

## Washtenaw Community College Comprehensive Report

### MBC 210 Intermediate/Advanced ICD-10 CM Coding Effective Term: Fall 2025

#### Course Cover

**College:** Health Sciences

**Division:** Health Sciences

**Department:** Health Science

**Discipline:** Medical Billing and Coding

**Course Number:** 210

**Org Number:** 15950

**Full Course Title:** Intermediate/Advanced ICD-10 CM Coding

**Transcript Title:** Inter/Adv ICD-10 CM Coding

**Is Consultation with other department(s) required:** No

**Publish in the Following:** College Catalog , Time Schedule , Web Page

**Reason for Submission:** Course Change

**Change Information:**

**Consultation with all departments affected by this course is required.**

**Course description**

**Outcomes/Assessment**

**Objectives/Evaluation**

**Rationale:** This course is going through CITL redesign and these changes will support assessments moving forward.

**Proposed Start Semester:** Winter 2025

**Course Description:** In this course, students will be introduced to the process of transforming narrative descriptions of inpatient procedures into alphanumeric codes used to report and share patient healthcare information with healthcare providers and insurers. An overview of the International Classification of Diseases Procedure Coding System (ICD-10-PCS) will be provided, and students will practice using the system. Students will apply ICD-10-PCS to complex coding scenarios and examine strategies for implementing coding compliance, auditing, reporting, and quality monitoring.

#### Course Credit Hours

**Variable hours:** No

**Credits:** 3

**Lecture Hours: Instructor: 45 Student: 45**

**Lab: Instructor: 0 Student: 0**

**Clinical: Instructor: 0 Student: 0**

**Total Contact Hours: Instructor: 45 Student: 45**

**Repeatable for Credit:** NO

**Grading Methods:** Letter Grades

Audit

**Are lectures, labs, or clinicals offered as separate sections?:** NO (same sections)

#### College-Level Reading and Writing

College-level Reading & Writing

#### College-Level Math

**Requisites****Prerequisite**

MBC 205

**General Education****Request Course Transfer****Proposed For:****Student Learning Outcomes**

1. Explain the history and organization of ICD-10-PCS.

**Assessment 1**

Assessment Tool: Outcome-related exam questions

Assessment Date: Fall 2025

Assessment Cycle: Every Three Years

Course section(s)/other population: All sections

Number students to be assessed: All students

How the assessment will be scored: Answer key

Standard of success to be used for this assessment: 75% of students will score 75% or higher on the outcome-related questions.

Who will score and analyze the data: Departmental faculty

2. Describe General Coding Guidelines for Diagnosis.

**Assessment 1**

Assessment Tool: Outcome-related exam questions

Assessment Date: Fall 2025

Assessment Cycle: Every Three Years

Course section(s)/other population: All sections

Number students to be assessed: All students

How the assessment will be scored: Answer key

Standard of success to be used for this assessment: 75% of students will score 75% or higher on the outcome-related questions.

Who will score and analyze the data: Departmental faculty

3. Perform coding according to ICD-10-PCS guidelines.

**Assessment 1**

Assessment Tool: Outcome-related exam questions

Assessment Date: Fall 2025

Assessment Cycle: Every Three Years

Course section(s)/other population: All sections

Number students to be assessed: All students

How the assessment will be scored: Answer key

Standard of success to be used for this assessment: 75% of students will score 75% or higher on the outcome-related questions.

Who will score and analyze the data: Departmental faculty

4. Utilize the Basic Steps of Coding.

**Assessment 1**

Assessment Tool: Outcome-related exam questions

Assessment Date: Fall 2025

Assessment Cycle: Every Three Years

Course section(s)/other population: All sections

Number students to be assessed: All students

How the assessment will be scored: Answer key

Standard of success to be used for this assessment: 75% of students will score 75% or higher on the outcome-related questions.

