



american
career
college

one change changes everything™



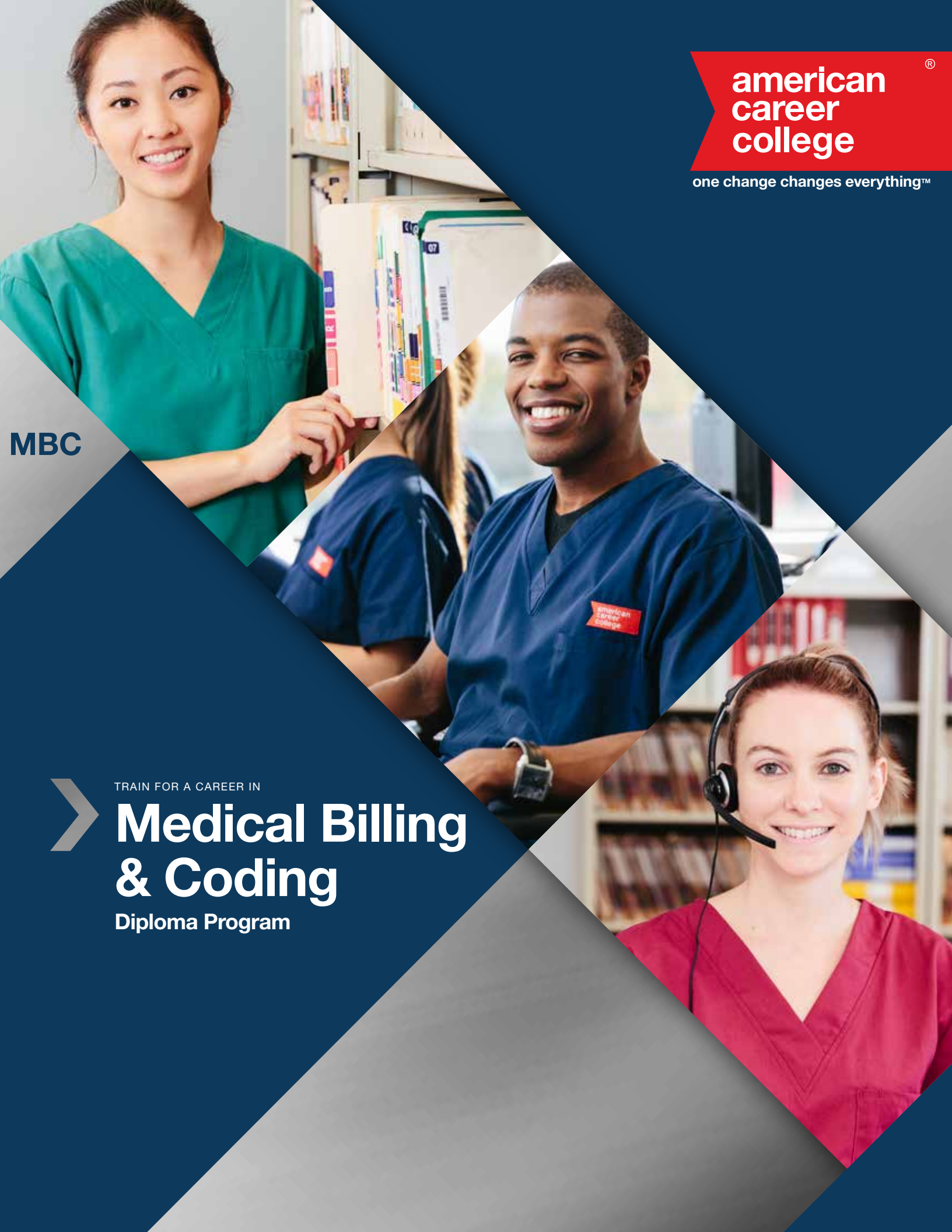
MBC

TRAIN FOR A CAREER IN



Medical Billing & Coding

Diploma Program





Overview

Program Outline

As a Medical Biller or Medical Coder, you'll work on the business side of the medical team. You'll interact with patients and insurance companies as you accurately record procedures and discuss payment options.

This program is offered in blended delivery format. Blended courses combine traditional or face-to-face classroom instruction with online instruction to optimize the learning experience of the user. Blended courses are indicated by an asterisk (*) in the module listings.

In preparation for the blended courses, students must satisfy these two requirements:

- › Complete the online New Student Blended Tutorial, which includes exercises for students to test accessibility and become familiar with navigation in all areas of blended courses
- › Meet the specific computer requirements with acceptable hardware and software configuration and internet access as noted under admissions requirements.

