This course is intended for Wagner students who are interested in either expanding knowledge of health care financial reimbursement issues or pursuing careers that involve financial management in the health care sector.

**Course Description and Objectives**
Advanced Health Care Payment Systems is designed to familiarize students with the various health care payment systems that are used by health care payers. We will discuss the role of politics in health care and how the federal government plays an active role in determining health care reimbursement. The course focuses on Medicare's prospective payment systems for hospital and other provider type reimbursement. It also covers New York State Medicaid reimbursement issues along with private insurers and how they negotiate with providers. We will also discuss hospital pricing methodology and how charges impact payment. The course will also focus on the need and requirement for establishing a compliance program to identify and prevent fraud and abuse issues.

Payment methods serve as a regulatory and market mechanism guiding the direction and activities of health care providers. It is essential that decision makers understand and assess the impact of reimbursement methodologies and the interaction between health care regulation, reimbursement methodologies and financial decision making. The course includes analysis of actual reimbursement techniques and will familiarize students with the source documents. The course will also teach the processes necessary for analysis of Federal and New York State regulations. Current reimbursement topics will also be discussed and references will be made to newly released information from governmental agencies. This course includes lectures and active class participation. All students should be prepared to participate in class discussions.

**Required Readings**
Reading materials include, but are not limited to, power point class presentations, sections from the Code of Federal Regulations (CFR), the Federal Register, and other industry publications. Additional handouts may be distributed during the course.
STANDING HOMEWORK ASSIGNMENT

Each week, students are required to submit a summary of a health care current event article with its relevance to the course. Please use either major newspapers, such as The New York Times or Wall Street Journal, or trade journals for articles. The article must be two paragraphs in length and NO MORE. The first paragraph summarizes the article, and the second discusses the relevance to the course. Please cite the source of the article and date. Such as New York Times, 01/26/12 by XXXX. Do not attach the article. Please put your NAME IN THE UPPER RIGHT HAND CORNER OF THE PAGE AND NO OTHER LOCATION. All homework must be in MS-Word. Other homework will be assigned based on the lecture material.

Grading

20% of the grade will be based on submission of homework and class participation.

40% of the grade will be based on the mid-term exam. (Take home project)

40% of the grade will be based on the in-class final exam.

Office Hours

Students may contact me via phone or e-mail as indicated above concerning problems with course material. Students who wish to meet individually, should e-mail me for an appointment.

Class Outline and Assigned Readings

Class 1 - Thursday Jan 25: Introductions and discussion of course requirements and objectives. We will discuss what the revenue cycle is and the politics of health care in the United States including the ACA and the current political climate.

Class 2 – Thursday Feb 1: Hospital price/charge setting will be reviewed. Discussion on the interaction between charges, cost, ratio of costs-to-charges and third-party reimbursement will be the basis for this lecture. Accounting versus reimbursement concepts of contractual allowances, bad debt, and charity care and other write offs will be reviewed. We will examine the Medicare program from the beneficiary perspective to set the ground rules for Medicare reimbursement for hospitals and other providers. Short video: Why are health care charges so high?

Class 3 - Thursday Feb. 8: This lecture begins an introduction to Federal Medicare Program and the Prospective Payment Systems (PPS) payment methodologies. Hospital-based inpatient rates of payment will be the first topic. Focus will be on Inpatient PPS which includes Medicare Severity (MS) Diagnostic Related Groups (DRGs), relative weights, cost outlier payments, and case mix index. Please read the publication: “Medicare and You.” Find it on the CMS web site. www.cms.gov.

Class 4 - Thursday Feb 15: Graduate Medical Education and other add-ons will be discussed. Guest speaker: Anu Ashok, Associate Vice President, Graduate Medical Education and Physician Workforce Policy, GNYHA.

Class 5 - Thursday Feb. 22: Discussion on Medicare PPS systems will continue. Disproportionate Share Payments (DSH) will be discussed and changes that were implemented by the ACA. Non MS-DRG services in acute hospitals will be discussed: Inpatient Rehabilitation Facility (IRF) and Inpatient Psychiatric Facility (IPF) payment methodologies.
Class 6 - Thursday Mar. 1: Non MS-DRG services in acute hospitals will be discussed: Inpatient Rehabilitation Facility (IRF) and Inpatient Psychiatric Facility (IPF) payment methodologies. The take-home midterm exam will be distributed.

Class 7 - Thursday Mar. 8: NO CLASS

Class 8 - Thursday Mar. 15: **SPRING BREAK NO CLASS SCHEDULED**

Class 9 - Thursday Mar. 22: **Hand in Mid-term Exam tonight.** Medicare’s Outpatient Prospective Payment System (OPPS) and other Medicare ambulatory payment methodologies will be discussed.


Class 11 - Thursday Apr. 5: Presentation on Provisions of the Affordable Care Act (ACA) that authorizes new Medicare payment initiatives. **Guest speaker: Rebecca Ryan, Senior Director, Health Finance and Reimbursement Health Economics, Finance, and Outcomes Research, GNYHA.**

Class 12 - Thursday Apr. 12: New York State Payment Methodologies will be discussed. We will review New York State Department of Health’s website as a tool for locating information concerning Medicaid rules and regulations and payments systems. We will also discuss how New York State handles reimbursement for items known as “Public Goods.”

Class 13 - Thursday Apr. 19: We will discuss the Delivery System Reform Incentive Payment (DSRIP) program which is a key component of the $8 Billion New York State Medicaid waiver that provides funding to fundamentally restructure and improve quality in the safety net health care system to focus on primary and preventive care and reduce avoidable hospital use.

Class 14 - Thursday Apr. 26: Discussion on the ACA’s Health Exchanges and an overview of private payer and hospital rate negotiation will be discussed.

Class 15 - Thursday May 3: A discussion on compliance programs as required by Centers for Medicare and Medicaid Services (CMS) for the Medicare program, the Office of Inspector General (OIG) and New York State initiatives for the Medicaid program. A case study will be used to illustrate the importance of accurate financial reporting and the need for compliance programs. There will also be a brief review for the final.

Class 16 – Thursday May 10: In Class – Final Exam