This class provides students with the knowledge and skills needed to work in a variety of medical billing and coding positions in the medical field. It covers the foundations of insurance, billing, coding and reimbursement. Students will learn the submission of claims to the insurance carrier, reviewing medical records, verifying patient benefits, submitting a secondary claim, posting payments and appealing the insurance carrier’s decision. Also included is HIPAA, CPT Procedural Coding, and ICD-10-CM Diagnostic Coding; Medical Coding; as well as outstanding coverage of electronic records. Also included is Government programs such as Medicare, Medicaid, and Tricare are covered, and Worker’s Compensation. To complete the revenue cycle, explanation of benefits, refunds and appeals are taught. The class covers explanation of benefits, refunds, appears, and electronic submissions. Worker’s Compensation is also covered.

Students can expect to learn about:
• Health Insurance origins, the career, and reforms
• Medicare, Medicaid, Tricare, Managed Care, and Private Payers
• The billing revenue cycle
• Introduction to diagnostic and procedural coding
• Posting and understanding the payment process

2 Semesters

Community Education & Workplace Training
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