsibility to self-identify as needing accommodations and to provide acceptable documentation. After a student has self-identified and submitted documentation of a disability, accommodations may be determined, accepted, and provided.

Title IX Requirements

The South Carolina Technical College System does not discriminate on the basis of race, color, gender, national or ethnic origin, age, religion, disability, marital status, veteran status, sexual orientation, gender identity, or pregnancy in educational programs and activities as required by Title IX. As outlined in the Violence Against Women Act, Horry Georgetown Technical College prohibits the offenses of domestic violence, dating violence, sexual assault, and stalking. Students who believe he or she has experienced or witnessed discrimination including sexual harassment, domestic violence, dating violence, sexual assault or stalking are encouraged to report such incidents to the Title IX Coordinators:

Dr. Melissa Batten, AVP of Student Affairs
Building 1100, Room 107A, Conway Campus
843-349-5228
Melissa.Batten@hgtc.edu

Jacquelyne Barrett, AVP of Human Resources
Building 200, Room 212A, Conway Campus
843-349-5212
Jacquelyne.Barrett@hgtc.edu

*Faculty and Staff are required to report incidents to the Title IX Coordinators when involving students. The only HGTC employees exempt from mandatory reporting are licensed mental health professionals (only as part of their job description such as counseling services).

Accident Occurring on or off Campus

Accidents involving Faculty, Staff and Student Workers (work-study, clinical student or students on a required internship):

An accident/illness involving faculty, staff or student worker must be reported immediately to the Human Resources Department (843.349.7134) before seeking medical treatment, if possible, so an accident/incident report can be completed and Worker’s Compensation can be notified. In the event someone in Human Resources cannot be notified, the injured party may contact the College’s Worker’s Compensation insurance carrier, CompEndium Services, to complete an accident/incident report and to receive clearance for treatment at 877.709.2667. If the incident is an emergency, please notify Human Resources as soon as the proper medical attention has been rendered for verification of workers’ compensation coverage.

In any event, if an accident occurs, proper documentation needs to be completed. An accident report needs to be filled out stating the name of the injured party, the location of the accident, his/her identification number (social or H number), his/her address & phone number, the date & time of the accident, whether there were witnesses, and a brief description of what occurred. Attached is a copy of the Accident/Incident Report form. A copy of the report needs to be distributed to the following departments: Human Resources, the respective Supervisor, and the Dean/Provost of the specific campus.

If you need to go to the doctor’s office, the following locations work in conjunction with our Worker’s Compensation:

Doctors Care - Carolina Forest	200 Middleburg Dr Myrtle Beach, SC 29579	Mon-Fri 8am-8pm Sat/Sun 9am-5pm	843-903-6650
Doctors Care - North Myrtle Beach	1714 Hwy 17 Myrtle Beach, SC 29582	Every day 8am-8pm	843-361-0705
Doctors Care - Strand Medical	1220 21st Ave. Myrtle Beach, SC	Every day 8am-8pm	843-626-9379
Doctors Care - Church Street (Hwy 501)	1113 Church St Conway, SC	Every day 8am-8pm	843-248-6269
Doctors Care – Georgetown	1068 North Frazier St Georgetown, SC 29440	Mon-Fri 8am-8pm Sat/Sun 9am-5pm	843-545-7200