

2014 - 2015

COURSE: MA 206 – Computerized Medical Office Procedures

COURSE DESCRIPTION: This course introduces the student to common administrative procedures performed in both small and large medical practices. Students will learn to input patient information, bill insurance companies, and schedule appointments. In addition, students will become familiar with printing necessary reports, creating medical insurance claims, and follow-up on the collection process.

LEARNING GOALS: To become acquainted with computerized medical office software. To become efficient in entering patient information into the computer and navigate through the patients computer record.

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DURATION: 84 Clock Hours 3 Semester Credits

TEXT: *Computers in the Medical Office, 8th edition, by McGraw Hill.*

COURSE OBJECTIVES:

206 1	Introduction to Health Information Technology and Medical Billing	4
206 2	Introduction to Medisoft	4
206 3	Scheduling	5
206 4	Entering Patient Information	5
206 5	Working with Cases.....	5
206 6	Entering Charge Transactions and Patient Payments.....	6
206 7	Creating Claims	6
206 8	Posting Payments and Creating Patient Statements	7
206 9	Creating Reports.....	7
206 10	Collections in the Medical Office.....	6
206 11	Appointments and Registration	6
206 12	Cases, Transactions, and Claims	7
206 13	Reports and Collections	8
206 14	Putting It All Together	8

TERMINAL OBJECTIVES:

- 1.1 Explain why the use of technology in healthcare is increasing.
 - 1.2 Describe the functions of practice management programs.
 - 1.3 Identify the core functions of electronic health record programs.
 - 1.4 List the step in the medical documentation and billing cycle that occurs before a patient encounter.
 - 1.5 List the steps in the medical documentation and billing cycle that occur during a patient encounter.
 - 1.6 List the steps in the medical documentation and billing cycle that occur after a patient encounter.
 - 1.7 Discuss how the HIPAA Privacy Rule and Security Rule protect patient health information.
 - 1.8 Explain how the Health Information Technology for Economic and Clinical Health (HITECH) Act and the Affordable Care Act(ACA) promote health information technology and explore new models of delivering healthcare.
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- 2.1 List the six databases Medisoft uses to store information.
 - 2.2 List the menus in Medisoft.
 - 2.3 Explain the function of the Medisoft toolbar.
 - 2.4 Explain how to enter, edit, save, and delete data in Medisoft.
 - 2.5 Describe how to change the Medisoft Program Date.
 - 2.6 Discuss two types of help available in Medisoft.

- 2.7 Explain how to create and restore backup files in Medisoft.
- 2.8 Describe the functions of the file maintenance utilities in Medisoft.
- 2.9 Describe the Medisoft security features used to ensure compliance with HIPAA and HITECH regulations.

- 3.1 List the four main areas of the Office Hours window.
- 3.2 Demonstrate how to enter an appointment.
- 3.3 Demonstrate how to schedule a follow-up appointment.
- 3.4 Demonstrate how to search for an available time slot.
- 3.5 Demonstrate how to book an appointment for a new patient.
- 3.6 Demonstrate how to book repeating appointments.
- 3.7 Demonstrate how to reschedule an appointment.
- 3.8 Demonstrate how to verify a patient's insurance eligibility.
- 3.9 Demonstrate how to check in a patient.
- 3.10 Demonstrate how to create an overdue balance report for the upcoming appointments.
- 3.11 Demonstrate how to create a recall list.
- 3.12 Demonstrate how to enter provider breaks in the schedule.
- 3.13 Demonstrate how to preview and print a provider's schedule.

- 4.1 Explain how patient information is organized in Medisoft.
- 4.2 Discuss how a new patient is added in Medisoft.
- 4.3 Describe how to search for a patient in Medisoft.
- 4.4 Describe how patient information is edited in Medisoft.

- 5.1 Describe when it is necessary to create a new case in Medisoft.
- 5.2 List the eleven tabs in the Case dialog box.
- 5.3 Review the information contained in the Personal tab and the Account tab.
- 5.4 Discuss the information recorded in the Policy 1,2,3 and Medicaid and Tricare tabs in Medisoft.
- 5.5 Describe the information contained in the Diagnosis tab and the Condition tab in Medisoft.
- 5.6 Review the purpose of the Miscellaneous, Comment, and EDI tabs in Medisoft.
- 5.7 Describe how to edit information in a case.

- 6.1 Describe the three types of transactions recorded in Medisoft.
- 6.2 Discuss how to select a patient and case in Transaction Entry.
- 6.3 Demonstrate how to enter charge transactions in Medisoft.
- 6.4 Demonstrate how to enter payments made at the time of an office visit.
- 6.5 Demonstrate how to print a walkout receipt.
- 6.6 Demonstrate how to process a refund for a patient.
- 6.7 Demonstrate how to post a nonsufficient funds (NSF) check.

