HEALTH INFORMATION TECHNOLOGY,
ASSOCIATE OF APPLIED ARTS AND
SCIENCES

ST. CLAIR COUNTY COMMUNITY COLLEGE

2015-2016 Academic Year
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NOTICE OF NONDISCRIMINATION POLICY

It is the policy of St. Clair County Community College that no person shall, on the basis of race, color, national origin, sex, handicap, age, religion, creed or marital status be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity, and in employment.

Any questions concerning Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, which prohibits discrimination on the basis of sex, or any inquiries related to Section 504 of the Rehabilitation Act of 1973, which prohibits discrimination on the basis of handicap, should be directed to:

Director of Human Resources and Labor Relations
Title VI, Title IX and Section 504 Coordinator
St. Clair County Community College
323 Erie Street, PO Box 5015
Port Huron, MI 48061-5015

810.989.5536
Or
800.553.2427
WELCOME

No one can ever reach to excellence in any one art or profession without having passed through the slow and painful process of study and preparation.

~Horace

Congratulations! You have chosen to pursue a career in Health Information Management (HIM). Many have made the same decision, and have gone on to have extremely fulfilling careers. You, too, will find a huge number of possibilities, and many prospects for continued growth.

The HIM field is facing a crisis in our country. Healthcare reform, digitization of health information, new coding nomenclatures, mandated Health Information Exchange programs and aging Baby Boomers are all contributing to a major shortage of HIM professionals in the next few years. Many veterans of the field feel we are only seeing the tip of the iceberg. This allows for many opportunities for different personalities, interests and education levels.

However, it will not be easy. As the quote above says, you can’t have excellence without study and preparation, and at times it will be painful. But, you can, and will, survive the process! The staff of the HIT program and SC4 is here to assist you in attaining success. This handbook has been designed to assist you through your journey in the HIT program. Understanding the policies and expectations of the program are vital to your success as a student. Keep in mind, it is your responsibility to know, understand and follow the guidelines in this handbook, as well as information in the SC4 catalogue, SC4 Student Handbook and the SC4 website.

Enjoy your HIT adventure!!

Erica L. Jordan, RHIA
Director, Health Information Technology Program
St. Clair County Community College
INTRODUCTION

ADMINISTRATION AND FACULTY

- **Director**
  - Erica L. Jordan, RHIA
    - eljordan@sc4.edu
    - 810.989.5507
    - ATC, Room 124-E

- **Faculty**
  - Michelle Kelch
    - mlkelch@sc4.edu
    - 810.989.5859
    - ATC, Room 124-D

ACCREDITATION

The Health Information Technology Associate Degree program is in Candidacy Status, pending accreditation review by the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM).

Additional information concerning program accreditation may be viewed at [www.cahiim.org](http://www.cahiim.org).

MISSION AND GOALS

The St. Clair County Community College Health Information Technology program is dedicated to supporting the mission and vision of the College. Health Information Technology staff and faculty strive to equip students with the tools to become highly-qualified, competent, knowledgeable and ethical Health Information Management professionals who will support a revitalization of our community. It is our goal to form committed partnerships with educators and healthcare providers in the Southeastern Michigan area to provide students with a relevant and robust education in the Health Information Management field, and produce students who will meet the needs of the global health community.
The Associate Degree in Health Information Technology (HIT) prepares students to enter the Health Information Management profession. Upon successful completion of the program, graduates will be prepared for employment in entry-level positions in a variety of healthcare settings, including acute care hospitals, skilled nursing facilities, physician practices, rehabilitation centers, clinics, private consulting firms and veterinary medicine facilities. There are also many opportunities in the non-traditional setting such as law firms, insurance companies and pharmaceutical companies. Graduates may be employed in a variety of roles, including coder, electronic health record specialist, decision support specialist, regulatory/compliance specialist and release of information specialist, to name a few. Graduates completing this program are also prepared to pursue their Bachelor of Science Degree in Health Information Management, if so desired. This is a two year program and includes both liberal arts and HIT courses. However, a student may choose to complete any of the liberal arts courses prior to admission to the HIT program.