In this program, students will develop their knowledge and skills within a blended model of education. Preparing students for the real life experience of healthcare data delivery systems, students will engage in both online learning as well as lab and software applications. Students will become familiar with and be able to utilize industry related reference materials such as the Physicians' Current Procedural Terminology (CPT), International Classification of Diseases as well as Healthcare Common Procedures Coding System (HCPCS). Medical Billers and Medical Coders work in a range of facilities, from doctors' and dentists' offices, to clinics, to insurance companies or medical billing companies, and more.

LOCATION	Los Angeles, Orange County, and Ontario Campuses
DURATION	Approximately 9 months
ENROLLMENT REQUIREMENTS	<p>Each program has entrance requirements, including an entrance exam. Some of the admission requirements include:</p> <ul style="list-style-type: none">• Must be at least 18 or have a parent or guardian's signature• All applicants must take and pass entrance exams before admission• Must have a high school diploma or the equivalent <p>Be sure to consult with an Admissions Advisor to get all the information on admission into the Medical Billing and Coding program.</p>
CAREER OPTIONS	<p>Here are some of the industry organizations and medical offices that have hired ACC graduates:</p> <p>Baptist Memorial Hospital for Women, Children's Hospital, Cedars-Sinai Medical Center, Hoag Hospital, Kaiser Permanente, Lifestyle Lift, San Antonio Community Hospital, St. Bernardine Medical Center, St. John's Medical Center, St. Jude Medical Center/Knotts Endoscopy, St. Vincent Medical Center, and UCLA Medical Center</p>

Module Descriptions

The training program is divided into learning units called modules. Students must complete all modules and can start with any one module, then continue their rotation until all modules have been completed. Each module stands alone and is not dependent upon previous training. Upon successful completion of all modules, students participate in a 200-hour externship. Completion of the Medical Billing and Coding program is acknowledged by the awarding of a diploma.

Module #	Module Title	Clock Hours	Quarter Credits
MBC-101	Medical Office Procedures*	80	6.0
MBC-201	Claims Processing*	80	6.0
MBC-301	Hospital Billing and Coding*	80	6.0
MBC-401	Medical Law and Ethics*	80	6.0
MBC-501	Reimbursement and Collections Methods*	80	6.0
MBC-601	State and Government Health Plans*	80	6.0
MBC-701	Managed Care and Private Health Plans*	80	6.0
MBC-EXT	Externship	200	6.5
Program Total		760	48.5

*Modules offered in a blended format, a combination of online and on-ground.

MBC-101 Medical Office Procedures*

In this module students will gain an understanding of daily operations in a medical office. Professional communication, interpersonal skills, and medical office policies and procedures will also be discussed. Students will also learn anatomy and physiology of the integumentary system and the structure and function of cells and tissues. Medical terminology, pathophysiology, and pharmacology related to these systems will also be discussed. Surgery coding guidelines will be introduced. Students will learn the basic identification and method of code assignments, coding, and classification systems in order to assign valid diagnostic and or procedure codes using ICD-9, ICD-10, CPT, and HCPCS manuals. Students will also become familiar with and improve their keyboarding skills. By the end of this module students should feel comfortable using coding manuals to locate and assign diagnostic and procedural codes relating to the integumentary system, cells, tissues, neoplasms, and the surgery section of the CPT manual.

MBC-201 Claims Processing*

Students will gain an understanding of the complete cycle of claims processing in this module. They will also learn how to recognize form locators and the sections they apply to on a CMS-1500 form as well as understand plan participation and payment methods. In addition, students will learn how to differentiate between a rejected and denied claim form. Students will also learn anatomy and physiology of the cardiovascular, lymphatic, and immune systems. Pathophysiology and pharmacology related to these systems will also be discussed. Pathology and Laboratory services and procedure coding guidelines will be introduced. Students will learn the basic identification and method of code assignments, coding, and classification systems in order to assign valid diagnostic and or procedure codes using ICD-9, ICD-10, CPT, and HCPCS manuals. By the end of this module students should feel comfortable using coding manuals as well as logic-based computerized coding software.

