

**MEDICAL INFORMATION
CODER/BILLER
APPLICATION**

FALL 2009

DEADLINE: August 10, 2009



PBCC at LAKE WORTH
4200 Congress Avenue
Lake Worth, FL 33461-4796

Limited Access Program Office (561) 868-3639

Web Site: <http://www.pbcc.edu/MedicalCode.xml>
Program email: medicalcoderbillier@pbcc.edu

Equal Opportunity Institution

Program Information

About the Program

This program is designed to prepare students for employment in Medical Information Coding and/or Billing. This program is a College Credit Certificate and approved by the American Health Information Management Association as a comprehensive coding program. This program prepares students to become specialists in working with health information systems, managing medical records, and coding information for reimbursement and research. Students learn about the requirements for a variety of healthcare settings including hospitals. Program completers will have obtained the knowledge to pass the American Health Information Management Association (AHIMA) Certified Coding Associate (CCA) exam (for more information go to <http://himcareers.ahima.org/>) and/or the American Academy of Professional Coders (AAPC) Certified Professional Coder (CPC) exam (www.aapc.com). The program requires passing completion of 34 credits for graduation. All 34 credits earned can be applied to the Health Information Management degree program.

Program Begins: Fall 2009 (HIM courses)

Program Length: August 21, 2009 – December 20, 2010

Program Schedule: Part-time - Days (4 HIM semesters)

Program Location: Lake Worth campus

What are the costs for the program?

Costs are approximate and subject to change. Please refer to the current college catalog for tuition rates per credit. Computer lab courses also require lab fees between \$25 and \$30 per course. Program textbook costs are in the range of \$700 to \$1000 including the cost of reference manuals.

Financial Aid is available for this program and it is recommended that you apply early. You can apply online at www.pbcc.edu/FinancialAid.xml. Also, there are a limited number of scholarships through the PBCC Foundation. Currently, all Foundation Scholarships require the FAFSA, which may be filed on-line at www.fafsa.ed.gov. Toll-free "help line" 8:00 – midnight 1-800-433-3243.

Requirements for Consideration for Selection

The following are required for eligibility in the selection pool. Meeting criteria for selection does not guarantee admission to the Medical Information Coder/Biller program. Final selection will be based on the applicant pool. If a student is selected and does not enter the program, or is not selected, the student must reapply and is not guaranteed acceptance in any subsequent selection process.

All documentation must be on file at the PBCC Admissions Office, Lake Worth, by July 1, 2009.

APPLICATION

First-time PBCC Students:

- *Apply to the college* -Submit a completed PBCC general credit application at www.FACTS.org (choose Admissions) and pay the appropriate fee by the deadline date. This one-time fee is \$20 for U.S. citizens, \$30 (U.S. currency) for international students and is non-refundable. Be sure to insert your current and active e-mail address where requested; be specific regarding your program of study. Once submitted, a confirmation page with conditions of admission will be sent to the e-mail address provided in the college application. Print the confirmation page and follow the instructions within.
- *Apply to the program* - Applicants must also submit the program application contained in this packet and submit to the Admissions office.

Non first-time PBCC Students:

- *Apply to the program* – Applicants must complete the program application in this packet and submit to the Admissions office.

ACADEMIC HIGH SCHOOL DIPLOMA OR GED

Official standard high school transcripts or equivalent (*transcripts are considered official if sent directly to PBCC from the previous institution or hand delivered in a sealed envelope sealed by the issuing institution*) delivered to **PBCC Admissions Office** showing proof of a standard high school graduation, GED, or validated foreign equivalent. All applicants – new, current, and college transfer students must have their official high school or GED transcript on file at PBCC. You may download the transcript request form from our website at www.pbcc.edu/transcripts.xml. Students who received a Florida GED can request their scores using the downloaded form at www.pbcc.edu/transcripts.xml

COLLEGE TRANSCRIPTS

Official college transcripts (*transcripts are considered official if sent directly to PBCC from the previous institution or hand delivered in a sealed envelope sealed by the issuing institution*) from **ALL** post-secondary institutions attended must be submitted. **Official transcripts are to be mailed directly from the previous institution to the PBCC Admissions Office.** You may download the transcript request form from our website at www.pbcc.edu/transcripts.xml. If you have attended college, we still require proof of a standard high school diploma, GED or validated foreign equivalent. Commercial evaluation of out of country transcripts is required and must be sent from an approved evaluating institution directly to PBCC. Information for approved evaluators available at www.pbcc.edu/transcripts.xml

COLLEGE PLACEMENT TEST

All applicants must submit placement test scores (taken within two years prior to admission) which meet minimum requirements for entrance into college level English, reading and mathematics courses, or required remedial work (including any and all necessary college preparatory courses). Successful test scores will allow entry to the applicant pool.

Pre-requisite courses must be completed prior to program start date.

Many of our courses are provided in a hybrid online format. This means that students attend about half the course time in class and the other half is provided in an online course format. Special course fees will apply.