PROGRAM LENGTH

The Saint Clair County Community College Health Information Technology program is a full time, two year degree program which, when successfully completed, results in the student receiving an Associate of Applied Science degree.

PROGRAM PROGRESSION

In order to progress successfully through the Health Information Technology program, student must:

- Achieve a 2.0 ('C') or better in all core Health Information Technology courses
- Achieve a ‘Satisfactory’ rating for all Professional Practice Externships
• Take courses in the order prescribed in the model schedule

**TIME MANAGEMENT**

Disciplined time management will be imperative for the successful completion of the Saint Clair County Community College Health Information Technology program. Each student’s success will be directly dependent upon his/her level of personal commitment. A general rule is that for each credit hour you take, you should expect to spend, at a minimum, two (2) to three (3) hours per week preparing for class.

**COMPETENCY REQUIREMENTS FOR GRADUATION**

**SC4 GENERAL EDUCATION COMPETENCY REQUIREMENTS**

General education competencies are part of each course offered at SC4, preparing their students to be good citizens, employees, and lifelong learners. Below is a listing of the general education competencies and the definitions:

- Computer Literacy - is the ability to use a computer at a level appropriate to students, academic and career needs.
- Critical thinking - is an active process of carefully examining our own thinking and the thinking of others.
- Global Awareness - is a recognition of the importance of the global perspective in order to understand the diversity of cultures and world nations. Culture is defined as a complex whole that includes knowledge, belief, art, law, music, language, medicine, economics, customs, and any other capabilities or habits acquired by individuals as members of the society.
- Government and the Political Process - is the study of the theory, organization and functioning of government and political systems.
- Mathematics - is the logical study of shape, arrangement, quantity and space, and their interrelationships, applications, generalizations and abstractions.
- Oral Communication - is the process of effectively transmitting and receiving ideas and information in a variety of situations.
- Writing - is the process of effectively selecting, developing, arranging and revising one’s own ideas and those of others. The process requires students to compose ideas in a variety of written forms for a variety of purposes and audiences.

**HEALTH INFORMATION TECHNOLOGY ENTRY LEVEL COMPETENCIES**

Upon successful completion of the Saint Clair County Community College Health Information Technology program (‘C’ or above), students should be able to demonstrate the following entry-level Health Information Technology competencies:

I. Domain: Health Data Management
   a. Subdomain: Health Data Structure, Content, and Standards
      i. Collect and maintain health data (such as data elements, data sets, and databases).
ii. Conduct analysis to ensure documentation in the health record supports the diagnosis and reflects the patient’s progress, clinical findings, and discharge status.

iii. Apply policies and procedures to ensure the accuracy of health data.

iv. Verify timeliness, completeness, accuracy, and appropriateness of data and data sources for patient care, management, billing reports, registries, and/or databases.

b. Subdomain: Healthcare Information Requirements and Standards

i. Monitor and apply organization-wide health record documentation guidelines

ii. Apply policies and procedures to ensure organizational compliance with regulations and standards.

iii. Maintain the accuracy and completeness of the patient record as defined by organizational policy and external regulations and standards.

iv. Assist in preparing the organization for accreditation, licensing, and/or certification surveys.

c. Subdomain: Clinical Classification Systems

i. Use and maintain electronic applications and work processes to support clinical classification and coding.

ii. Apply diagnosis/procedure codes according to current nomenclature.

iii. Ensure accuracy of diagnostic/procedural groupings such as DRG, MSDRG, APC, and so on.

iv. Adhere to current regulations and established guidelines in code assignment.

v. Validate coding accuracy using clinical information found in the health record.

vi. Use and maintain applications and processes to support other clinical classification and nomenclature systems (ex. DSM IV, SNOMED-CT).

vii. Resolve discrepancies between coded data and supporting documentation.