MBC-301 Hospital Billing and Coding*

In this module students will gain an understanding of hospital organizational structures, billing systems, and coding of inpatient procedures. Students will become familiar with the Uniform Bill 2004 (UB-04) form and its application to hospital billing. Hospital reimbursement system such as Diagnosis Related Groups (DRG), Resource-Based Relative Value Scale (RBRVS), and Ambulatory Payment Classification (APC) will be discussed. Students will also learn anatomy and physiology of the muscular and skeletal systems. Medical terminology, pathophysiology and pharmacology related to these systems will also be discussed. Radiology coding guidelines will be introduced. Students will learn identification and method of code assignments, coding, and classification systems in order to assign valid diagnostic and or procedure codes using ICD-9, ICD-10, CPT, and HCPCS manuals. Students will also become familiar with and improve their keyboarding skills. By the end of this module students should feel comfortable using coding manuals to locate and assign diagnostic and procedural codes relating to the muscular and skeletal systems and the radiology section of the CPT manual.

MBC-401 Medical Law and Ethics*

Students will gain an understanding of the legal and ethical aspect of healthcare in this module. Students will become familiar with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) as well as the Occupational Health and Safety Administration (OSHA) requirements for the medical office setting. Legal requirements regarding patients' privacy and confidentiality will also be discussed. Students will also learn anatomy and physiology of the male and female reproductive systems as well as the endocrine system. Medical terminology, pathophysiology and pharmacology related

to these systems will also be discussed. Inpatient surgery coding guidelines will be introduced. Students will learn the basic identification and method of code assignments, coding, and classification systems in order to assign valid diagnostic and/or procedure codes using ICD-9, ICD-10, CPT, and HCPCS manuals. Students will also become familiar with and improve their keyboarding skills. By the end of this module students should feel comfortable using coding manuals to locate and assign diagnostic and procedural codes relating to the male and female reproductive systems as well as the endocrine system, and the inpatient surgery section of the CPT manual.

MBC-501 Reimbursement and Collections Methods*

In this module, students will study the use of coded data and health information in reimbursement and payment systems appropriate to all healthcare as well as managed care settings. Contemporary, prospective payment systems, charge master maintenance, and evaluation of fraudulent billing practices will be covered. Capitation, fee-for-service, relative value unit (RVU), and usual, customary, and reasonable (UCR) reimbursement methods will be discussed. Students will learn to interpret an Explanation of Benefits (EOB) for purposes of collection and payment. Students will also learn anatomy and physiology of the digestive and urinary systems. Medical terminology, pathophysiology, and pharmacology related to these systems will also be discussed. Medicine coding guidelines will be introduced. Students will learn identification and method of code assignments, coding, and classification systems in order to assign valid diagnostic and or procedure codes using ICD-9, ICD-10, CPT, and HCPCS manuals. Students will also become familiar with and improve their keyboarding skills. By the end of this module students should feel comfortable using coding manuals to locate and assign diagnostic and procedural codes relating to the digestive and urinary systems and the medicine section of the CPT manual.

MBC-601 State and Government Health Plans*

Students will learn about state and government health plans such as Medicare, Medicaid, Tricare, CHAMPVA, Workers' Compensation, and Disability in this module. Students will learn to complete the CMS1500 Claim form under government program guidelines. The National Correct Coding Initiative (NCCI) will be introduced. The Affordable Care Act as it relates to state and government programs will be discussed. Students will also learn anatomy and physiology of the respiratory system. Medical terminology, pathophysiology, and pharmacology related to this system will also be discussed. Anesthesia coding guidelines will be introduced. Students will learn the basic identification and method of code assignments, coding, and classification systems in order to assign valid diagnostic and or procedure codes using ICD-9, ICD-10, CPT, and HCPCS manuals. Students will also become familiar with and improve their keyboarding skills. By the end of this module students should feel comfortable using coding manuals to locate and assign diagnostic and procedural codes relating to the respiratory system and the anesthesia section of the CPT manual.

MBC-701 Managed Care and Private Health Plans*

In this module students will gain an understanding of managed care organizations including HMO's and PPO's. Private insurance plans will also be discussed. Students will also learn anatomy and physiology of the nervous system and special senses. Medical terminology, pathophysiology, and pharmacology related to these systems will also be discussed. Evaluation and Management coding guidelines will be introduced. Students will learn identification and method of code assignments, coding, and classification systems in order to assign valid diagnostic and/or procedure codes using ICD-9, ICD-10, CPT, and HCPCS manuals. Students will also become familiar with and improve their keyboarding skills. By the end of this module students should feel comfortable using coding manuals to locate and assign diagnostic and procedural codes relating to the nervous system, special senses, and the evaluation and management section of the CPT manual.

