

MEDICAL CODING SPECIALIST

Program Number 31-530-2 **Technical Diploma • Two Terms**

ABOUT THE PROGRAM

The Medical Coding Specialist program prepares individuals for employment as entrylevel coding specialists in health care facilities such as hospitals, clinics, physician practice groups, surgery centers, long-term care facilities, and home healthcare agencies. Coding specialists are also employed in consulting firms, coding and billing services, insurance companies, governmental agencies, and computer software companies. The medical coding specialist reviews medical documentation provided by physicians and other health care providers and translates this into numerical codes. The coding specialist assigns and sequences diagnostic and procedural codes using universally recognized coding systems. Several uses of coded data are for payment of health care claims, statistics, and medical research.

PROGRAM OUTCOMES

- Assign diagnostic and procedure codes using the ICD coding system.
- Assign procedure codes using the HCPCS/CPT coding system.
- Adhere to security/privacy/confidentiality policies.
- Use computers to process information.
- · Support data collection and reimbursement system.
- · Communicate in a professional manner.
- · Model professional behaviors, ethics, and appearance.

CAREER AND EDUCATION ADVANCEMENT OPPORTUNITIES

LTC credits transfer to over 30 universities. For more information visit gotoltc.edu/ future-students/transfer.

ADMISSIONS AND FIRST SEMESTER ENROLLMENT STEPS

- Submit online application.
- Complete background check and \$20 processing fee.
- Complete the online Student Success Questionnaire.
- Complete Technical Standards form.
- Read program handbook and submit the signed signature page.
- Schedule a Program Counseling Session with your assigned program counselor to plan your first semester schedule, review your entire plan of study, discuss the results of the Student Success Questionnaire.
- *Submit transcripts and test scores (optional, highly recommended): College transcripts, along with high school transcripts and test scores from within the last five years, used for course registration. Official transcripts needed for transferring college credit(s) and for financial aid purposes.

FUTURE SEMESTER ENROLLMENT STEPS

- Complete health requirements.

APPROXIMATE COSTS

• \$141 per credit tuition (WI resident) plus \$8.46 per credit student activity fee. Material fee varies depending on course. Other fees vary by program. Visit gotoltc.edu/ financial-aid/tuition-and-fees for details.

FINANCIAL AID

This program is eligible for financial aid. Visit gotoltc.edu/Financial-Aid or talk with your Admissions Advisor about how to apply for aid.

CONTACT

LTC Admissions Advisor 920.693.1162 · Admissions@gotoltc.edu Catalog No. Class Title Credit(s) Term 1 10501101 Medical Terminology 3 10501107 2 Digital Literacy for Healthcare 10530162 Foundations of HIM 3 10530182 Human Diseases for Health Professions 3 10806189 Basic Anatomy OR 10806177 General 3 Anatomy & Physiology (4 cr) 10103101 Access - Level 1 1 15

Term 2

10530184	CPT Coding	3
10530197	ICD Diagnosis Coding	3
10530199	ICD Procedure Coding	2
10530165	Intermediate Coding	3
10530191	HIM/Coding Practicum 1	2
10530159	Healthcare Revenue Management	3
		16

TOTAL 31

Curriculum and Program Acceptance requirements are subject to change. Program start dates vary; check with your advisor for details. The tuition and fees are approximate based on 2020-2021 rates and are subject to change prior to the start of the academic year.

2021-22

REAL EXPERIENCE FOR THE REAL WORLD

ACCESS - LEVEL 1...introduces students to the process of creating a database, building and populating a table, establishing table relationships, and creating queries, forms, and reports.

BASIC ANATOMY...examines concepts of anatomy and physiology as they relate to health careers. Learners correlate anatomical and physiological terminology to all body systems. COREQUISITE: 10838105 Intro Reading and Study Skills or Reading placement assessment equivalent

CPT CODING...prepares learners to assign CPT codes, supported by medical documentation, with entry-level proficiency. Learners apply CPT instructional notations, conventions, rules, and official coding guidelines when assigning CPT codes to case studies and actual medical record documentation. COREQ: 10530182 Human Dis for HIth Prof and 10530159 Healthcare Revenue Mgmt and PREREQUISITE: 10501101 Med Term and 10530162 Found of HIM and CONDITION: 315302 Medical Coding Spec or 105304 Health Information Mgmt program requirements met

DIGITAL LITERACY FOR HEALTHCARE...focuses on the use of technology in healthcare. Learners use common business software applications, including word processing, presentation, spreadsheet, and databases. Communication methods using technology are addressed. Learners gain experience with using the electronic health record (EHR). Healthcare EHR security issues, social media use, and digital healthcare resources are examined.