d. Subdomain: Reimbursement Methodologies

i. Apply policies and procedures for the use of clinical data required in reimbursement and prospective payment systems (PPS) in healthcare delivery.

ii. Apply policies and procedures to comply with the changing regulations among various payment systems for healthcare services such as Medicare, Medicaid, managed care, and so forth.

iii. Support accurate billing through coding, chargemaster, claims management, and bill reconciliation processes.

iv. Use established guidelines to comply with reimbursement and reporting requirements such as the National correct Coding Initiative.

v. Compile patient data and perform data quality reviews to validate code assignment and compliance with reporting requirements, such as outpatient prospective payment systems.

vi. Ensure accuracy of diagnostic/procedural groupings such as DRG, APC, and so on.

II. Domain: Health Statistics, Biomedical Research, and Quality Management

a. Subdomain: Healthcare Statistics and Research

i. Collect, maintain, and report data for clinical indices/databases/registries to meet specific organization needs such as medical research and disease registries.

ii. Collect, organize, and present data for quality management, utilization management, risk management, and other related studies.

iii. Comprehend basic descriptive, institutional, and healthcare vital statistics.
b. Subdomain: Quality Management and Performance Improvement
   i. Abstract and report data for facility-wide quality management and performance improvement programs.
   ii. Analyze clinical data to identify trends that demonstrate quality, safety, and effectiveness of healthcare.

III. Domain: Health Services Organization and Delivery
   a. Subdomain: Healthcare Delivery Systems
      i. Apply current laws, accreditation, licensure, and certification standards related to health information initiatives form the national, state, local, and facility levels.
      ii. Differentiate the roles of various providers and disciplines throughout the continuum of healthcare and respond to their information needs.
   b. Subdomain: Healthcare Privacy, Confidentiality, Legal, and Ethical Issues
      i. Adhere to the legal and regulatory requirements related to the health information infrastructure.
      ii. Apply policies and procedures for access and disclosure of personal health information.
      iii. Release patient-specific data to authorized users.
      iv. Maintain user access logs/systems to track access to and disclosure of identifiable patient data.
      v. Apply and promote ethical standards of practice.

IV. Domain: Information Technology & Systems
   a. Subdomain: Information and Communication Technologies
      i. Use technology, including hardware and software, to ensure data collection, storage, analysis, and reporting of information.
      ii. Use common software applications such as spreadsheets, databases, word processing, graphics, presentation, e-mail, and so on in the execution of work processes.
      iii. Use specialized software in the completion of HIM processes such as record tracking, release of information, coding, grouping, registries, billing, quality improvement, and imaging.
      iv. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.
      v. Participate in the planning, design, selection, implementation, integration, testing, evaluation, and support for EHRs.
   b. Subdomain: Data, Information, and file Structures
      i. Apply knowledge of database architecture and design (such as data dictionary) to meet departmental needs.
   c. Subdomain: Data Security
      i. Apply confidentiality and security measures to protect electronic health information.
      ii. Protect data integrity and validity using software or hardware technology.
      iii. Apply departmental and organizational data and information system security policies.
      iv. Use and summarize data compiled from audit trails and data quality monitoring programs.
V. Domain: Organizational Resources
   a. Subdomain: Human Resources
      i. Apply the fundamentals of team leadership.
      ii. Participate in and work in teams and committees.
      iii. Conduct orientation and training programs.
      iv. Monitor and report staffing levels and productivity standards for health information functions.
      v. Use tools and techniques to monitor, report, and improve processes.
      vi. Comply with local, state, and federal labor regulations.
      i. Make recommendations for items to include in budgets and contracts.
      ii. Monitor and order supplies needed for work processes.
      iii. Monitor coding and revenue cycle processes.
      iv. Recommend cost-saving and efficient means of achieving work processes and goals.
      v. Contribute to work plans, policies, procedures, and resource requisitions in relation to job functions.

