

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 AND PROGRAM ENROLLMENT STEPS

- Submit online application.
- Submit transcripts (high school & other colleges). NOTE: Official transcripts required for acceptance of transfer credits; Financial Aid may require.
- Complete background check and \$20 processing fee.
- Complete the online Student Success Questionnaire.
- Complete health requirements.
- Complete Technical Standards form.
- Schedule a Program Advising Session with your assigned advisor to plan your first semester schedule, review your entire plan of study, discuss the results of the Student Success Questionnaire.

APPROXIMATE COSTS

- \$136.50 per credit tuition (WI resident) plus \$8.10 per credit student activity fee. \$10 per credit online or hybrid 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 (Fall 2020)		
10501101	Medical Terminology	3
10501107	Digital Literacy for Healthcare	2
10806189	Basic Anatomy OR 10801689OL Basic Anatomy Online (3 cr) OR 10806177 General Anatomy & Physiology (4 cr)	3
		8
Term 2 (Spring 2021)		
10530162	Foundations of HIM	3
10530159	Healthcare Revenue Management	3
10530182	Human Diseases for Health Professions	3
		9
Term 3 (Fall 2021)		
10530184	CPT Coding	3
10530197	ICD Diagnosis Coding	3
		6
Term 4 (Spring 2022)		
10530165	Intermediate Coding	3
10530199	ICD Procedure Coding	2
10530191	HIM/Coding Practicum 1	2
		7
		TOTAL 30



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 Hlth Prof and 10530159 Healthcare Revenue Mgmt 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.

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.

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: 10530165 Intermediate 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

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 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 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/HPCS 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 COREQUISITES: 10530197 ICD Diagnosis Coding and 10530199 ICD Procedure Coding and 10530184 CPT Coding and 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.