Lesson Plan

Setting: AT 402; Senior level Athletic Training students; 11 students Location: HEC building, room 148 Time: 9:00am-9:50am Topic: Documentation for Insurance Reimbursement

Learning Objectives

- Understand documentation process
- Become familiar with athletic training politics relative to documentation
- Be able to problem solve with real-life scenarios

Learning Goals

- Come away with basics: understand the process, ask patient-appropriate questions and create objective goals
- Take information and successfully apply it in a professional, real-world scenario

Methods

- Lecture with graphic presentation (PowerPoint)
- Guided, open-ended questions
- Group activity at end of presentation

Key Strategies

- Engage right away- relate information to applicability in professional life
- Early success questions
- Expand on information they already know
- Open-ended questions (not "yes" or "no")
- Summarize throughout
- Present real-life scenarios and issues

Information

- Process
 - Referral
 - ICD-9/ICD-10 codes
 - PT/OT/AT "check box"
 - Follow referral instructions
 - o Insurance Coverage
 - PT vs AT
 - Authorization
- SOAP Note
 - Subjective
 - Work, ADL's
 - Objective
 - Document anything applicable
 - *Manual Muscle Testing "plus" scale
 - Special tests
 - Perform vs not perform; post-operative vs regular patient
 - Assessment
 - Plan
 - Identify limitations or protocols
- Interventions
 - CPT codes
- Re-submissions

Group Activity

• 2 groups, 10 min. Read aloud answers at end.

Teaching Experience Analysis

I was approached by a professor from our local college and asked if I would be interested in teaching her athletic training class about documentation for insurance reimbursement within the clinical setting. Knowing I had to teach a class for an assignment, I agreed. I also agreed for another reason: I remember having no knowledge of this as I exited school and entered the professional world. I felt I could help fill a gap in their education; a gap I had to fill in on my own as I moved along in my own career.

The class consisted of 11 senior athletic training students who are to graduate within the next couple of months. They have a sound knowledge base of the musculoskeletal system, injury prevention, evaluation and treatment skills and are able to accurately document their encounters with athletes. In talking with the professor, she had already expelled all her knowledge regarding insurance reimbursement, which she admits is little to none, to her students. She felt this would be important information for them to have under their belt as they soon move out of college and into the professional world.

Since this was a morning class and my presentation would be on a rather dry topic, I decided that first and foremost I would have to make this engaging! I decided I would use humor and charm to help in maintaining attention and engagement. I also decided to use a PowerPoint presentation with visually appealing graphics to help keep them focused and reinforce major points. In addition to these tactics, I thought that by asking them thought-provoking questions they would not only stay engaged but probably learn more than if I asked simple "yes" or "no" questions.

My goals for this lecture were to build on the knowledge and skills the students already had so they can ultimately leave college having an understanding of the content, knowing how to think about the content (Weimer, 2002) and also knowing how to apply it. I wanted them to know enough about the information so they could refer back to it when a

situation presented itself. If they are able to re-learn it when it becomes applicable to them in their jobs, they are more likely to produce a better product because they are already familiar with it.

When I thought about what I was going to present, I had a list of approximately 20 "key" items! If an item is "key", that means it is obviously set apart from other items by order of importance. I then asked myself, "How much content is enough?" (Weimer, 2002) and, "What should they be able to do as a result of their learning?" (Bain, 2004) and I proceeded to refine my list to what they *really* needed to know and what they should be able to do upon entering the workforce. I then thought about this quote from Weimer, 2002 regarding what a good teacher does. The teacher "...teaches all that the student needs to know at that time and all that the learners can accountably learn in the time given." Quite honestly, I focused on what I did not know coming out of college, what could they learn and retain during a 50 minute time frame and then filled in the gaps to present a clear picture of what they should know and know how to do as they begin their career.

As Bain (2004) states, starting with an interest in the students rather than the subject matter will gain and maintain their interest. They will also put more energy into something they find valuable (McKeachie, 2010). This is precisely why I got to know them a bit by opening with the question of what setting the students expected to be Certified Athletic Trainers in upon graduating. Some said clinical and high school, some said collegiate and a couple said they were considering physical therapy school. In most settings, they are liable to document and bill for services, including settings that traditionally do not (collegiate). I feel that by doing this right away, it not only engaged them but also helped them to understand the relevancy of the presentation to their future careers.

