ABOUT THE PROGRAM

The Medical Coding Specialist program prepares individuals for employment as entry-level 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.

ADMISSION TO DO'S

- Work with Career Coach to:
 - Submit application and $30 fee.
 - Submit official transcripts (high school and other colleges).
 - Complete background check and $16 processing fee.

PROGRAM TO DO'S

- Work with Academic Advisor to:
 - Complete an assessment for placement (Accuplacer or ACT).
 - Complete health requirements.
 - Complete Functional Abilities Statement of Understanding form.
 - Meet to plan your first semester schedule, review your entire plan of study, discuss placement assessment results and complete Program To Do's.

APPROXIMATE COSTS

- $134.20 per credit tuition (WI resident) plus $7.38 per credit student activity fee. $10 per credit online 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 Career Coach about how to apply for aid.

CONTACT

LTC Career Coach
920.693.1162 • CareerCoach@gotoltc.edu

Catalog No.	Class Title	Credit(s)
Term 1		
10501101	Medical Terminology	3
10501102	Health Insurance and Reimbursement OR 10530185 Heatlh Care Reimbursement (2 cr)	3
10530187	Clnical Information Management OR 10530176 Health Data Management (2 cr) AND 10530181 Introduction to the Health Record (1 cr)	4
10501107	Digital Literacy for Healthcare	2
10806189	Basic Anatomy OR 10806189OL Basic Anatomy (3 cr) OR 10806103 Body Structure and Function (3 cr) OR 10806177 General Anatomy & Physiology (4 cr)	3
		15
Term 2		
10530182	Human Diseases for Health Professions	3
10530184	CPT Coding	3
10530197	ICD Diagnosis Coding	3
10530199	ICD Procedure Coding	2
10530195	Applied Coding	2
10530191	HIM/Coding Practicum 1 OR 10530179 Medical Coding Internship (2 cr)	2
		15
		TOTAL 30

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 2018-2019 rates.

The Hire in HIGHER EDUCATION

APPLIED CODING...prepares students to assign ICD and CPT/HCPCS codes supported by medical documentation with intermediate level of proficiency. Students will prepare appropriate physician queries in accordance with compliance guidelines and will assign codes to optimize compliance with federal regulations and reimbursement. PREREQUISITE: 10501101 Medical Terminolotgy and COREQUISITES: 10530197 ICD Diagnosis Coding and 10530199 ICD Procedure Coding and 10530184 CPT Coding and 10501102 Health Insurance and Reimbursement

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 Equivalent or Accuplacer Reading score of 74 or equivalent

CLINICAL INFORMATION MANAGEMENT...prepares learners for work with health information in various health care delivery systems and within a health information department. It prepares learners to retrieve data from health credits. Professional ethics, confidentiality and security of information are emphasized. It introduces learners to the use and structure of health care data elements, data sets, data standards, their relationships to primary and secondary record systems and health information processing. COREQUISITE: 10501107 Digital Literacy for Healthcare

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 Hlth Prof and 10501102 Hlth Ins & Reimb and PREREQUISITE: 10501101 Med Term 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.

HEALTH DATA MANAGEMENT...introduces the use and structure of health care data elements, data sets, data standards, their relationships to primary and secondary record systems and health information processing.

HEALTH INSURANCE AND REIMBURSEMENT...provides the learner with an understanding of the various types of insurance and managed care plans, and the cycle of medical claims processing. The learner will review cases, develop critical thinking skills in analyzing information, and selecting processes for reimbursement success.

HEALTHCARE REIMBURSEMENT...prepares learners to compare and contract health care payers, illustrate the reimbursement cycle, and to comply with regulations related to fraud and abuse. Learners assign Diagnosis Related Groups (DRGs), Ambulatory Payment Classifications (APCs) and Resource Utilization Groups (RUGs) with entry-level proficiency.

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. COREQUISITES: 10530195 Applied Coding, 10530197 ICD Diagnosis Coding, 10530199 ICD Procedure Coding, 10530184 CPT Coding, CONDITION: 315302 Medical Coding Specialist 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 or CONDITION: 101064 Med Trans Spec program requirements met and 10806103 Body Struc & Func or CONDITION: 311067 Medical Transcription program requirements met and 10806103 Body Structure and Function

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 COREQUISITES: 10530182 Human Diseases for the Health Professions and 10501102 Health Insurance 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 COREQUISITES: 10530182 Human Diseases for the Health Professions and 10501102 Health Insurance and Reimbursement

INTRO TO THE HEALTH RECORD...prepares learners to illustrate the flow of health information in various health care delivery systems and within the health information department. It prepares learners to retrieve data from health records. Professional ethics, confidentiality, and security of information are emphasized.

MEDICAL CODING INTERNSHIP…applies previously acquired skills and knowledge by means of clinical experiences in the technical procedures of medical coding and reimbursement. Student will exhibit professional and ethical behavior in a professional practice setting, apply legal and regulatory requirements to healthcare delivery system information infrastructure, with assistance, compare and contrast health care payers, illustrate the reimbursement cycle, and comply with regulations related to fraud and abuse. COREQUISITES: 10530184 CPT Coding, 10530195 Applied Coding, 10530197 ICD Diagnosis Coding, 10530199 ICD Procedure Coding, and CONDITION: 315302 Medical Coding Specialist or 105304 Health Information Management

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.