HOBET COMPUTERIZED TEST (will be replaced in 2010 by the TEAS test)

All applicants must take and **pass** the Health Occupations Basic Entrance Test (HOBET) computerized test. You must score a minimum of **45 average** in the overall composite Math section and the composite Reading section combined. This test assesses reading comprehension of science-based articles, critical thinking skills, basic algebra and learning styles. This test can only be taken **ONCE** during an application period. Your scores are valid for two years; however, only the most recent score will be used for admission. Applicants are encouraged to test early due to limited seating availability during the month of August. There is a \$25.00 fee for this exam and is offered in the Lake Worth Testing Center only. Please pay the cashier and report to the Lake Worth testing center (with photo ID) to arrange to take the exam

For HOBET testing information call:

Belle Glade	(561) 993-1125
Boca Raton	(561) 862-4330
Lake Worth	(561) 868-3011
Palm Beach Gardens	(561) 207-5359

After submitting your application

Your criteria for selection can be viewed at www.pbcc.edu/pantherweb.xml under "limited access application status". Status and all communication will be sent to your my.pbcc.edu e-mail account including all acceptance documentation.

Applicants who are selected will be notified approximately two weeks after the deadline date. If an applicant is selected and does not complete the registration process, the applicant must reapply and is not guaranteed acceptance in any subsequent selection process.

Certificates

Certification requirements:

All applicants must submit the following current, valid certificates:

- CPR for Healthcare providers – American Heart Association
- 4 hr. HIV Bloodborne Pathogens Certificate
- 1 hr. Domestic Violence Certificate.

These certificates can be obtained through the continuing education department.

Acceptance/Registration

Applicants who are selected will be notified approximately two weeks after the deadline date. If an applicant is selected and does not complete the registration process, the applicant must reapply and is not guaranteed acceptance in any subsequent selection process.

The provisional acceptance notice will include:

1. Registration information
2. Medical exam form. Exam must show physician clearance for good physical and mental health.
3. Criminal Background Check (FDLE): Student must be within state regulations and have civil rights restored.
4. Drug screen form. Results must be negative for program acceptance.
4. Drug screen form. Results must be negative for program acceptance.
6. Date of Mandatory Orientation

All students are conditionally accepted and will be required to obtain criminal background checks and drug screenings (at their own expense) prior to the start of class. Further information will be provided when admitted into the Medical Information Coder/Biller Program. Failure to provide such documentation will result in termination of application. After completion of all required paperwork the student will be accepted.

Withdrawal/Program Dismissal

If the student withdraws from a semester of the Medical Information Coder/Biller Program, the student must reapply to the program through the applicant pool. Students previously dismissed from any PBCC Health Science program and who have exhausted the appeal process are not eligible to apply.

Curriculum

Entire tuition/fees are ***not*** due upon acceptance into the program. Registration fees are paid upon registration for each course.

		Prior to admission		Year 1		Admission required		Year 2	
Term	Credits	Course Number	Course Title	Term	Credits	Course Number	Course Title	Term	Credits
Fall	3	BSC1085	Anatomy/Physiology 1	Fall	3	HIM1000C	Introduction to Health Information Technology		
Fall	1	BSC1085L	Anatomy/Physiology 1 Lab	Fall	2	HIM1433C	Pathophysiology for Health Information Management		
Fall	3	CGS1100	Microcomputer Applications	Fall	2	HIM1442C	Pharmacology for Health Information Management		
Spring	3	BSC1086	Anatomy/Physiology 2	Fall	3	HIM1282C	Fundamentals of Medical Coding		
Spring	1	BSC1086L	Anatomy/Physiology 2 Lab	Spring	3	HIM2222C	Medical Coding 1 (ICD-9-CM)		
Spring	3	HSC2531	Medical Terminology*	Spring	3	HIM2270C	Medical Reimbursement and Revenue		
You may apply during the semester in which you will complete your prerequisite courses. You may be tentatively accepted pending final grades for prerequisite courses.				Summer	3	HIM2253C	Medical Coding 2 (CPT and ICD-9-CM)		
				Professional Practice – Final Semester All courses must be completed with a "C" or better to enter Practicum.				Fall	1

*Challenge test is available in the testing center.

Pre-requisites must be completed prior to program start date. You may be tentatively accepted pending final grades for prerequisite courses.

Many of our courses are provided in a hybrid online format. This means that students attend about half the course time in class and the other half is provided in an online course format. Special course fees will apply.

NOTE: Students who plan to enroll in the Health Information Management (HIM) A.S. program may choose to add general education courses to their schedule to be considered full-time for financial aid purposes. The HIM pre-requisites include the above first years course and the following:

Credits	Course Number	Course Title
3	ENC1101	College Composition
3	STA2023	Statistics
3	PSY2021	Introduction to Psychology
3	SPC1016	Fundamentals of Speech Communication
3	MAN2021	Principles of Management
3	Area II	Humanities Course

Applicant Point System for Selection

After all eligibility requirements for placement into the selection pool have been satisfied, the following point system will be utilized for selection into the program.

