

Syllabus Checklist

For Instructional Designers & Facilitators

Course Information

- Claims Support Course Syllabus
- January 2019 (January 7th – February 1st)
- HPT-CL-Claims_Analyst
- 130 hour course
- Facilitators: David Kolmer, Stacey Baily
- (888) 555-3747 (Phone Number, contact in case of emergency)
- dkolmer@example.com (Primary form of contact with training facilitator)
- Facilitator Availability: 8AM - 4PM (Central Time) Monday through Friday.

Turn-Around Times:

Emails will be responded to in 48 hours or less.

Learner Evaluations will be graded within 48 hours of submission.

Grading Major Assignments (Tests) will be completed immediately by the system.

Discussion Board submissions will be graded within 5 business days of submission.

Course Description

Class Participants will develop skills around researching complications around specific claims and provider contracts to design creative solutions that fit inside of CMS (*Centers for Medicare & Medicaid Services*) Regulation. www.cms.gov

Class Participant Skill Expectations (student skills or student level abilities)

Class participants will be expected to process medical claims within the guidelines of CMS Regulation.

Course Text and Other Required Materials

All materials will be provided by the facilitator.

Access to digital copies of support documents will be available on the Claims Intranet page under “Analyst”.

Course Syllabus

Value-Based Care Model - Health Claims Support

LEARNING OBJECTIVES

Upon completion of this course, students will be able to:

- Navigate basic applications in the Facets System
- Locate a Claim in the Facets System
- Review the dollar amounts to determine the contracted amount and the amount being paid to the client.

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Foundational Knowledge

- *Understand Facets Screens, Claim Types, TriZetto Look-up, KnowledgeLake and CES (Claim Edit System).*
- *Acquire in-depth knowledge of key claim data elements and where to locate them in the above mentioned applications.*

Application

- *Complete crucial actions in Facets, TriZetto, KnowledgeLake, CES and CMS.gov.*
- *Complete necessary mathematical calculations around claims processing separately from working in the computer system.*

Integration

- *Apply knowledge gained in daily side-by-side time with assigned mentor.*
- *Observe mentor process at least 2 claims of each claim type (via Trello Boards) covered that day (between 3 and 4 claim types introduced daily).*
- *Process multiply claim types the with support of a mentor.*

Human Dimension

- *Leverage reflection and mentor feedback to identify areas where they have strengths and areas that need improvement.*
- *Value the group learning environment through morning dialogue about yesterday's content (8 AM daily).*

Caring

- *Display an understanding and implimentation of Companie's Core Values.*
- *Explain the impact of Value-Based Care on individuals and populations.*

Learning How to Learn

- *Dipsplay the ability to approach problems as a claim investigator.*
- *Produce a one page Learning artifact that will assist the class participant on the floor around things they have difficulty remembering*

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Course Activities (Course Calendar)

MODULE 1 = Intro to Facets (January 7th – January 11th)

- Recall Demonstration of Searching for a claim in Facets using the Claim Inquiry Application.
- Review the “HPT-CL-202-HO Intro to Facets-Claim Inquiry, 26JUN2018.docx”
- Open up Facets
 - Practice opening claims inquiry and searching for a claim (Claim number provided on Trello)
 - Transfer into claims processing
 - Strike the “F3” key to processed the claim, send it to CES in the background and returns it to Facets system
 - “ALT+W+E to close out of all work in Facets
 - Observe and track the dollar amounts for “Allowed”, “Copay/Co-insurance”, “Benefit” and “Disallow” for each claim and track on an excel doc.
 - Repeat
- Submit the Excel doc with the Tracked dollar amounts for each claim to the instructor.

MODULE 2 = Claim Note Power Point and hand out (January 14th – January 18th)

- Review Power point Slides “HPT-CL-108-PP-claim_notes, 29OCT2018.pptx”
- Review “HPT-CL-203-HO_CLaim_Forms,1NOV2018.docx”
- Compose and example of a good claim note and an example of a bad claim note (not necessarily in that order.) and post it to the discussion board.
 - Other students respond explaining which note is a great note and which note is an incomplete note.

MODULE 3 = UM - Utilization Management (January 21st – January 25th)

PART 1 Pre-Authorization

- Review the 8 claims posted in Trello under your name for **Utilization Management – Pre-Authorization**
- Match content from the “**UM Authorization – Referrals.PDF**” and track related claim data elements in Excel.
- Save the information tracked for further review with your SME/Mentor.
- Submit the Excel document to your instructor.

PART 2 Referrals

- Review the 8 claims posted in Trello under your name for **Utilization Management – Referrals**
- Match content from the “**UM Authorization – Referrals.PDF**” and track related claim data elements in Excel.
- Save the information tracked for further review with your SME/Mentor.
- Submit the Excel document to your instructor.

PART 3 Work with SME/Mentor

- Meet with you mentor in person or over SKYPE for Business.
- Look up the list of Pre-Authorizations and practice transferring into prospective UM and Clicking on "History" to match a Pre-Auth. Repeat the process for Referrals

Course Syllabus

Value-Based Care Model - Health Claims Support

Course Activities (Course Calendar) Continued

MODULE 4 = VALUE BASED CARE MODEL (January 28th – February 1st)

PART 1 View video on Health Care Terminology.

(Fee for Service is the most common Health Care model)

- This video has fresh humor but focuses on data around how the Health Care system in America is severely broken and acts like a money machine.
- This Video is observing the current Health Care model = **Fee for Service**.

[US Healthcare System Explained](#)



<https://youtu.be/DublqkOSBBA>

PART 2

- View YouTube video with Mike Long explaining the Value-Based Care model.

[Healthcare Case Study: Mike Long](#)



<https://youtu.be/y2cxdRfh4Oo>

Course Syllabus

Value-Based Care Model - Health Claims Support

Course Activities (Course Calendar) Continued

Discussion on Value-Based Care model.

1. What are the differences in the Value-Based Care Model?
2. What benefits do you see in the Value-Based Care Model?

Discussion on Personal Experiences

1. What Personal Experiences have you had (either good or bad) around using medical insurance?
2. In what way would the Value-Based Care model have improved this experience?

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Value-Based Care Model - Health Claims Support

Subject to Change Clause

Any of the information presented in this class by the instructors or mentors is subject to change according to CMS regulation and policy. It is the responsibility of the learner to process claims in accordance to CMS regulation at the time of processing. Always review relevant documents before processing a claim.

Course Participation Expectations (outline expectations and required adherence)

Include:

- Students are expected to log into the the online environment at least every 48 hours.
- Students are expected to respond to emails within 72 hours.
- Students are expected to be actively involved Discussion board, blog, wikis.
- Remember to be polite online and offer feedback in a constructive way. Do not forget that sarcasm does not translate well onto a virtual platform. Do not be sarcastic, be sincere.

Network Outages

An employee is expected to be on site for the duration of New Hire Orientation. Once graduated the Employee has the right to work from home during Over-Time. It is the responsibility of the Employee to have dependable internet connection while working from home.

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Grading Policies

Each of the modules is worth 25 Points.

MODULE 1 = Intro to Facets	25 Points
MODULE 2 = Claim Note Power Point and hand out	25 Points
MODULE 3 = UM - Utilization Management	25 Points
MODULE 4 = VALUE BASED CARE MODEL	25 Points

Grading System

A student will need to score 80% or above (B Average) to remain in good standing

90% - 100%	A
80% - 89%	B
70% - 79%	C
60% - 69%	D

Reference Location of Company and Department Policies

Company policy can be found on the company intranet under Departments > HR > Compliance.

Claims Department Policy can be found on the Claims intranet site under the Management page.