I used the method of scaffolding to first build a foundation of information they could easily understand and then could build new information upon that. Essentially, I went through the general overview of the entire process before I transitioned into breaking apart various components (SOAP notes, interventions, etc). I then elaborated on each component with regard to what insurance companies are looking for and facilitated short discussion questions for each component. The order this information was presented is important. I presented the information in the same order as they would come across it. I did this because each component builds off the one that came before it. I think had I presented the order any differently, it may have been too confusing for them to follow and difficult to get a clear understanding of the process as a whole.

Because this was information I knew they were relatively unfamiliar with, I provided them with early success questions (Ambrose, 2010). By doing this, it helped them relax but also kept them engaged. I believe it also helped them link information they had to the new information they were about to learn.

According to Bain (2004), knowledge is constructed, not received and an educator must build upon the students' known information. Active learning is more effective than passive learning and students are better able to remember new material if they can make connections between what they already know and what they are currently learning. My openended questions combined both these ideas. The questions kept them engaged and thinking about the material. But, in order to answer the questions, they had to draw upon what they already knew and relate it to the context of the questions.

The questions I asked were guided and very open-ended. I would ask questions that help them to think critically about the situation being discussed. As an example, I posed this string of questions to them to get them thinking: What do you ask athletes when they come in stating they are hurt? Would you ask the same questions to a 47 year-old female with hip pain? What do you think an insurance company looks for in terms of the patient's limitations? Just as I had anticipated, they knew they would have to ask the 47 year-old female patient different questions than the athlete, but were unsure of *what* to ask. This transitioned into what an insurance company looks for, for which one student correctly identified activities of daily living (ADLs). This then led to the discussion of what ADLs could consist of for this particular patient. At the end of this discussion, they had come up with various patient-appropriate questions which could help in justifying reimbursement for services provided. I had asked thought-provoking questions such as these throughout the presentation to help them learn how to think about the situation, not just come up with an answer.

Throughout the presentation I gave positive, verbal reinforcement to answers given by the students. This reinforcement helps maintain interest (Bain, 2004). When a student gave an answer which was not quite what I was looking for, I

encouraged them to continue along that particular line of thought. Eventually, either that student or another would land on the correct answer, in which I would explain why it was correct.

To maintain consistency during the presentation, I used the same example of a patient with a rotator cuff injury throughout. I did this because they are familiar with type of injury and they automatically had a concrete reference point in which to attach new material. I feel having this reference point helped them to grasp and understand the new material they were learning, therefore better able to connect to the new material.

Because this information was new to them, I often took a few seconds to summarize information so they students were better able to make connections between the different components that make up the documentation and insurance process.

Learning to transfer knowledge and skills to a new context requires practice. Students may feel as if they thoroughly understand something until they have to try to apply it (McKeachie, 2010). Weimer (2002) also suggests summarizing at the end of the class. The group learning activity at the end of the presentation gave them a bit of practice at both transferring and applying their knowledge and also acted as a summary of the highlights they should have taken away. The class was divided into two groups and each was given a different, though similar scenario and asked to answer various questions. Essentially, they were given patients with ages and occupations they are somewhat unfamiliar with. They had to go through an evaluation, coming up with subjective questions that were patient-appropriate, discuss the objective portion and state what they would or would not do and why and then create objective goals. This activity gave them practice at what will be the most relevant activity in their professional career in dealing with insurance reimbursement.

Overall, I feel the presentation went rather well. Students seemed to be engaged and were able to think about questions and develop appropriate answers. They also had excellent, thoughtful questions of their own throughout the class! This showed me they were indeed paying attention. At the end of the class, both groups actively engaged in the learning activity and both were able to come up with appropriate solutions for the scenarios posed to them. This told me they were able to piece the new information with their prior knowledge and bring it together to successfully complete a reallife scenario they will inevitably come across at some point in their careers.

I learned quite a bit about developing an effective teaching plan though this teaching assignment. A great deal of thought and work went into a simple, 50 minute presentation. I took numerous pieces of information I had learned from my own coursework and had to apply them to create a meaningful lesson for other students. Having to teach a class helped me to take my own knowledge and further my own understanding by having to actually apply it in a meaningful way.

References

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Bain, K. (2004). What the best college teachers do. Cambridge, MA; Harvard University Press.

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