



BAKER COLLEGE
STUDENT LEARNING OUTCOMES

MA1250 Intermediate Administrative Skills
5 Semester Hours

Student Learning Outcomes & Enabling Objectives

- 1. Demonstrate the concepts of effective communication in the healthcare setting**
 - a. Recognize elements of fundamental writing skills (V.C.7.)
 - b. Discuss applications of electronic technology in effective communication (V.C.8.)
 - c. Demonstrate professional telephone techniques (V.P.6.)
 - d. Document telephone messages accurately (V.P.7.)
 - e. Compose professional correspondence utilizing electronic technology (V.P.8.)
 - f. Develop a current list of community resources related to patients' healthcare needs (V.P.9.)
 - g. Define patient navigator (V.C.12.)
 - h. Describe the role of the medical assistant as a patient navigator (V.C.13.)
 - i. Facilitate referrals to community resources in the role of a patient navigator (V.P.10.)

- 2. Demonstrate the proficiency of administrative functions in the medical office**
 - a. Identify different types of appointment scheduling methods (VI.C.1.)
 - b. Identify advantages and disadvantages of the following appointment systems:
 - i. Manual (VI.C.2.a.)
 - ii. Electronic (VI.C.2.b.)
 - c. Identify crucial information required for scheduling patient procedures (VI.C.3)
 - d. Identify equipment and supplies needed for medical records in order to:
 - i. Create (VI.C.6.a.)
 - ii. Maintain (VI.C.6.b.)
 - iii. Store (VI.C.6.c.)
 - e. Describe filing indexing rules (VI.C.7.)
 - f. Explain the purpose of routine maintenance of administrative and clinical equipment (VI.C.9.)
 - g. List steps involved in completing an inventory (VI.C.10.)
 - h. Manage appointment schedule using established priorities (VI.P.1.)
 - i. Schedule a patient procedure (VI.P.2.)
 - j. Create a patient's medical record (VI.P.3.)

- k. Organize a patient's medical record (VI.P.4.)
- l. File patient medical records (VI.P.5.)
- m. Utilize an EMR (VI.P.6.)
- n. Input patient data utilizing a practice management system (VI.P.7.)
- o. Perform routine maintenance of administrative or clinical equipment (VI.P.8.)
- p. Perform an inventory with documentation (VI.P.9.)
- q. Display sensitivity when managing appointments (VI.A.1.)

3. Perform basic finance procedures in the medical office

- a. Define the following bookkeeping terms:
 - i. Charges (VII.C.1.a.)
 - ii. Payments (VII.C.1.b.)
 - iii. Accounts receivable (VII.C.1.c.)
 - iv. Accounts payable (VII.C.1.d.)
 - v. Adjustments (VII.C.1.e.)
- b. Describe banking procedures as related to the ambulatory care setting (VII.C.2.)
- c. Identify precautions for accepting the following types of payments:
 - i. Cash (VII.C.3.a.)
 - ii. Check (VII.C.3.b.)
 - iii. Credit card (VII.C.3.c.)
 - iv. Debit card (VII.C.3.d.)
- d. Describe types of adjustments made to patient accounts including:
 - i. Non-sufficient funds (NSF) check (VII.C.4.a.)
 - ii. Collection agency transaction (VII.C.4.b.)
 - iii. Credit balance (VII.C.4.c.)
 - iv. Third party (VII.C.4.d.)
- e. Identify types of information contained in the patient's billing record (VII.C.5.)
- f. Explain patient financial obligations for services rendered (VII.C.6.)
- g. Perform accounts receivable procedures to patient accounts including posting:
 - i. Charges (VII.P.1.a.)
 - ii. Payments (VII.P.1.b.)
 - iii. Adjustments (VII.P.1.c.)
- h. Prepare a bank deposit (VII.P.2.)
- i. Obtain accurate billing information (VII.P.3.)
- j. Inform a patient of financial obligations for services rendered (VII.P.4.)
- k. Demonstrate professionalism when discussing patients billing record (VII.A.1.)
- l. Display sensitivity when requesting payment for services rendered (VII.A.2.)

4. Utilize health care guidelines for third party reimbursement

- a. Identify:
 - i. Types of third party plans (VIII.C.1.a.)
 - ii. Information required to file a third party claim (VIII.C.1.b.)
 - iii. The steps for filing a third party claim (VIII.C.1.c.)

- b. Outline managed care requirements for patient referral (VIII.C.2.)
- c. Describe the processes for:
 - i. Verification of eligibility for services (VIII.C.3.a.)
 - ii. Precertification (VIII.C.3.b.)
 - iii. Preauthorization (VIII.C.3.c.)
- d. Differentiate between fraud and abuse (VIII.C.5.)
- e. Interpret information on an insurance card (VIII.P.1.)
- f. Verify eligibility for services including documentation (VIII.P.2.)
- g. Obtain precertification or preauthorization including documentation (VIII.P.3.)
- h. Complete insurance claim forms (VIII.P.4.)
- i. Interact professionally with third party representatives (VIII.A.1.)
- j. Display tactful behavior when communicating with medical providers regarding third party requirements (VIII.A.2.)
- k. Show sensitivity when communicating with patients regarding third party requirements (VIII.A.3.)

5. Perform procedural and diagnostic coding

- a. Describe how to use the most current procedural coding system (IX.C.1.)
- b. Describe how to use the most current diagnostic coding classification system (IX.C.2.)
- c. Describe how to use the most current HCPCS Level II coding system (IX.C.3.)
- d. Discuss the effects of:
 - i. Upcoding (IX.C.4.a.)
 - ii. Downcoding (IX.C.4.b.)
- e. Define medical necessity as it applies to procedural and diagnostic coding (IX.C.5.)
- f. Perform procedural coding (IX.P.1.)
- g. Perform diagnostic coding (IX.P.2.)
- h. Utilize medical necessity guidelines (IX.P.3.)
- i. Utilize tactful communication skills with medical providers to ensure accurate code selection (IX.A.1.)

6. Apply legal concepts to ambulatory care

- a. List and discuss legal and illegal applicant interview questions (X.C.9.)
- b. Complete an incident report related to an error in patient care (X.P.7.)

SLOs developed from the CAAHEP established 2015 Standards and Guidelines for Medical Assisting and formatted by the Baker College System Medical Assisting Program Coordinators

Big Ideas and Essential Questions

Big Ideas

- Foundation of understanding finance in health care
- Administrative medical assistants role
- Medical Reimbursement

Essential Questions

1. What is the billing cycle?
2. How does scheduling patients effect the practice?
3. What is the importance of cash flow in a medical office?
4. Why are communication skills important in customer service?

These SLOs are not approved for experiential credit.

Effective: Spring 2021