University of Phoenix®
Professional Development

Medical Billing & Processing Fundamentals

Build a better you

Skill-focused

Self-paced

Job-ready

Course overview

Build real-world medical billing and processing related job skills when you learn how to prepare medical claims, maximize medical expense reimbursement and troubleshoot denials. This course also teaches you how to verify insurance coverage, physician contract status and manage patient accounts related to referrals and authorizations.

Skills you'll learn

- Accurately identify reimbursable services and treatments

- Identify payer policies and the party responsible for payment

- Appeal medical claim denials

- Prepare medical claim forms and process electronic transactions

Key topics

- Healthcare practice front-office duties

- Establishing financial responsibility

- Medical billing claim analysis
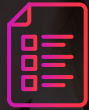
**Course outline
1 of 2**

Course Introduction
 • Getting Started
 • Welcome to Medical Billing and Processing

Module 1 - Interpretation of Benefits Coverage
 • Introduction to Benefits Coverage
 • Exploring Benefits Coverage Interpretation
 • Common Insurance Plans, Government Sponsored Insurance, Private Payers, and Other Insurance Programs
 • Benefits Coverage Key Concepts
 • Benefits Coverage Comprehension Check
 • Foundational Medical Billing and Coding Terms
 • Interpretation of Medical Benefits Skills Assessment
 • Benefits Coverage Resources

Module 2 - Understanding the Medical Language
 • Introduction to Medical Terminology
 • Basic Anatomy and Physiology Terms
 • Medical Terminology for the Respiratory, Cardiovascular, and Nervous Systems
 • Foundational Medical Billing and Coding Terms
 • Medical Terminology Comprehension Check
 • Real-World Medical Billing and Coding Practice

**Course outline
2 of 2**

Module 3 - Establishing Financial Responsibility
- Introduction to the Medical Revenue Cycle
- Assigning Medical Codes and ICD Basics
- Insurance Cards, Patient Benefits, and Collecting and Posting Payments
- Important Financial Responsibility Terms
- Financial Responsibility Comprehension Check
- Real-World Medical Billing and Coding Practice
- Establishing Financial Responsibility Skills Assessment
- Establishing Financial Responsibility Resources

Module 4 - Medical Back Office
- Introduction to Front-End Duties and Patient Account Management
- Patient Cost Shares and HIPAA Basics
- Patient Account Management, Registration, Check-In, and Check-Out Processes
- Medical Back Office Terms and Concepts
- Medical Back Office Comprehension Check
- Medical Back Office Skills Assessment

Module 5 - Claims and Collection Management
- Introduction to Claims and Collection Management
- Medical Claims and Appeals Processes
- Outpatient/Inpatient Claims Processes, Claim Adjudication and Follow-Up, and the Patient Collection Process
- Claims and Collection Management Terms
- Claims and Collection Management Comprehension Check
- Real-World Medical Billing and Coding Practice
- Claims and Collection Management Skills Assessment
- Claims and Collection Management Resources

University of Phoenix®
Professional Development

Ready to start learning?

Start building new skills one course at a time.

Have questions? Visit

https://www.phoenix.edu/professional-development/faqs/