Who will score and analyze the data: Departmental faculty

### **Course Objectives**

1. Recognize the differences in International Classification of Diseases - Clinical Modification (ICD-10 CM), ICD-10 PCS, Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) classification systems.
2. Describe the application of coding.
3. Define nomenclature and classification.
4. Identify the historical timeline of coding.
5. Describe different coding organizations and credentials.
6. Recognize the importance of the Standards of Ethical Coding.
7. Define compliance as it relates to coding.
8. Explain confidentiality as it applies to coding.
9. Explain the purpose of various forms or reports found in a health record.
10. Define "principal diagnosis."
11. Define "principal procedure."
12. Identify reasons for assigning codes for other diagnoses.
13. List the basic guidelines for reporting diagnoses/procedures.
14. Identify the types of documentation acceptable for assigning codes.
15. Explain the query process.
16. Identify the format of ICD-10-CM codebook.
17. Explain and apply the conventions and guidelines.
18. Assign a diagnosis or procedure from Alphabetic Index using main terms, sub-terms, and essential modifiers.
19. Explain the necessity of referencing the Alphabetic Index and the Tabular List.
20. Describe the basic steps of coding.
21. Explain how to use both the Alphabetic Index and the Tabular List.
22. Apply the ICD-10-CM Official Guidelines for Coding and Reporting.
23. Sequence the ICD-10-CM diagnosis code as directed by coding guidelines or ICD-10-CM conventions.
24. Determine whether signs, symptoms or manifestations require a separate code assignment.
25. Assign ICD-10-CM diagnosis codes for sequela.
26. Identify the format of ICD-10-PCS, Alphabetic Index, and PCS tables.
27. Define the root operations for the medical and surgical sections of ICD-10-PCS.

### **New Resources for Course**

#### **Course Textbooks/Resources**

Textbooks  
Manuals  
Periodicals  
Software

#### **Equipment/Facilities**

#### **Reviewer**

#### **Faculty Preparer:**

*Kiela Samuels*

#### **Department Chair/Area Director:**

*Valerie Greaves*

#### **Action**

*Faculty Preparer*

*Recommend Approval*

#### **Date**

*Nov 01, 2024*

*Nov 04, 2024*

**Dean:**

*Shari Lambert*

*Recommend Approval*

*Nov 25, 2024*

**Curriculum Committee Chair:**

*Randy Van Wagnen*

*Recommend Approval*

*Mar 30, 2025*

**Assessment Committee Chair:**

*Jessica Hale*

*Recommend Approval*

*Apr 13, 2025*

**Vice President for Instruction:**

*Brandon Tucker*

*Approve*

*Apr 15, 2025*

# Washtenaw Community College Comprehensive Report

## MBC 210 Intermediate/Advanced ICD-10 CM Coding Effective Term: Fall 2020

### Course Cover

**Division:** Health Sciences

**Department:** Health Science

**Discipline:** Medical Billing and Coding

**Course Number:** 210

**Org Number:** 15900

**Full Course Title:** Intermediate/Advanced ICD-10 CM Coding

**Transcript Title:** Inter/Adv ICD-10 CM Coding

**Is Consultation with other department(s) required:** No

**Publish in the Following:** College Catalog , Time Schedule , Web Page

**Reason for Submission:** Three Year Review / Assessment Report

**Change Information:**

**Consultation with all departments affected by this course is required.**

**Course title**

**Course description**

**Outcomes/Assessment**

**Objectives/Evaluation**

**Rationale:** Update Master Syllabus as a result of an assessment report.

**Proposed Start Semester:** Fall 2020

**Course Description:** In this course, students are introduced to the process of transforming narrative descriptions of diseases and injuries into alphanumeric codes used to report and share patient healthcare information with healthcare providers and insurers. An overview of the ICD-10 CM disease coding system will be provided, and students will practice using the coding system. Students will apply ICD-10 CM to complex coding scenarios and examine strategies for implementing coding compliance, auditing, reporting and quality monitoring.

### Course Credit Hours

**Variable hours:** No

**Credits:** 3

**Lecture Hours: Instructor: 45 Student: 45**

**Lab: Instructor: 0 Student: 0**

**Clinical: Instructor: 0 Student: 0**

**Total Contact Hours: Instructor: 45 Student: 45**

**Repeatable for Credit:** NO

**Grading Methods:** Letter Grades

Audit

**Are lectures, labs, or clinicals offered as separate sections?:** NO (same sections)

### College-Level Reading and Writing

College-level Reading & Writing

### College-Level Math

### Requisites

**Prerequisite**  
MBC 205

**General Education**

**Request Course Transfer**

**Proposed For:**

**Student Learning Outcomes**

1. Differentiate the ICD-10 CM classification system from other classification systems.

**Assessment 1**

Assessment Tool: Written exam

Assessment Date: Winter 2021

Assessment Cycle: Every Three Years

Course section(s)/other population: All sections

Number students to be assessed: All students

How the assessment will be scored: Answer key

Standard of success to be used for this assessment: 75% of students will score 75% or higher on the outcome-related questions.

