

**HITP 240 HEALTH STATISTICS & QUALITY IMPROVEMENT**

4 CREDITS

**SYLLABUS**

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**CATALOG DESCRIPTION**

This course covers healthcare statistical methods and quality improvement concepts, tools and techniques. Students will gain a working knowledge of definitions, formulas, data collection and computation methods to determine standard rates, percentages, and averages for health care data. Vital statistics and reportable diseases and conditions are included. Quality assessment and improvement standards including requirements of licensing, accrediting, fiscal, and other regulatory agencies will be presented.

Prerequisites: Faculty Permission Required

Semester Offered: Fall & Spring

***GENERAL EDUCATION STUDENT LEARNING OUTCOMES***

*In the New Mexico General Education Curriculum students take courses in a variety of content areas, which may include Communications, Mathematics, Science, Social and Behavioral Sciences, Humanities, and the Creative and Fine Arts. Specific course requirements depend on your program. All general education courses focus on at least three of these skills. Other courses may also develop these skills.*

*Through these courses, students develop five essential skills:*

COMMUNICATION

QUANTITATIVE REASONING

CRITICAL THINKING

PERSONAL AND SOCIAL RESPONSIBILITY

INFORMATION AND DIGITAL LITERACY

Student work from this class may be randomly selected and used anonymously for assessment of course, program, and/or general education learning outcomes. For more information, please refer to the Dean of the appropriate School.

## ***PROGRAM LEARNING OUTCOMES***

*Upon successful completion of this program, students will be able to ...*

### **HIT Program Learning Outcomes:**

1. Apply policies, regulations, and standards to the management of information to achieve data integrity. (Domain I)
2. Apply privacy and security strategies and compliance requirements to protect health information. (Domain II)
3. Apply health informatics and data analytics concepts to the management of health information. (Domain III)
4. Apply diagnostic and procedural codes and groupings in accordance with official guidelines. (Domain IV)
5. Apply regulatory requirements and reimbursement methodologies as part of revenue cycle management. (Domain IV)
6. Apply ethical practices, policy, and legal processes impacting health information to ensure compliance with external forces. (Domain V)
7. Utilize appropriate management and leadership principles, strategies, and performance improvement techniques to effectively manage human, physical, and financial resources. (Domain VI)

### **RM Track Outcomes:**

8. Evaluate diagnosis and procedure codes and groupings according to official guidelines. (Domain IV RM)
9. Evaluate compliance with revenue cycle processes, regulatory requirements, and reimbursement methodologies. (Domain IV RM)

## ***COURSE LEARNING OUTCOMES***

*Upon successful completion of the course, students will be able to...* (numerical references are to the 2018 Health Information Management Associate Degree Curriculum Competencies)

1. Describe healthcare organizations from the perspective of key stakeholders. (I.1.)
2. Determine compliance of health record content within the health organization. (I.4.)
3. Apply the use of classification systems, clinical vocabularies, and nomenclatures. (I.5.)
4. Interpret data dictionaries and data sets for compliance with governance standards (I.6.)
5. Apply health informatics concepts to the management of health information. (III.1.)
6. Utilize technologies for health information management. (III.2.)
7. Calculate statistics for health care operations. (III.3.)
8. Report health care data through graphical representations. (III.4.)
9. Identify research methodologies used in health care. (III.5.)
10. Identify the concepts of managing data. (III.6.)
11. Examine data within a database system (III.6. DM)
12. Summarize regulatory requirements and reimbursement methodologies. (IV.3.)
13. Recognize compliance with external forces. (V.2.)
14. Identify the components of risk management related to health information management. (V.3.)
15. Identify data-driven performance improvement techniques for decision making. (VI.4.)
16. Identify financial management processes. (IV.5.)

17. Apply ethical standards of practice. (IV.7.)