Course Outline

2026-2027 Catalog

HIM 64 - Advanced Medical Coding

Catalog Description

Transfer Status: CSU

Prerequisite: HIM 62

Unit(s): 3.00

Lecture: 42.50 Contact hours/85.00 Out of class hours/127.50 Total hours/2.50 Unit(s)
Lab: 25.50 Contact hours/0.00 Out of class hours/25.50 Total hours/0.50 Unit(s)
Total: 68.00 Contact hours/85.00 Out of class hours/153.00 Total hours/3.00 Unit(s)

Course Description: This is an advanced course in medical coding for both outpatient and inpatient procedures and services. The course will include a brief review of International Classification of Diseases 10 Clinical Modification (ICD-10-CM) and Current Procedural Terminology (CPT). By following steps in the coding selection and sequencing process, students will assign appropriate procedure and service codes. Students will use the International Classification of Diseases 10 Procedure Coding System (ICD-10-PCS) and CPT (including Evaluation & Management Code (E&M), Audits, Modifiers, and Healthcare Common Procedure Coding System (HCPCS)) classification systems in this process.

Objectives

Upon successful completion of this course, the student should be able to:

1. Explain and navigate the structure of ICD-10-PCS and CPT coding systems.
2. Explain the procedure and service codes found in the ICD-10-PCS and CPT (including E&M, Audits, Modifiers, and HCPCS) coding systems.
3. Accurately apply conventions and guidelines when selecting, assigning and sequencing ICD-10-PCS and CPT (including E&M Codes, Audits, Modifiers, and HCPCS) procedure and service codes given complex medical documentation including operative reports.
4. Explain the coding conventions and guidelines associated within both coding systems: ICD-10-PCS and CPT.

Course Content

Topic Titles / Suggested Time Topic

Lecture

Topics	Lec Hrs
ICD-10-CM Review: Coding conventions, guidelines, and diagnostic code selection.	2.50
ICD-10-PCS: Structure and code guidelines for each of the ICD-10-PCS sections used when assigning and sequencing procedure codes.	19.00
CPT: Structure and code guidelines for each of the CPT Sections (including E&M Codes, Audits, Modifiers, and HCPCS) used when selecting, assigning, and sequencing procedure and service codes.	19.00
CPT Review: Coding conventions, guidelins, and procedural code selection.	2.00
Total Hours:	**42.50**

Lab

Topics	Lab Hrs
ICD-10-CM Review: Coding conventions, guidelines, and diagnostic code selection.	2.50
CPT: Structure and code guidelines for each of the CPT Sections (including E&M Codes, Audits, Modifiers, and HCPCS) used when selecting, assigning, and sequencing procedure and service codes.	11.00
ICD-10-PCS: Structure and code guidelines for each of the ICD-10-PCS sections used when assigning and sequencing procedure codes.	10.00
CPT Review: Coding conventions, guidelines, and procedural code selection.	2.00
Total Hours:	**25.50**

Methods of Instruction

A. Class Activities
B. Collaborative Group Work
C. Instructor Demonstrations
D. Lecture
E. Lab Activities: Inpatient Coding based on Case Studies

Methods of Evaluation

A. Exams/Tests
B. Projects
C. Class participation
D. Practical Evaluations: Inpatient Coding based on Case Studies

Examples of Assignments

Reading Assignments

1. Locate an AHIMA.org journal article regarding Clinical Documentation Improvement (CDI). Read the article and be prepared to discuss during class.
2. Locate and read an article regarding the new component of ICD-10 coding, laterality. Be prepared to discuss the inclusion of laterality in ICD-10 coding and its possible benefits.

Writing Assignments

1. Conduct research on the Medicare 1997 Documentation Guidelines. In a two-page, double-spaced report, summarize the major changes from the Medicare 1995 Documentation Guidelines.
2. Both CPT and ICD-10-PCS are procedural coding systems. Please write a two-page report that identifies the distinctions between the two classification systems.

Out-of-Class Assignments

1. Read and analyze the Case Study regarding Labor and Delivery. Determine the following: ICD-10-CM diagnosis code and ICD-10-PCS procedure code. Please bring to class and be prepared to share your coding selection with the class.
2. Analyze the advanced Case Study regarding the patient with possible high blood pressure. Using the E&M Subcategory Questionnaire, assign the accurate E&M code.

Recommended Materials of Instruction

Bowie, Mary Jo. (2017). Understanding ICD-10-CM and ICD-10-PCS. *Cengage Learning, 3rd.*
Brame, T. (2014). E & M Coding Clear & Simple. *F. A. Davis Company, 1st.*

Minimum Qualifications

Health Information Technology

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