

HITP-HEALTH INFORMATION TECHNOLOGY

HITP 1110. Electronic Health Records

3 Credits (3)

Current electronic health record principles, methods and procedures, and computerized medical record concepts and software applications will be introduced.

Learning Outcomes

1. Define the concept of an electronic health record.
2. Describe key issues related to privacy and security of EHRs.
3. Set up new patients, edit patient information, and export patient lists.
4. Set up new insurance companies.
5. Set up, edit, and print addresses in the physician, employee, pharmacy, and testing facility categories.
6. Add patients and notes to the schedule.
7. Use the Patient Tracker to track and locate a patient with the medical setting.
8. Describe the layout of an electric chart.
9. Create office visit notes.
10. Describe how to order lab, imaging, and medical tests.

HITP 1120. Health Information Introduction to Pharmacology

3 Credits (3)

Introduction to the principles of pharmacology, including drug terminology; drug origins, forms, and actions; routes of administration; as well as the use of generic name drugs, trade name drugs and categories of drugs to treat multiple and specific body systems.

Learning Outcomes

1. List and define the major pharmacological drugs and common generics used in healthcare.
2. Distinguish between local, systemic, therapeutic, allergic, and side effects of the drugs.
3. Describe the pharmacological action of common drugs and drug categories used to treat each body system, including usage, dosage, adverse effects, contraindications, indications, and key client education information.
4. Identify basic laws and ethics associated with pharmacological preparation and distribution.
5. Describe the principal mechanisms of actions, usage, dosage, adverse effects, contraindications, indications, and key client education information for drug classifications affecting multiple body systems, also list several routes of drug administration and describe their advantages and disadvantages.

HITP 1140. Health Information Introduction to Pathophysiology

3 Credits (3)

Introduction to the nature of disease and its effect on body systems. Disease processes affecting the human body via an integrated approach to specific disease entities will be presented including a review of normal functions of the appropriate body systems. Diseases will be studied in relation to their etiology, pathology, physical signs and symptoms, diagnostic procedures, complications, treatment modalities and prognosis.

Learning Outcomes

1. Describe basic disease concepts, including mechanisms of disease, neoplasms, inflammation, and infection.

2. Examine the basic anatomy and physiology of the body systems, etiology of various diseases and conditions, important signs and symptoms of disorders, common diagnostics, typical course and management of disorders, preventive measures, and the effects of aging.
3. Identify the terminology, etiology, signs and symptoms, common diagnostics, typical course and management of disorders, and preventive measures associated with genetic and developmental disorders, childhood diseases, and mental health disorders.
4. Recognize important medical terminology related to the understanding of human diseases.
5. State the drug classifications and examples of medications in each class used to treat diseases, disorders and conditions related to each body system.

HITP 2208. Medical Office Procedures

3 Credits (2+2P)

Introduction of current and efficient administrative medical office procedures. The emphasis will be on practical, current strategies for maintaining accurate, organized and compliant documentation.

Prerequisite: HLSC 1510.

Learning Outcomes

1. Identify key medical terminology as it relates to administrative medical office operations.
2. Explain the roles, responsibilities, and professional ethics of an administrative medical assistant in various healthcare setting.
3. Demonstrate effective communication skills with patients, families, proxies and healthcare professionals.
4. Apply accurate updated policy to scheduling techniques, office and records management, and billing procedures in a medical office environment.
5. Apply techniques for efficient patient, office, and administrative workflows to enhance medical office management.
6. Identify medical office technology applications that promote efficient administrative duties and accurate documentation.

HITP 2240. Health Information Quality Management

3 Credits (3)

Introduction to basic concepts of quality and performance improvement as they apply to health record systems and the health care industry.

Introduction to quality assessment, requirements of licensing, accreditation, and fiscal considerations.

Learning Outcomes

1. Identify responsibilities in medical facilities to develop leadership skills for success.
2. Abstract data for facility-wide quality management performance improvement programs.
3. Identify techniques utilized by quality improvement organizations to evaluate and track medical treatments and services to improve the health information performance.
4. Demonstrate an understanding of healthcare compliance, patient consent, documentation, reporting, the creation of policies and procedures, and fundamentals of the Human Resource Department.
5. Explain the purpose and procedure of audits, regulatory agencies, marketing, and compliance in the health care setting.

HITP 2248. Medical Coding I

3 Credits (2+2P)

Comprehensive overview of the fundamentals, coding conventions, and principles of ICD-10-CM/PCS diagnostic and procedure codes.

Prerequisite: HITP 2228.

Learning Outcomes

1. Identify diagnoses, procedures, services while applying coding manual and regulatory agency guidelines to patient medical records.
2. Identify legalities when managing patient records and reimbursement policies.
3. Analyze and assign accurate diagnostic codes based on a review of patient records.
4. Identify the role of a medical coder in various healthcare settings, including ethical considerations and workplace conduct.
5. Demonstrate proper medical record management techniques.

HITP 2258. Medical Coding II

3 Credits (2+2P)

Comprehensive overview of the fundamentals, coding conventions, and principles of CPT and HCPCS diagnostic and procedure codes.

Prerequisite: HITP 2248.

Learning Outcomes

1. Identify procedures and services in various healthcare settings while applying coding manual and regulatory agency guidelines to patient medical records.
2. Identify legalities when managing patient records and reimbursement policies.
3. Analyze and assign accurate procedural codes based on a review of patient records.
4. Identify the role of a medical coder in various healthcare settings, including ethical considerations and workplace conduct.
5. Demonstrate proper medical record management techniques.

HITP 2268. Health Information Systems

3 Credits (3)

Overview of health data management, work planning, and organization principles; an introduction to health care information systems; and review of the fundamentals of information systems for managerial, clinical support, and information systems.

Learning Outcomes

1. Identify the role of health information management in the healthcare system.
2. Identify the ethical and legal challenges in health information management.
3. Describe health care data and information management systems used in healthcare organizations.
4. Maintain data security in accordance with all laws and regulations.
5. Evaluate compliance with regulatory requirements and reimbursement methodologies.
6. Explain the role of the health information technician (HIT) in systems planning and development.
7. Identify the different types of health service organizations and delivery systems.

HITP 2288. Medical Insurance Billing

3 Credits (2+2P)

Comprehensive overview of the insurance concepts and applications required for successfully and accurately completing and submitting insurance claims and reimbursement processes for various insurance carriers, both private and government, will be emphasized.

Prerequisite: HLSC 1510.

Learning Outcomes

1. Comprehend the ramifications of a breach of confidentiality regarding patient information.

2. Follow requirements of different insurance carriers—i.e., HMO's Independent Provider Organizations, Medicare, Medicaid, Workmen's Compensation—in processing patient claims.
3. Process insurance claim form from an initial patient visit through receipt of payment from insurance carrier.
4. Match ICD-10 code to appropriate diagnosis.
5. Analyze patient records to construct the insurance claim form and apply the requirements of different insurance carriers to that claim.
6. Classify and explain the various reimbursement systems and how they impact billing.
7. Identify issues of fraud and abuse and follow ethical principles by reviewing inpatient and outpatient cases.

HITP 2996. Health Information Technology Topics

3 Credits (3)

Varies. May be repeated up to 6 credits.

Learning Outcomes

1. Varies.

HITP 2998. Health Information Technology Internship

3 Credits (3)

Varies.

Learning Outcomes

1. Varies.