

# MEDICAL CODING AND BILLING SPECIALIST CERTIFICATE

Medical Coding and Billing Specialists work 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 CCS credentialing exam through the American Health Information Management Association (AHIMA) and the CCP credentialing exam through the American Association of Professional Coders (AAPC).

## Program Outcomes

1. Demonstrate competent entry level coding skills.
2. Demonstrate the ability to communicate professionally across modalities.
3. Think critically in solving problems and applying knowledge in the practice of coding.
4. Apply classroom and lab experiences into the medical workplace.

## Employment Information

Medical Coding and Billing 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 was \$50,250 per year or \$24.16 per hour in 2024. Overall, employment of medical records and health information specialists is projected to grow 9% from 2023 to 2033, faster than the average for all occupations.

## Credentialing

The Medical Coding and Billing Specialist program offers the knowledge and skills to sit for both Certified Coding Specialist (CCS) credentialing exam through the American Health Information Management Association (AHIMA) and the Certified Professional Coder (CPC) credentialing exam through the American Association of Professional Coders (AAPC) 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 9% from 2023 to 2033, faster than the average for all occupations. The demand for health services is expected to increase as the population ages, which should lead to an increased need for technicians to organize and manage the associated medical records.

## Requirements

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

<sup>1</sup> Course has prerequisite(s)

1. The student must achieve a 2.0 GPA in all ALH curriculum courses.
2. Qualifications for the capstone course requires that students have all course work completed and an overall 2.0 GPA or above.

**Note:** No course below 100 level will be applied to this certificate.

Tuition is calculated by contact hours per semester.  
Current/Updated: 07/30/2022

Course	Title	Credits
<b>Fall 1</b>		
ALH-218	MEDICAL TERMINOLOGY	3.00
ALH-225	SURVEY OF BODY SYSTEMS & DISEASE COND	3.00
ALH-111	DIAGNOSTIC CODING	3.00
ALH-252	ETHICAL & LEGAL PRAC IN ALLIED HEALTH	2.00
<b>Credits</b>		<b>11.00</b>
<b>Winter 1</b>		
ALH-210	PROCEDURAL CODING	3.00
ALH-240	INSURANCE CLAIMS PROCESSING	3.00
BUS-104	INTRO TO BUSINESS	4.00
<b>Credits</b>		<b>10.00</b>
<b>Summer 1</b>		
ALH-280	MEDICAL CODING AND BILLING CAPSTONE	3.00
<b>Credits</b>		<b>3.00</b>
<b>Total Credits</b>		<b>24.00</b>