MBC-EXT Externship

Upon successful completion of all modules, Medical Billing and Coding students participate in 200 hours of externship. The externship module enables students to have the opportunity to demonstrate and reinforce the knowledge and skills presented and practiced throughout the training program. Externs work under the direct supervision of qualified personnel at the externship site under the general supervision of College staff. Supervisory personnel evaluate externs and the evaluations are placed in the students' permanent records. Students must complete their externship training to fulfill graduation requirements.

Prerequisites: MBC-101, MBC-201, MBC-301, MBC-401, MBC-501, MBC-601, MBC-701

Medical Billing & Coding

Accreditation

ACC is institutionally accredited by the **Accrediting Bureau of Health Education Schools (ABHES)**.

ABHES: 7777 Leesburg Pike, Suite 314N, Falls Church, VA 22043 / Phone (703) 917-9503 / Fax (703) 917-4109 / www.abhes.org.

Campus Locations	Orange County	Ontario	Los Angeles
ACCREDITING BUREAU OF HEALTH EDUCATION SCHOOLS (ABHES)			
Retention Rates			
Based on the calculation required by ACC's accrediting body, ABHES. ABHES defines retention rate as the number of graduates plus students who enrolled as of June 30, 2018 divided by the number of students who were in school from July 1, 2016 to June 30, 2017 and were still enrolled as of July 1, 2017 plus new starts during the reporting period and students who reentered between July 1, 2017 and June 30, 2018.	88%	88%	85%
Placement Rates			
Based on the calculation required by ACC's accrediting body, ABHES. ABHES defines placement rates as the number of graduates who complete the program during the reporting period (July 1, 2017-June 30, 2018) who are graduates who were available for employment and found a job in their field of training.	80%	70%	81%
CALIFORNIA BUREAU FOR PRIVATE POSTSECONDARY EDUCATION (BPPE)			
On-time Completion Rates			
The number of students who completed the program within 100% of the published program length within 2017 divided by the number of students who began the program who were scheduled to complete the program within 100% of the published program length within 2017 and excludes all students who canceled during the cancellation period, minus the number of students who have died, been incarcerated, or been called to active military duty.	48%	56%	50%
Placement Rates			
The number of 2017 graduates gainfully employed in the field divided by the number of graduates available for employment. Graduates employed in the field means graduates who beginning within six months after a student completes the applicable educational program are gainfully employed, whose employment has been reported, and for whom the institution has documented verification of 35 days employment. For occupations for which the state requires passing an examination, the six months' period begins after the announcement of the examination results for the first examination available after a student completes an applicable educational program.	53%	48%	44%
Program Costs			
Includes tuition and fees for the entire program, and assumes normal completion. Tuition and Fees are subject to change.	\$19,025	\$19,025	\$19,025
O*Net Occupation Titles			
Insurance Claims Clerks: Claims Representative, Customer Service Representative (CSR), Claims Service Representative, Claims Technician, Claims Examiner, Claims Processor, Claims Customer Service Representative (Claims CSR), Insurance Specialist, Claims Adjudicator, Claims Adjuster	43-9041.01	http://www.onetonline.org/link/summary/31-2021.00	
Insurance Policy Processing Clerks: Account Manager, Administrative Underwriter, Account Administrator, Agency Service Representative, Associate Financial Representative, Field Secretary, Customer Service Technician, Insurance Analyst, Premium Representative, Processing Clerk	43-9041.02	http://www.onetonline.org/link/summary/43-9041.02	
Medical Secretaries: Medical Secretary, Receptionist, Unit Support Representative, Office Manager, Medical Receptionist, Patient Relations Representative (PRR), Front Office Manager, Health Unit Coordinator, Medical Office Specialist, Patient Coordinator	43-6013.00	http://www.onetonline.org/link/summary/43-6013.00	
Correspondence Clerk: Correspondence Coordinator, Correspondence Clerk, Correspondence Representative, Dispute Resolution Analyst, Chargeback Specialist, Correspondent, Dispute Specialist, Beneficiary Correspondent, Claims Correspondence Clerk, Medicare Correspondence Representative	43-4021.00	http://www.onetonline.org/link/summary/43-4021.00	
To obtain a list of the objective sources of information used to substantiate the salary disclosures; please refer to the California Employment Development Department website at: http://www.labormarketinfo.edd.ca.gov/ocguides/Search.asp . ACC cannot guarantee employment. Programs lengths vary by schedule and session.			



Start Your Change Today

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