



## HCM 345 Milestone One Guidelines and Rubric

**Overview:** Much of what happens in healthcare is about understanding the expectations of the many departments and personnel within the organization. Reimbursement drives the financial operations of healthcare organizations; each department affects the reimbursement process regarding timelines and the amount of money put into and taken out of the system. However, if departments do not follow the guidelines put into place or do not capture the necessary information, it can be detrimental to the reimbursement system.

An important role for patient financial services (PFS) personnel is to monitor the reimbursement process, analyze the reimbursement process, and suggest changes to help maximize the reimbursement. One way to make this process more efficient is by ensuring that the various departments and personnel are exposed to the necessary knowledge.

Milestone One provides you an opportunity to engage with real-world data and tools that you would encounter in an actual professional environment. Specifically, you will begin thinking about the purpose of reimbursement and how it impacts other healthcare departments. You will also practice analyzing the revenue cycle.

**Prompt:** Submit a draft of your Section I of the final project. Specifically, the following **critical elements** must be addressed:

### I. **Reimbursement and the Revenue Cycle**

- A. Describe what **reimbursement** means to this specific healthcare organization. What would happen if services were provided to patients but no payments were received for these services? What specific data would you review in the reimbursement area to know whether changes were necessary?
- B. Illustrate the **revenue** cycle using a flowchart tool. Take the patient through the cycle from the initial point of contact through the care and ending at the point where the payment is collected.
- C. **Prioritize** the departments at this specific healthcare organization in order of their importance to the revenue cycle. Support your ordering of the departments with evidence.

**Guidelines for Submission:** Your draft must be submitted as a three- to four-page Microsoft Word document with double spacing, 12-point Times New Roman font, one-inch margins, and at least three sources, which should be cited in APA format.

**Rubric**

<b>Critical Elements</b>	<b>Proficient (100%)</b>	<b>Needs Improvement (75%)</b>	<b>Not Evident (0%)</b>	<b>Value</b>
<b>Reimbursement and the Revenue Cycle: Reimbursement</b>	Comprehensively describes what reimbursement means to this specific healthcare organization	Describes what reimbursement means to a healthcare organization, but description is not comprehensive or is not specific	Does not describe what reimbursement means to a specific healthcare organization	30
<b>Reimbursement and the Revenue Cycle: Revenue</b>	Accurately illustrates the revenue cycle using a flowchart	Illustrates the revenue cycle using a flowchart, but illustration is inaccurate or incomplete	Does not illustrate the revenue cycle using a flowchart	30
<b>Reimbursement and the Revenue Cycle: Prioritize</b>	Prioritizes the departments at this specific healthcare organization in order of importance to the revenue cycle, supporting ordering of departments with evidence	Prioritizes the departments at a healthcare organization in order of importance to the revenue cycle but is not specific to this healthcare organization or does not include support for ordering	Does not prioritize the departments at a healthcare organization in order of importance to the revenue cycle	30
<b>Articulation of Response</b>	Submission has no major errors related to citations, grammar, spelling, syntax, or organization	Submission has major errors related to citations, grammar, spelling, syntax, or organization that negatively impact readability and articulation of main ideas	Submission has critical errors related to citations, grammar, spelling, syntax, or organization that prevent understanding of ideas	10
<b>Earned Total</b>				<b>100%</b>