BEHAVIOR

MODEL SCHEDULE
# Pre-Requisites to Program Admission

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Credits</th>
<th>Hours</th>
<th>Contact Hours</th>
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<tbody>
<tr>
<td>BIO 271</td>
<td>Human Anatomy/Physiology I</td>
<td>4</td>
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<tr>
<td>HE 102*</td>
<td>Medical Terminology</td>
<td>2</td>
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<tr>
<td>CIS 115 CL</td>
<td>Microcomputer Applications</td>
<td>4</td>
<td>4</td>
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</tr>
<tr>
<td>OA 101**</td>
<td>Personal Keyboarding on Microcomputers</td>
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<td>1</td>
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<td>ENG 101 WR</td>
<td>English Composition I</td>
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## 1st Semester - Fall

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<th>Credits</th>
<th>Hours</th>
<th>Contact Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIT 101</td>
<td>Introduction to Health Information Tech</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>BIO 272</td>
<td>Human Anatomy/Physiology II</td>
<td>4</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>HE 110</td>
<td>Pharmacology for Allied Health</td>
<td>2</td>
<td>2</td>
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</tr>
<tr>
<td>HIT 102 CT</td>
<td>Legal Aspects of HIT</td>
<td>3</td>
<td>3</td>
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<tr>
<td></td>
<td><strong>Semester Totals</strong></td>
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<td><strong>14</strong></td>
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## 2nd Semester - Winter

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<tr>
<td>BIO 280</td>
<td>Pathophysiology</td>
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<td>HIT 103</td>
<td>ICD-9-CM Coding</td>
<td>4</td>
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<tr>
<td>HIT 104 CT GA</td>
<td>Ethical Challenges in HIT</td>
<td>2</td>
<td>2</td>
<td></td>
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<tr>
<td>HIT 106</td>
<td>Health Information Technology II</td>
<td>4</td>
<td>4</td>
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<td><strong>Semester Totals</strong></td>
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## 3rd Semester - Fall

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<td>HIT 105</td>
<td>CPT/HCPCS Coding</td>
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<td>HIT 210</td>
<td>Advanced ICD-9-CM Coding</td>
<td>4</td>
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<tr>
<td>HIT 202 OC</td>
<td>Quality Management &amp; Regulatory Compliance</td>
<td>4</td>
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<tr>
<td>HIT 205</td>
<td>Health Informatics</td>
<td>4</td>
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<td><strong>Semester Totals</strong></td>
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## 4th Semester - Winter

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<td>Introduction to Political Science</td>
<td>3</td>
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<td>HIT 203</td>
<td>Reimbursement Methodologies</td>
<td>3</td>
<td>3</td>
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<tr>
<td>HIT 206 WR</td>
<td>Management for HIT</td>
<td>3</td>
<td>3</td>
<td></td>
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<tr>
<td>HIT 201</td>
<td>ICD-10-CM &amp; ICD-10-PCS Coding</td>
<td>3</td>
<td>3</td>
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<tr>
<td>HIT 204</td>
<td>HIT PPE</td>
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<td><strong>Semester Totals</strong></td>
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**HEALTH INFORMATION TECHNOLOGY CORE COURSE DESCRIPTIONS**
HIT 101 INTRODUCTION TO HEALTH INFORMATION TECHNOLOGY

This is the first course in the Health Information Technology (HIT) program, and is designed to introduce the student to the HIT profession and record keeping practices in healthcare. Emphasis will be placed on the role HIT professionals play in healthcare organizations, as well as health information infrastructure, record content in both electronic and paper records, documentation requirements, healthcare data sets, HIT-related taxonomies and an introduction to technology in HIT. Due to the foundational nature of the courses in the HIT program, courses are to be taken in the order described in the model schedule offered.

