



COC™ Accelerated Course Syllabus

Prerequisites: CPC® certification required for enrollment. Knowledge of medical terminology and anatomy (or AAPC courses) strongly recommended.

Clock Hours: 45 (*Note: 45 clock hours accounts only for time spent in the online course, and does not include time spent outside the course or study time. Study time will vary widely per individual.*)

Course Length: To be completed at student's own pace within a 3-month period or less. Enrollment date begins at date of purchase. Monthly course extensions may be purchased.

Class Hours: Days/Times Per Week: Online course, independent self-study, no classroom meetings; student may login to course at their own time schedule, no specific login times. Students may email course content questions to coaching staff.

Certificate of Completion Issued: Yes

Course Description: Understanding facility coding is vital when working in the hospital and ambulatory surgery center (ASC) settings. When coding in the outpatient facility setting, reimbursement is based not on professional services provided, but the resources used during the patient encounter. This course will cover outpatient facilities and departments, compliance in the facility, along with the CMS payment systems which include the Outpatient Prospective Payment System (OPPS). A summary of CPT® coding and variations for the facility are also discussed. This course is recommended for anyone who currently has the CPC® certification and is preparing for a career in medical coding for an outpatient hospital/facility and ASC setting. This course prepares the current CPC® with the additional knowledge required for AAPC's COC™ (formerly CPC-H®) certification examination.

Course Objectives:

- Understand outpatient facilities and their departments including outpatient services at hospitals, teaching hospitals, critical access hospitals, ambulatory surgery centers (ASCs), and comprehensive outpatient rehabilitation facilities
- Navigate the business side of hospital outpatient services and ASCs
- Differentiate between inpatient and outpatient services and payment services (IPPS and OPPS)
- Understand the difference between MS-DRGs and APC assignments, and how those services are reported
- Review critical pieces in the billing and revenue cycle management process
- Develop an understanding of compliance in the outpatient hospital facility
- Discuss documentation and coding standards for outpatient facilities
- Understand how clinic and ED visits and other evaluation and management services are reported in the facility setting
- Review and code a wide variety of patient services using CPT®, HCPCS Level II, and ICD-10-CM coding guidelines and code sets for the facility

Course Content:

- Outpatient Facilities and Departments
- Business in the Facility
- CMS Payment Systems Overview
- Outpatient Facility Billing
- Compliance in the Facility
- Documentation and Coding Standards
- Anatomy
- Introduction to ICD-10-CM Coding
- ICD-10-CM Coding Guidelines

- Introduction to CPT®, HCPCS Level II, Surgery Guidelines, and Modifiers for Facilities
- Evaluation and Management (E/M) for Facilities
- Accelerated Coding Review
- CMS and Outpatient Payment Systems
- CMS and Inpatient Payment Systems
- Introduction to ICD-10-PCS
- Final Exam

Methods of Evaluation:

The instructional methods used include reading assignments, practice exercises and other assignments, audio/video lectures, chapter quizzes, chapter reviews & other exams, and a final exam. To receive a certificate of completion, students must successfully complete the course within the allotted time frame of 3 months or less (monthly extensions may be purchased).

Successful course completion includes:

- An attempt of all required assignments & quizzes
- A passing score of 70% or higher on all chapter review exams, the final exam, and any other exams
- An overall final course score of 70% or higher

No reduced hours in the course or tuition discount for previous education or training will be granted.

Included Reading Material:

1. Medical Coding Training: COC™ 2018; AAPC; AAPC publisher (available online only in PDF format, no textbook will be issued with this course)

Required Code Books (Not Included):

1. CPT® Professional Edition code book (2018 year), AMA publisher
2. ICD-10-CM code book (2018 year), any publisher
3. HCPCS Level II Professional code book (2018 year), any publisher

Required code books may be purchased through AAPC or any major bookseller.

Supplemental Resources Referenced (Available Online):

All supplemental resources are located on the Centers for Medicare and Medicaid Services

(CMS) website at: <http://www.cms.hhs.gov/center/hospital.asp> and <http://www.cms.gov/center/asc.asp>

1. Outpatient Prospective Payment System Final Rule-CMS-1656-FC and CMS-1656-CN (2017)
2. 1656-FC-Addenda (2017)
3. Revenue Codes to Cost Center Crosswalk
4. List of Pass Through Payments Device Category Codes

Note: The 2018 Final Rule was not finalized at the time this course began. Once the 2018 Final Rule (CMS-1678-FC) has been finalized, the course material will be updated with the 2018 information and a conversion document will be posted. This mainly affects chapter 14 in this curriculum.

Recommended Textbooks/Supplies (Not Included):

1. Medical dictionary, any publisher

Computer Requirements: High-speed Internet connection with Blackboard supported Operating System & Web browser (see Course Requirements tab: <https://www.aapc.com/training/coc-online-accelerated-course.aspx>); Adobe Flash Player; Adobe Acrobat Reader. For best experience, use of a mobile device is not recommended.

Course Enrollment Fee: Payment is due in full at time of enrollment. Fees listed do not include any recommended textbooks/supplies or computer requirements, which are to be purchased separately by the student. Prices are variable and subject to change, see AAPC website for most current enrollment fees:

<https://www.aapc.com/training/coc-online-accelerated-course.aspx>.