

Medical Coding Specialist

22-credit Technical Diploma

About the Program

Medical Coders work in a variety of healthcare areas such as hospitals, physician offices and insurance companies. They review the physician documentation in the record in order to assign diagnoses and procedures codes which are used for reimbursement and data purposes. Billing forms are then filed based on the codes assigned. There are strict federal guidelines that must be followed when assigning codes.

Coders must have a strong background in Medical Terminology, Anatomy and Physiology and Pathophysiology. In this program, students learn to use two different coding systems in order to assign codes in addition to the reimbursement systems for inpatient and outpatient coding.

Graduates can become eligible to write the CCA which is a certification exam through AHIMA (American Information Management Association)

Potential Job Titles

- Medical Coding Specialist
- Revenue Cycle Analyst
- Medical Billing Specialist
- Medical Coder

Admission Process

- Fill out a WCTC application
- Send \$30 non-refundable application fee
- View online informational meeting
- Send high school transcript or GED/HSED
- Send any previous college transcripts
- Complete Skills Assessment test (COMPASS)
- Begin pursuing Financial Aid options
- Schedule a Program Planning Session (PPS) with program counselor

For more information, call 262.691.5200.

Medical Coding Specialist Required Courses

- 501-101 Medical Terminology** 3
Develop an understanding of medical terminology by breaking related words into prefixes, root words, and suffixes. Practice the formation, analysis, and reconstruction of terms, and learn correct spellings, definitions, and pronunciations. Become familiar with the operative, diagnostic, therapeutic, and symptomatic terminology of all body systems, as well as systemic and surgical terminology.
- 501-107 Intro to Healthcare Computing** 2
Become familiar with the basic computer applications used in contemporary healthcare settings, including common software packages, operating systems, file management, word processing, spreadsheets, databases, the Internet, and e-mail. Study the hardware and software components of modern computer systems.
- 509-302 Human Body in Health & Disease** 3
Study normal body structure and function as well as the causes, signs, and symptoms of diseases of the major body systems, as well as the diagnostic

Required Courses	Credits
First Semester	
501-101 Medical Terminology	3
509-302 Human Body in Health & Disease	3
530-181 Introduction to Health Records	1
530-182 Human Diseases for Health Professions	3
530-183 ICD-9-CM Coding	3
Total semester credits	13
Second Semester	
501-107 Intro to Healthcare Computing	2
530-184 Current Procedural Terminology	3
530-185 Health Care Reimbursement	2
530-195 Applied Coding	2
Total semester credits	9
<i>A grade point of 2.0 (C) or better is required in all courses to complete the program. Curriculum is current as of catalog printing. The most current curriculum requirements for graduation will be provided upon admission to program, or review at www.wctc.edu. Program layout above represents a sample of how to navigate the program.</i>	

procedures, usual treatment, prognosis, and prevention of common diseases.
Prerequisites: 501-101 Medical Terminology (or concurrent) or 510-314 Language of Anatomy or 509-160 Medical Terminology or 509-361 Advanced Medical Terminology or 509-164 Adv Med Term (or concurrent) or 509-360 MED TERM; and COMPASS-Reading Skills or ASSET-Reading Skills or Accuplacer Reading Comprehensi or ACT-Reading or TABE Advanced Reading or COMPASS/ESL - Reading or College Proficiency - Reading; and COMPASS-Writing Skills or ASSET-Writing Skills or Accuplacer Sentence Skills or ACT-English or TABE Advanced Language or COMPASS/ESL - Grammar or College Proficiency - Writing; and 838-105 Intro Reading & Study Skills (or concurrent) or 831-103 Intro to College Writing (or concurrent) or 858-775 Reading - Program Readiness or 851-771 Writing-Program Readiness

530-181 Introduction to Health Records 1
Comprehend the flow of health information in various health care delivery systems and within the health information department. Study the retrieval of data from health records, and discuss topics such as professional ethics, confidentiality, and security of information.

530-182 Human Diseases Hlth Profession 3
Become familiar with the common diseases encountered in all types of health care settings by health information professionals. Examine the causes, signs and symptoms, diagnostic tests, and treatment of each disease.
Prerequisites: 509-160 Medical Terminology (or concurrent); or 501-101 Medical Terminology (or concurrent) and 509-302 Human Body in Health & Disease (or concurrent); or 806-195 Anatomy and Physiology I (or concurrent); or 510-314 Language of Anatomy (or concurrent); or 501-101 Medical Terminology (or concurrent) and 806-177 Gen Anatomy & Physiology (or concurrent)

530-183 ICD-9-CM Coding 3
Develop the skills needed to assign ICD-9-CM codes, supported by medical documentation, with entry-level proficiency. Apply ICD-9-CM instructional notations, conventions, rules, and official coding guidelines when assigning ICD-9-CM codes to case studies and actual medical record documentation.
Prerequisites: 501-101 Medical Terminology (or concurrent) and 509-302 Human Body in Health & Disease (or concurrent); or 510-314 Language of Anatomy; or 806-177 Gen Anatomy & Physiology

and 501-101 Medical Terminology; and 530-181 Introduction to Health Records (or concurrent); and 530-182 Human Diseases Hlth Profession (or concurrent)

530-184 Current Procedural Terminology 3
Learn how to assign CPT codes, supported by medical documentation, with entry-level proficiency. Apply CPT instructional notations, conventions, rules, and official coding guidelines when assigning CPT codes to case studies and actual medical record documentation.
Prerequisites: 501-101 Medical Terminology (or concurrent) and 509-302 Human Body in Health & Disease (or concurrent); or 510-314 Language of Anatomy; or 806-177 Gen Anatomy & Physiology (or concurrent) and 501-101 Medical Terminology (or concurrent); and 530-181 Introduction to Health Records (or concurrent); and 530-182 Human Diseases Hlth Profession (or concurrent)

530-185 Health Care Reimbursement 2
Prepare to compare and contrast health care payers, understand the reimbursement cycle, and comply with regulations related to fraud and abuse. Use computerized encoding and grouping software to assign diagnosis-related groups, ambulatory payment classifications, and resource utilization groups with entry-level proficiency.
Prerequisites: 501-101 Medical Terminology (or concurrent) or 509-160 Medical Terminology (or concurrent) or 510-314 Language of Anatomy (or concurrent); and 806-177 Gen Anatomy & Physiology (or concurrent) or 509-302 Human Body in Health & Disease (or concurrent) or 806-195 Anatomy and Physiology I (or concurrent); and 530-182 Human Diseases Hlth Profession (or concurrent); and 530-181 Introduction to Health Records (or concurrent) or 530-109 Intro ICD-9 Med Coding (or concurrent); and 530-183 ICD-9-CM Coding (or concurrent) or 530-109 Intro ICD-9 Med Coding (or concurrent); and 530-184 Current Procedural Terminology (or concurrent) or 530-110 Intro CPT Coding (or concurrent)

530-195 Applied Coding 2
Become prepared to assign ICD and CPT/HCPCS codes supported by medical documentation with intermediate level of proficiency. Prepare appropriate physician queries in accordance with compliance guidelines and assign codes to optimize appropriate reimbursement.
Prerequisites: 530-183 ICD-9-CM Coding and 530-184 Current Procedural Terminology (or concurrent) and 530-185 Health Care Reimbursement (or concurrent)