Prerequisite: Acceptance to the Health Information Technology Program
4 credits = 3 lecture, 1 laboratory

HIT 102 LEGAL ASPECTS OF HEALTH INFORMATION TECHNOLOGY

This course will examine and analyze the roles of legislature, the court system and attorneys in healthcare. Special emphasis will be placed on the partnership of these roles with the Health Information Technology (HIT) professional. This course will also highlight the many legal issues the HIT professional faces today by reviewing past and recent legislative and case law. Areas discussed will include legal vocabulary, the Health Insurance Portability and Accessibility Act (HIPAA), the Health Information Technology for Economic and Clinical Health (HITECH) Act, health information as evidence, confidentiality and security issues, release of health information, retention of health records and the Legal Health Record. Due to the foundational nature of the courses in the HIT program, courses are to be taken in the order described in the model schedule offered.

Prerequisite: Acceptance to HIT program
3 credits = 3 lecture

*HIT 103 ICD-9-CM CODING

Coding This course will introduce the student to International Classification of Diseases, Ninth Revision, Clinical Modification diagnostic and procedural coding. Inpatient and outpatient coding rules, regulations and conventions will be addressed. Emphasis will be placed on both manual and computerized coding operations. Due to the foundational nature of the courses in the Health Information Technology program, courses are to be taken in the order described in the model schedule offered.

Prerequisite: HIT 101, BIO 272 and HE 110
4 credits = 2 lecture, 2 laboratory

HIT 104 ETHICAL CHALLENGES IN HEALTH INFORMATION TECHNOLOGY

This course will introduce the student to the many ethical dilemmas facing Health Information Technologists today. Emphasis will be placed on issues surrounding professional ethics, fraud and abuse, medical code assignment, electronic medical records, information exchange, genetic testing, end-of-life decisions,
research and decision support and management. Due to the foundational nature of the courses in the Health Information Technology program, courses are to be taken in the order described in the model schedule offered.

Prerequisite: HIT 101 and HIT 102
2 credits = 2 lecture

**HIT 105 CPT/HCPCS CODING**

This course will introduce the student to Current Procedural Terminology and Healthcare Common Procedure Coding System procedural coding. Rules, regulations and conventions will be addressed. Emphasis will be placed on both manual and computerized coding operations. Due to the foundational nature of the courses in the Health Information Technology program, courses are to be taken in the order described in the model schedule offered.

Prerequisite: HIT 103
3 credits = 1.5 lecture, 1.5 laboratory

**HIT 106 Health information technology II**

This course will continue to introduce the student to aspects of the Health Information Technology profession. Emphasis will be placed on release of information practices, clinical classifications and terminologies, forms management and design, advanced documentation, transcription management, registries and advanced statistics. Due to the foundational nature of the courses in the HIT program, course are to be taken in the order described in the model schedule.

Prerequisite: HIT 101
4 credits = 3 lecture, 1 laboratory

**HIT 201 ICD-10-CM & ICD-10-PCS CODING**

This course will introduce the student to International Classification of Disease, 10th Revision, Clinical Modification and International Classification of Diseases, 10th Revision, Procedure Coding System diagnostic and procedural coding. Inpatient and outpatient rules, regulations and conventions will be both be addressed. Emphasis will be placed on both manual and computerized coding operations. Due to the nature of the courses in the Health Information Technology program, courses are to be taken in the order described in the model schedule offered.

Prerequisite: HIT 210
3 credits = 2 lecture, 1 laboratory

**HIT 202 QUALITY MANAGEMENT & REGULATORY COMPLIANCE**

In this course, students will be exposed to the quality management methodologies currently used in healthcare, with emphasis placed on the role of the Health Information Technologist. Areas covered will
include regulatory and oversight agencies, compliance surveys, quality management reporting, data analysis, statistics, utilization management, risk management, coding compliance, medical staff credentialing and the Meaningful Use requirement mandated by the federal government. This course will include a major group project to include class presentation. Due to the nature of the courses in the Health Information Technology program, courses are to be taken in the order described in the model schedule offered.

