

MEDICAL CODING – OUTPATIENT TRACK

CURRICULUM LEARNING OBJECTIVES

The Piedmont Community Medical Coding and Billing curriculum was developed by credentialed coding and auditing experts with decades of experience working in and teaching medical coding. This ensures you gain the skills you need to earn industry credentials and start working after graduation. With Piedmont Community College's affordable tuition prices, you get a quality online education with one-on-one support by phone, email and chat every step of the way. The learning objectives outlined below provide a map for what you will be able to do as you complete each module.

INTRODUCTION TO CODING

- Define the purpose of medical coding.
- Discuss use of official coding guidelines related to ICD-10-CM (diagnosis coding) and CPT (procedure coding).
- Identify the principles and application of coding systems.
- Define the needed equipment and supplies for coding.

ABSTRACTING CLINICAL DOCUMENTATION & THE CODING PROCESS

- Describe the process of extracting and reporting requirements.
- Deconstruct diagnostic statements.
- Identify manifestations, comorbidities and sequelae in coding scenarios.
- Locate external causes in the ICD-10-CM code book and learn reporting guidelines for usage.
- Learn to deconstruct procedural statements and how to code from the documentation.
- Recognize when to query a provider and how to legally follow through in the process as a coder.
- Practice the coding process including review of the location of all indexes, tables and tabular lists.
- Define and apply the general ICD-10-CM coding conventions and guidelines.
- Learn medical necessity and its use in coding.
- Complete a coding fundamentals capstone.
- Complete a practice MOCK CPC Exam.

ICD-10 CODING

- Assign ICD-10-CM diagnosis codes to a variety of coding scenarios including coding for multiple diagnoses, using appropriate sequencing.
- Define and apply the ICD-10-CM chapter-specific coding guidelines to all 21 chapters in ICD-10-CM.
- Practice assigning ICD-10-CM codes to many types of cases, using more complex code assignments to gain proficiency.



- Apply ethical coding to practice cases.
- Complete a Diagnostic Coding Capstone encompassing all ICD-10-CM coding chapters and guidelines.

REPORTING PHYSICIAN SERVICES AND OUTPATIENT PROCEDURES - CPT & HCPCS

- Describe the process of extracting and reporting requirements.
- Learn the organizational layout of the CPT code and how to utilize each section along with notations and symbols used.
- Deconstruct procedural statements and understand code descriptions given.
- Identify the meaning and purposes of procedural codes and how to apply them.
- Apply coding process of "locate and verify" when assigning procedural codes.
- Notate official guidelines in CPT.
- Locate and accurately construct procedure codes using the Alphabetic Index and Tables.
- Identify the uses of CPT Category II and Category III codes and understand their use in procedural coding.
- Recognize CPT and HCPCS modifiers, knowing their location, usage and sequencing in coding.

CPT/HCPCS CODING

- Learn CPT Evaluation and Management codes, their location in the code book, and use in procedure coding.
- Calculate and assign CPT Evaluation and Management codes.
- Identify the meaning and purposes of procedural codes and how to apply them.
- Apply coding process of "locate and verify" when assigning procedural codes.
- Locate and accurately construct procedure codes using the Alphabetic Index and Tables.
- Apply the guidelines for the six main sections of the CPT code book and assign codes from each section.
- Recognize modifiers that can be appended to CPT procedure codes and identify when their use is appropriate.
- Practice assigning CPT codes for Evaluation and Management, Anesthesia, Surgery, Radiology, Pathology & Lab and Medicine.
- Complete a Physician Services Capstone encompassing all CPT coding chapters and guidelines.

MOCK CPC Exam

- Apply knowledge of coding to a variety of realistic coding scenarios to build speed and accuracy to prepare for the AAPC CPC (Certified Professional Coder) credentialing exam.
- Practice and apply the use of official coding guidelines and reporting requirements.
- Apply codes to many types of records including outpatient, physician, emergency room, long-term care, and home health.