In the event of a tie, the selection will be based on:

- (1) Point system
- (2) TEST scores
- (3) Completion of a Health Occupation Program

I. HEALTHCARE WORK EXPERIENCE

All work experience must be within the past 3 years and for 6 months consecutively to earn points. Proof of work experience must be provided in the form of a letter from your employer on company letterhead. The letter must provide a contact name and phone number for verification, the dates of employment and daily duties. The letter must be submitted to the Limited Access Program office by the deadline date in order to receive points.

Healthcare Experience of more than 2 years **2**

II. EDUCATION

Completion of a PBCC Health Science program **2**

OR

Obtained associate degree or higher level degree in any area of study..... **1**

III. RESIDENCY STATUS

Florida Resident..... **1**

IV. CUMULATIVE GPA

Points given equal to the cumulative GPA (undergraduate credit only – 2.5 minimum) **2.5-4**

IV. HOBET AVERAGE SCORE (will be replaced in 2010 by the TEAS test)

(Average of the overall composite Math score and the composite Reading score.)

90 - 99	12
80 – 89	10
70 - 79	8
60 – 69	6
50 – 59	4
45 – 49	2

MAXIMUM POINTS POSSIBLE **21**

IF AN APPLICANT IS SELECTED AND DOES NOT COMPLETE THE REGISTRATION PROCESS, THE APPLICANT MUST REAPPLY AND IS NOT GUARANTEED ACCEPTANCE IN ANY SUBSEQUENT SELECTION PROCESS.

Please Type or Print Clearly

PBCC STUDENT ID _____

2. NAME _____
 LAST FIRST MIDDLE/MAIDEN SUFFIX

Please list all previous names under which documents may be sent _____

3. LOCAL ADDRESS _____
 NUMBER AND STREET ADDRESS CITY

_____ COUNTY (or PROVINCE) STATE ZIP CODE

4. HOME TELEPHONE () _____ 5. WORK TELEPHONE () _____

OTHER - CELL () _____

6. EMAIL ADDRESS _____ @ _____ 7. DATE OF BIRTH _____ - _____ - _____
 Month Day Year

8. **TRANSCRIPTS**—Official transcripts must be sent directly to PBCC from issuing school/agency. All applicants, including college transfers, must submit high school or GED transcripts directly to PBCC. College transfer students must submit official transcripts from all colleges in which applicant has enrolled.

9. **HIGH SCHOOL GRADUATE?** Yes No **or** **GED?** Yes No

10. **COLLEGE/UNIVERSITY**

List all postsecondary colleges or universities you have enrolled.

Omission of any constitutes falsification of records and voids application.

NAME OF INSTITUTION	CITY/STATE	DATES	DEGREE	CREDITS

To list more colleges/universities, attach a separate page.

11. Are you currently enrolled at PBCC? Yes No

12. Are you currently enrolled at another college/university? Yes No

13. Have **PLACEMENT TEST SCORES** which meet minimum requirements for entrance into college-level English, reading, and mathematics been submitted to PBCC? Yes No

Or

REQUIRED REMEDIAL WORK (include any & all necessary college preparatory courses completed)? Yes No

Or

TRANSFER COLLEGE-LEVEL

English and mathematics courses (minimum of 3 credits each) been successfully completed (C or higher)? Yes No

14. **FLORIDA RESIDENT?** Yes No

15. **Have you taken the Health Occupations Entrance Test (HOBET)?** Yes No

If yes, did your score have an overall average of 45 (a minimum overall average of 45 is required)?

Yes No Date of Testing _____ Score _____

NAME _____
 LAST FIRST MIDDLE/MAIDEN SUFFIX

16. Do you currently work in a health related field? Yes No

If yes, how long? _____

Employer _____ Employer's Telephone _____

Position Title _____ Duties _____

Letter must be submitted – see page 5 - Work Experience including job duties and extent of experience.

17. COURSE - ALL courses must be completed with a grade of C or higher before the program start date. Also, **ALL** science courses completed with a grade of C or higher within 10 years of the application deadline date? Yes No

	Completed	Institution	Term (expected)	Grade	Sem. Hr. Credit
BSC2085 Anatomy/Phys I (Lecture)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____	_____	_____
BSC2085L Anatomy/Phys I Lab	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____	_____	_____
BSC2086 Anatomy/Phys II (Lecture)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____	_____	_____
BSC2086L Anatomy/Phys II Lab	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____	_____	_____
CGS1100 Microcomputer Applications	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____	_____	_____
HSC2531 Medical Terminology	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____	_____	_____

18. HEALTH OCCUPATION CERTIFICATES – ALL Certificates must be complete. Expired certificates will not be accepted. All certificates are available through our continuing education department. All certificates must be completed before the program start date.

	Completed	Institution /Issuer	Expiration
CPR for Healthcare providers – American Heart Association	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
4 Hour HIV/AIDS	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
1 Hour Domestic Violence	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____

19. CUMULATIVE GRADE POINT AVERAGE (GPA) _____

I understand that falsification or omission of any information may result in my dismissal or rejection from the College. I have read and understand all the instructions pertaining to the Medical Information Coder/Biller program as explained in the Medical Information Coder/Biller program application packet.

 SIGNATURE OF APPLICANT DATE