FOUNDATIONS OF HIM...introduces learners to the healthcare delivery system, and the external forces that influence healthcare delivery. Sets an understanding for the expectations and standards related to professional ethics, confidentiality and security of health information. Differentiates the use and structure of healthcare data elements, data standards, and the relationships between them. Prepares learners to collect and maintain health data to ensure a complete and accurate health record. COREQUISITE: 10501107 Digital Literacy for Healthcare

HEALTHCARE REVENUE MANAGEMENT...prepares learners to compare and contrast health care payers, illustrate the reimbursement cycle, and to comply with regulations related to fraud and abuse. Learners assign payment classifications with entry level proficiency using computerized encoding and grouping software. PREREQUISITE: 10530162 Foundations of HIM and COREQUISITES: 10530184 CPT Coding, 10530197 ICD Diagnosis Coding, and 10530199 ICD Procedure Coding

HIM/CODING PRACTICUM 1...applies previously acquired skills and knowledge by means of clinical experiences in the technical procedures of health record systems and discussion of clinical situations. PREREQ: 10530162 Found of HIM, COREQS: 10530165 Intermediate Coding, 10530197 ICD Diagnosis Coding, 10530199 ICD Procedure Coding, 10530184 CPT Coding, CONDITION: 315302 Medical Coding Spec or 105304 Health Information Management program requirements met

HUMAN DISEASE FOR HEALTH PROFESSIONS...prepares learners to interpret clinical documentation that they will encounter in a variety of healthcare settings. Emphasis is placed on understanding the common disorders and diseases of each body system to include the etiology (cause), signs and symptoms, diagnostic tests and results, and medical treatments and surgical procedures. COREQUISITES: 10501101 Med Term

ICD DIAGNOSIS CODING...prepares students to assign ICD diagnosis codes supported by medical documentation with entry level proficiency. Students apply instructional notations, conventions, rules, and official coding guidelines when assigning ICD diagnosis codes to case studies and actual medical record documentation. PREREQUISITE: 10501101 Medical Terminology and 10530162 Found of HIM and COREQUISITES: 10530182 Human Diseases for the Health Professions and 10530159 Healthcare Revenue Management or 10501102 Health Ins and Reimbursement

ICD PROCEDURE CODING...prepares students to assign ICD procedure codes supported by medical documentation with entry level proficiency. Students apply instructional notations, conventions, rules, and official coding guidelines when assigning ICD procedure codes to case studies and actual medical record documentation. PREREQUISITE: 10501101 Medical Terminology and 10530162 Found of HIM and COREQUISITES: 10530182 Human Diseases for the Health Professions and 10530159 Healthcare Revenue Management or 10501102 Health Ins and Reimbursement

INTERMEDIATE CODING...prepares students to assign ICD and CPT/HCPCS codes supported by medical documentation and official coding guidance to support appropriate reimbursement. Students will participate in CDI activities, including preparation of appropriate physician queries in accordance with compliance guidelines. PREREQUISITE: 10501101 Medical Terminology and 10530162 Found of HIM and COREQUISITES: 10530197 ICD Diagnosis Coding,10530199 ICD Procedure Coding and 10530184 CPT Coding,10530159 Healthcare Revenue Mgmt or 10501102 Health Ins and Reimbursement

MEDICAL TERMINOLOGY...focuses on the component parts of medical terms: prefixes, suffixes and word roots. Students practice formation, analysis and reconstruction of terms. Emphasis on spelling, definition and pronunciation. Introduction to operative, diagnostic, therapeutic and symptomatic terminology of all body systems, as well as systemic and surgical terminology.