

MEDICAL CODING AND BILLING SPECIALIST

Can be completed in online format.

CCS-PS are coding practitioners who specialize in physician-based settings such as physician offices, group practices, multi-specialty clinics, or specialty centers. They review patient records and possess in-depth knowledge of the CPT coding system and familiarity with the ICD-10-CM and HCPCS Level II coding systems. They are experts in health information documentation, data integrity, and quality and play a critical role in a health provider's business operations for data submitted to insurance companies or the government for expense reimbursement. This program offers the knowledge and skills to sit for both the Certified Coding Specialist-Physician Office – CCS-P and/or the Certified Coding Specialist-CCS credentialing exams offered by the **American Health Information Management Association (AHIMA)** and meets the education eligibility requirements as outlined by that association.

Employment Information

Coding specialists compile, process and maintain medical records of hospital and clinic patients. They are familiar with coding systems and stay up-to-date on health care documentation. Day-to-day responsibilities include reviewing patient records for accuracy and completeness, and tracking patient outcomes for quality, organization and maintenance of data for clinical databases and registries. Coding specialists are familiar with classification software and assign clinical codes for reimbursement and data analysis. Most health information technicians work in hospitals or physicians' offices. The median annual wage for health information technicians was \$45,240 per year or \$21.75 per hour in 2020. Overall employment of medical records and health information specialists is projected to grow 9 percent from 2020 to 2030, about as fast as the average for all occupations.

Credentialing

The Medical Coding and Billing Specialist program offers the knowledge and skills to sit for both the Certified Coding Specialist-Physician Office (CCS-P) and/or the Certified Coding Specialist (CCS) credentialing exams offered by the American Health Information Management Association (AHIMA) and meets the education eligibility requirements as outlined by that association.

Is this for me?

Medical records are stored electronically so those choosing this profession will need to be comfortable with using software programs and working with different databases. Patient health information is protected by law, and confidentiality is required of medical records and data security.

Employment Outlook

According to the Bureau of Labor Statistics, employment of medical records and health information technicians is expected to increase by 15 percent from 2014 to 2024, much faster than the average for all occupations. The demand for health services is expected to increase as the population ages and should lead to an increased need for technicians to organize and manage the associated medical records.

- Register for admission to the college.
- Declare Medical Coding and Billing Specialist Program interest and register for all required Fall semester courses.
- Meet placement criteria in basic math and English criteria:

- If course placement criteria not met, student may enroll in appropriate remedial course/s to bring skill level up to criteria.
- Meet with Director of Allied Health to discuss the guided pathway for successful completion of the program.

The Medical Coding and Billing Specialist Program may be completed in three semesters beginning in the fall

Requirements

Code	Title	Credits
Required Coursework		24.00
ALH-111	DIAGNOSTIC CODING ¹	
ALH-210	PROCEDURAL CODING ¹	
ALH-218	MEDICAL TERMINOLOGY	
ALH-225	SURVEY OF BODY SYSTEMS & DISEASE COND	
ALH-240	INSURANCE CLAIMS PROCESSING ¹	
ALH-252	ETHICAL & LEGAL PRAC IN ALLIED HEALTH	
ALH-280	CODING SPECIALIST PRACTICUM ¹	
BUS-104	INTRO TO BUSINESS ¹	
Total Credits		24.00

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Course has prerequisite(s)

1. The student must achieve a 2.5 GPA in all ALH curriculum courses.
2. Qualifications for the practicum require that students have all course work completed and an overall 2.5 GPA or above.

Tuition is calculated by contact hours per semester.

Current/Updated: 07/30/2022

Course	Title	Credits
First Year		
Fall 1		
Fall 1 (8 weeks)		
ALH-218	MEDICAL TERMINOLOGY	3.00
ALH-225	SURVEY OF BODY SYSTEMS & DISEASE COND	3.00
Fall 2 (8 weeks)		
ALH-111	DIAGNOSTIC CODING	3.00
ALH-252	ETHICAL & LEGAL PRAC IN ALLIED HEALTH	2.00
Credits		11.00
Winter 1		
Winter 1 (8 weeks)		
ALH-210	PROCEDURAL CODING	3.00
Winter 2 (8 weeks)		
ALH-240	INSURANCE CLAIMS PROCESSING	3.00
BUS-104	INTRO TO BUSINESS (Full semester course)	4.00
Credits		10.00
Summer 1		
(8 weeks)		
ALH-280	CODING SPECIALIST PRACTICUM	3.00
Credits		3.00
Total Credits		24.00