

COC™ Preparation Course Syllabus

Clock Hours: 80 (Note: 80 clock hours accounts only for time spent in the online course, and does not include time spent outside the course or study time. Study time will vary widely per individual.)

Course Length: To be completed at student's own pace within a 4-month period or less. Enrollment date begins at date of purchase. Monthly course extensions may be purchased.

Class Hours: Days/Times Per Week: Online course, independent self-study, no classroom meetings; student may login to course at their own time schedule, no specific login times. Students may email course content questions to coaching staff.

Certificate of Completion Issued: Yes

Course Description:

Understanding facility coding is vital when working in the hospital and ambulatory surgery center (ASC) settings. When coding in the outpatient facility setting, reimbursement is based not on professional services provided, but on the resources used during the patient encounter. This course will cover coding fundamentals including CPT®, ICD-10-CM, and HCPCS Level II coding, along with the Outpatient Prospective Payment System (OPPS) which is the payment method used by most payers in outpatient facilities. An introduction to ICD-10-PCS will also be discussed. This course is recommended for anyone who is preparing for a career in medical coding for an outpatient hospital/facility and ASC setting, and prepares the student for the AAPC's COC™ (formerly CPC-H®) certification examination.

Course Objectives:

- Understand outpatient facilities and their departments including outpatient services at hospitals, teaching hospitals, critical access hospitals, ambulatory surgery centers (ASCs), and comprehensive outpatient rehabilitation facilities
- Navigate the business side of hospital outpatient services and ASCs
- Differentiate between inpatient and outpatient services and payment services (IPPS and OPPS)
- Understand the difference between MS-DRGs and APC assignments, and how those services are reported
- Review critical pieces in the billing and revenue cycle management process
- Develop an understanding of compliance in the outpatient hospital facility
- Discuss documentation and coding standards for outpatient facilities
- Code a wide variety of patient services using CPT®, HCPCS Level II, and ICD-10-CM coding guidelines and code sets
- Apply coding and conventions when assigning diagnoses and procedure codes
- Understand how clinic and ED visits and other evaluation and management services are reported in the facility setting
- Understand how modifiers are used in the outpatient facility setting
- Develop an understanding of how to code operative notes in the facility and how to code a wide variety of cases for the outpatient setting

Course Content:

- Outpatient Hospital Facilities and Departments
- Business in the Facility
- CMS Payment Systems (OPPS, DRG, IPPS, Revenue Codes) Overview
- Facility Billing
- Compliance in the Outpatient Facility
- Documentation and Coding Standards
- Anatomy and Medical Terminology
- Introduction to ICD-10-CM Coding
- ICD-10-CM Coding Guidelines

- Introduction to CPT®, HCPCS Level II, Surgery Guidelines, and Modifiers for Facilities
- Evaluation and Management Services for Facilities
- Integumentary System
- Musculoskeletal System
- Respiratory, Hemic, and Lymphatic Systems
- Cardiovascular System
- Digestive System
- Urinary System and Male Genital System
- Female Reproductive System
- Endocrine and Nervous Systems
- Eye, Ocular Adnexa, and Auditory Systems
- Radiology
- Pathology and Laboratory
- Medicine
- CMS and Outpatient Prospective Payment System
- CMS and Inpatient Prospective Payment System
- Inpatient Coding Overview with an introduction to ICD-10-PCS
- Final Exam

Methods of Evaluation:

The instructional methods used include reading assignments, practice exercises and other assignments, audio/video lectures, chapter quizzes, practical applications, chapter review exams, and final exam. To receive a certificate of completion, students must successfully complete the course within the allotted time frame of 4 months or less (monthly extensions may be purchased).

Successful course completion includes:

- An attempt of all required assignments & quizzes
- A passing score of 70% or higher on all chapter review exams
- A passing score of 70% or higher on the final exam
- An overall final course score of 70% or higher

No reduced hours in the course or tuition discount for previous education or training will be granted.

Included Reading Material:

1. Medical Coding Training: COC™ 2018; AAPC; AAPC publisher (available online only in PDF format, no textbook will be issued with this course)

Required Code Books (Included):

1. CPT® Professional Edition code book (2018 year), AMA publisher
2. ICD-10-CM code book (2018 year), any publisher
3. HCPCS Level II Professional code book (2018 year), any publisher