- 7.1 Describe the five most common types of health insurance plans.
- 7.2 Describe the role of claims in the billing cycle.
- 7.3 Discuss the information contained in the Claim Management dialog box.
- 7.4 Demonstrate how to create claims in Medisoft.
- 7.5 Describe how to locate a claim that has already been submitted.
- 7.6 Discuss how claims are edited in Medisoft.
- 7.7 Explain how to change the status of a claim.
- 7.8 List the steps required to submit electronic claims in Medisoft.
- 7.9 Describe how to add attachments to electronic claims.

- 8.1 Describe how an adjustment is calculated if the payer pays less than the provider's usual fee.
- 8.2 List the five steps for processing a remittance advice.
- 8.3 Demonstrate how to enter insurance payments.
- 8.4 Demonstrate how to apply insurance payment to charges.
- 8.5 Demonstrate how to enter and apply a patient payment received by mail.
- 8.6 Demonstrate how to enter capitation payments.
- 8.7 Demonstrate how to create patient statements.
- 8.8 Explain how statements are edited.
- 8.9 Demonstrate how to preview and print patient statements.

- 9.1 List the three types of reports available in Medisoft.
- 9.2 Explain why accounts receivable reports are critical to a practice's financial success.

- 9.3 Distinguish between patient, procedure, and payment day sheets.
- 9.4 Demonstrate how to create a practice analysis report.
- 9.5 Demonstrate how to create a patient ledger.
- 9.6 Demonstrate how to create a standard patient list report.
- 9.7 Describe how to use Medisoft Repots to create a report.
- 9.8 Demonstrate how to create a patient aging report.
- 9.9 Explain how to access Medisoft's built-in custom reports.
- 9.10 Demonstrate how to open a report for editing in Medisoft's Report Designer.

- 10.1 Explain the importance of prompt follow-up on insurance claims.
- 10.2 Summarize the importance of a financial policy in a medical office.
- 10.3 Identify the laws that regulate collections from patients.
- 10.4 Demonstrate how to post a payment from a collection agency.
- 10.5 Discuss the process of writing off uncollectible accounts.
- 10.6 Explain how to use a patient aging report to identify past-due accounts.
- 10.7 Demonstrate how to add an account to the collection list.
- 10.8 Demonstrate how to create a collection letter.
- 10.9 Demonstrate how to create a collection tracer report.

Chapters 11-14 provide you with an opportunity to practice what you learned in Chapters 2-10. These last chapters differ from the others in several ways:

- The purpose of these chapters is to see how well you have mastered the Medisfot skills taught in earlier chapters, rather than to cover new topics.
- Minimal instructions are provided for the exercises in Chapters 11, 12, and 13. In Chapter Chapter 14, you are on your own – no instructions are provided.
- Convenient cross-references are provided to pages in the earlier chapters that teach each Medisoft skill, in case you need to review a procedure or refresh you skills.
- There are no objectives, key terms, or end-of-chapter exercises.

PROFESSIONAL OBJECTIVES:

1. Demonstrate self-discipline and positive attitude by being in class, being on time, being prepared for class, and by handing in assignments on time in a neat and professional manner.
2. Demonstrate good listening skills by participating in class discussion, problem solving, and by following verbal instructions.
3. Demonstrate accuracy by following directions explicitly when completing assignments.

METHODS OF INSTRUCTION: Lecture, class discussion, projects, case studies, and computer exercises.

ATTENDANCE: Absences can seriously affect grades. The maximum number of classes missed is four (4) days. There are no excused absences. Students are responsible for all information missed while absent from class. This includes any changes to the schedule that might occur. When a student is 10 minutes late for class, it is an automatic absence.

MAKE-UP POLICY: Make up work procedures addressed in the MA Student Policy Manual.

GRADING SCALE:

- 100% - 94% = A
- 93% - 87% = B
- 86% - 80% = C
- 79% or Below = F

STUDENT HANDBOOK: As a student, you are responsible for the information in the LATI handbook. Lake Area Technical Institute reserves the right to change regulations and policies as necessary.

ACADEMIC INTEGRITY

Students' Responsibilities: Students area responsible for their own behaviors and are expected to maintain stated standards of academic honesty. Students share the responsibility with the faculty for maintaining an environment that supports academic honesty and discourages plagiarism or cheating.

Faculty and Administrator Responsibilities: Faculty are responsible for creating a classroom and testing environment that discourages cheating, confronts suspected violators and insures fair environment that discourages academic dishonesty. If a student is participating in academic dishonesty and is caught, he/she may be dismissed from the course.

ADA COMPLIANCE: Students are entitled to “reasonable accommodations” under provisions of the Americans with Disabilities Act. Those in need of such accommodations should notify the instructor and make appropriate arrangements with the Counseling Office.



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