

INPATIENT AUDITING LEARNING OBJECTIVES



CURRICULUM LEARNING OBJECTIVES

The Career Step Inpatient Auditing program was developed in collaboration with large employer partners. Designed to build on the experience of an inpatient acute care medical coder, the program helps students quickly gain the knowledge and skills they need to advance their HIM career. In order to enroll, students must have at least 3 years of inpatient acute care coding experience within the last 5 years. An RHIA, RHIT, CCS, or CPC credential is recommended. The learning objectives outlined below provide a map of the knowledge and skills students will gain as they complete each module.

ORIENTATION

Program Orientation (1 hour)

- Open courses and describe different types of courses.
- Access modules, scores, and completion reports.
- Navigate text-based and interactive instruction and activities.

ICD-10-CM Skills (20 hours)

- Apply ICD-10-CM coding guidelines.
- Apply ICD-10-CM documentation requirements.
- Review skills required for complete ICD-10-CM coding and accurate reimbursement.

ICD-10-PCS Skills (20 hour)

- Apply ICD-10-PCS coding guidelines.
- Apply ICD-10-PCS documentation requirements.
- Review skills required for complete ICD-10-PCS coding and accurate reimbursement.

Fundamentals and Reimbursement Concepts (20 hours)

- Explain the inpatient prospective payment system (IPPS).
- Describe blended rates.
- Explain charge capture on inpatient encounters.
- Explain value-based reimbursement.
- Define HCCs and their use/importance.
- Explain the history of Medicare Severity and All Patients Refined Diagnosis Related Groups (MS and APR DRGs) and the difference between them.
- Understand what impacts an MS/APR DRG.
- Explain the difference between Comorbidities (CCs) and Major Comorbidities (MCCs) and their impact on DRG assignment.
- Understand Case Mix Index (CMI) and how it is affected by DRGs.
- Explain the importance of Severity of Illness (SOI) and Risk of Mortality (ROM) and the impact on hospital/physician profiling.
- Understand an explain DRG hierarchy and optimization.
- Understand the Medicare Base Rate and how it is used with DRG calculations.

- Understand specific DRG scenarios and documentation requirements.
- Become aware of top 10 MS-DRGs.
- Explain the *ICD-10-CM Official Guidelines for Coding and Reporting* and *ICD-10-PCS Official Guidelines for Coding and Reporting* and the impact on specific DRGs.
- Understand the documentation requirements to support ICD-10 code specificity.
- Understand the top 5 DRG shifts with the implementation of ICD-10.

Regulatory Compliance (20 hours)

- Define the Health Insurance Portability and Accountability Act (HIPAA).
- Identify components of the Code of Ethics and Standards of Ethical Coding.
- Describe compliance risks.
- Explain government agencies who audit for improper payments, fraud, abuse, and waste.
- Explain quality improvement organizations.
- Gain an understanding of the OIG Work Plan.
- Explain an appeals process.

Healthcare Law (10 hours)

- Describe healthcare law fundamentals.
- Explain upcoding and other high-risk billing practices.
- Explain self-reporting, disclosure, and the 60-Day rule.
- Describe various healthcare laws/rules such as Sarbanes-Oxley, Two-Midnight Rule, Stark Law, Anti-Kickback Statute, and the False Claims Act.
- Discuss CMS goals for reducing fraud and abuse.
- Explain the appeals process and government interviews.
- Describe the steps of an effective compliance plan.

Documentation Integrity (30 hours)

- Explain the negative impact of EMR copying and pasting.
- Explain the impact of documentation on quality and reimbursement.
- Describe the difference between optimization and maximization.
- Understand clinical indicators, common treatments, and

documentation requirements for common conditions in the major diagnostic categories (MDCs).

- Describe the definition of attending physician and components of a valid admission order.
- Identify HACs.
- Describe the high-risk, error-prone MS-DRGs.
- Identify ICD-9 targeted cases still under scrutiny.

Administrative and Soft Skills Development (67 hours)

- Sharpen written communication skills in a business context.
- Apply problem solving steps and tools.
- Analyze information to clearly describe problems.
- Identify appropriate solutions.
- Think creatively and be a contributing member of a problem-solving team.
- Select the best approach for making decisions.
- Create a plan for implementing, evaluating, and following up on decisions.
- Avoid common decision-making mistakes.
- Identify the elements of a strong executive presence.
- Build trust and credibility with others.
- Communicate effectively using verbal and non-verbal techniques.
- Create a strong, positive first impression and maintain that impression as they build a relationship with others.
- Develop key leadership skills, including techniques for coaching, motivating, and delivering feedback.
- Understand the value of meetings as a management tool.
- Recognize the critical planning step that makes meeting time more effective.
- Identify process tools that can help create an open and safe forum for discussion.
- Develop and practice techniques for handling counterproductive behaviors.
- Understand what conflict is and how it can escalate.
- Understand the types of conflict and the stages of conflict.
- Recognize the five most common conflict resolution styles and when to use them.
- Increase positive information flow through non-verbal and verbal communication skills.
- Develop effective techniques for intervention strategies.
- Manage conflicts to enhance productivity and performance.

- Develop a working knowledge of Microsoft PowerPoint.
- Understand how to use Microsoft Access.
- Master Microsoft Excel, including specific functions such as pivot tables.

Audit Principles (10 hours)

- Describe the fundamentals of hospital inpatient auditing.
- Identify various audit types including internal and external, and random versus focused.
- Explain how to scope an audit based on audit type.
- Articulate how to analyze data and look for problem areas for targeted audits.
- Recall concepts of statistical sampling methods.

Audit and Record Review (57 hours)

- Understand what it takes to complete a successful audit.
- Understand the common, high-risk errors identified during an audit.
- Learn the best practices for capturing audit results and reporting them.
- Audit case scenarios that will be reviewed for applied learning.

Audit Reporting (15 hours)

- Refresh fundamentals of good writing.
- Identify the key stakeholders for the audit results.
- Understand the scope of a written audit summary report.
- Learn how to develop an audit summary report.
- Describe various ways to deliver the audit results.
- Identify the appropriate use of a PowerPoint presentation.
- Review tips for managing an effective meeting.
- Complete a written audit summary report.

Audit Practicum (140 hours)

- Conduct an audit through application of auditing principles to a variety of inpatient records.
- Accurately complete an audit worksheet.
- Accurately analyze audit findings.
- Communicate the results of the audit in writing by submission of an Audit Summary Report.
- Verbally communicate the audit results by submission of two PowerPoint-led, recorded presentations, each of which is appropriate for a specific audience.
- Submit a PowerPoint (file only, not a recorded presentation) for a third audience.

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