Who will score and analyze the data: Departmental faculty

2. Navigate to the Neoplasm, External Causes and Drug and Chemical tables.

**Assessment 1**

Assessment Tool: Written exam

Assessment Date: Winter 2021

Assessment Cycle: Every Three Years

Course section(s)/other population: All sections

Number students to be assessed: All students

How the assessment will be scored: Answer key

Standard of success to be used for this assessment: 75% of students will score 75% or higher on the outcome-related questions.

Who will score and analyze the data: Departmental faculty

3. Recognize the differences in and uses of the Tabular list and the Alpha Index.

**Assessment 1**

Assessment Tool: Written exam

Assessment Date: Winter 2021

Assessment Cycle: Every Three Years

Course section(s)/other population: All sections

Number students to be assessed: All students

How the assessment will be scored: Answer key

Standard of success to be used for this assessment: 75% of students will score 75% or higher on the outcome-related questions.

Who will score and analyze the data: Departmental faculty

4. Perform coding according to ICD-10 CM coding conventions and guidelines.

**Assessment 1**

Assessment Tool: Written exam

Assessment Date: Winter 2021

Assessment Cycle: Every Three Years

Course section(s)/other population: All sections

Number students to be assessed: All students

How the assessment will be scored: Answer key

Standard of success to be used for this assessment: 75% of students will score 75% or higher on the outcome-related questions.

Who will score and analyze the data: Departmental faculty

### Course Objectives

1. Recognize the differences in ICD-10 CM, ICD-10 PCS, CPT and HCPCS classification systems.
2. Describe the ICD-10 CM classification system.
3. Recognize the ICD-10 CM coding conventions, such as requiring that the underlying condition be sequenced first followed by the manifestation.
4. Recognize the ICD-10 CM coding guidelines, such as the use of placeholder character X.
5. Recognize the use of the neoplasm table.
6. Recognize the use of the drug and chemical table.
7. Recognize the use of the injury and external cause table.
8. Apply the ICD-10 CM classification system to sample scenarios.
9. Present on various topics related to ICD-10 CM classification.
10. Use the ICD-10 manual to look up main terms used in coding.
11. Use the ICD-10 manual to look up the sub-term that represents site, type or etiology of the diseases or injuries.
12. Recognize common diseases.
13. Recognize common disease processes.
14. Sequence medical terms based on guidelines.
15. Sequence medical terms based on conventions.
16. Follow the eight steps to accurate coding.
  1. Identify the main term(s) in the diagnostic statement.
  2. Locate the main term(s) in the Alphabetic Index.
  3. Review any sub-terms under the main term in the index.
  4. Follow any cross-reference instructions, such as "see or see also"
  5. Always verify the code(s) selected from the index in the Tabular List.
  6. Refer to any instructional notations in the Tabular List.
  7. Assign codes to the highest level of specificity (if there is a red dot in front of the code it needs another character [number or letter]).
  8. Code the diagnosis until all elements are completely identified.
17. Differentiate between essential modifiers and non-essential modifiers.

### New Resources for Course

#### Course Textbooks/Resources

Textbooks  
Manuals  
Periodicals  
Software

#### Equipment/Facilities

<u>Reviewer</u>	<u>Action</u>	<u>Date</u>
<b>Faculty Preparer:</b> <i>Ladonna Caviness</i>	<i>Faculty Preparer</i>	<i>Feb 10, 2020</i>
<b>Department Chair/Area Director:</b> <i>Rene Stark</i>	<i>Recommend Approval</i>	<i>Feb 11, 2020</i>
<b>Dean:</b> <i>Valerie Greaves</i>	<i>Recommend Approval</i>	<i>Feb 12, 2020</i>
<b>Curriculum Committee Chair:</b> <i>Lisa Veasey</i>	<i>Recommend Approval</i>	<i>Mar 12, 2020</i>

**Assessment Committee Chair:**

*Shawn Deron*

*Recommend Approval*

*Jun 16, 2020*

**Vice President for Instruction:**

*Kimberly Hurns*

*Approve*

*Jun 17, 2020*