Prerequisite: HIT 103 and HIT 104 and HIT 106
4 credits = 3 lecture, 1 laboratory

HIT 203 REIMBURSEMENT METHODOLOGIES

In this course, the student will be exposed to both the hospital and outpatient billing processes, including concepts related to Revenue Cycle Management, Coding Compliance, third party payer audits and claims submission. Emphasis will be placed on manual and electronic claims submission, with hands on experience. Due to the nature of the courses in the Health Information Technology program, courses are to be taken in the order described in the model schedule offered.

Prerequisite: HIT 105 and HIT 202 and HIT 210
3 credits = 2 lecture, 1 laboratory

HIT 204 HEALTH INFORMATION TECHNOLOGY PROFESSIONAL PRACTICE EXTERNSHIP

During this externship experience, the student will be exposed to an actual Health Information Management (HIM) department office setting. Students will have the opportunity to work with individuals currently in the HIM field, and will have the opportunity to apply the Health Information Technology (HIT) theory learned in previous HIT courses. Due to the nature of the courses in the HIT program, courses are to be taken in the order described in the model schedule offered.

Prerequisite: HIT 202 and HIT 205 and HIT 210
2 credits (2 credits + 128 externship hours) = 2 laboratory

HIT 205 HEALTH INFORMATICS

This course introduces the student to information technology in healthcare. Discussion will include hardware, database architecture and both internet and intranet applications in Health Information Management (HIM), data security methodologies, data storage, data imaging and common software in HIM. Emphasis will be placed on the planning, design, selection, implementation, integration, testing, evaluation and support for electronic medical records. Due to the nature of the courses in the Health Information Technology program, courses are to be taken in the order described in the model schedule offered.

Prerequisite: HIT 106
HIT 206 MANAGEMENT FOR HEALTH INFORMATION TECHNOLOGISTS

In this course, students will explore management processes utilized by Health Information Technologists. Emphasis will be on management of Human Resources and operations, as well as budgeting and operational financial management. Through the use of role-playing, the concept of management vs. leadership will also be introduced. Project management and team leadership concepts will also be introduced. Due to the nature of the courses in the Health Information Technology program, courses are to be taken in the order described in the model schedule offered.

Prerequisite: HIT 202 and HIT 210
3 credits = 2 lecture, 1 laboratory

*HIT 210 ADVANCED ICD-9-CM CODING

This course is a continuation of HIT 103 ICD-9-CM Coding. The student will develop advanced coding ICD-9-CM coding skills, which will include grouping analysis, coding quality analysis, audit processes, and defense and resolution of documentation discrepancies. Due to the foundational nature of the courses in the HIT program, courses are to be taken in the order described in the model schedule.

Prerequisite: BIO 280 and HIT 103 and HIT 106
4 credits = 2 lecture, 2 laboratory

* Due to the forthcoming changes in nationally utilized coding classification systems, SC4 is scheduled to make the change from ICD-9-CM to ICD-10CM/PCS in the winter semester of 2016. Therefore, the model schedule will change. However, this will not impede any student’s ability to complete the program in the allotted time frame of two years.

ADMISSION REQUIREMENTS

Admission to the Saint Clair County Community College does not automatically qualify a student for admission to the health Information Technology program.

Admission requirements for the Health Information Technology program include:

1. Meeting current requirements and completing all procedures for admission to SC4.

2. Achieving placement into MTH 110 Intermediate Algebra by assessment testing or ACT scores; or completion of MTH 102 with appropriate grade.

3. Completing the following courses within the last five (5) years with a 2.0 ('C') or better:
a. BIO 271 Human Anatomy and Physiology I OR BIO 160 Anatomy and Physiology for Health Care Professionals/BIO 272 Human Anatomy and Physiology II combination
b. CIS 115 Microcomputer Applications
c. HE 102 Medical Terminology (preferred) OR OA 280(A) Medical Terminology & Transcription

4. Completing OA 101 Personal Keyboarding for Microcomputers with a 2.0 (‘C’) or better.

5. Submit a secondary application for admission to an SC4 Allied Health Program.

ACADEMIC POLICIES

ACADEMIC MISCONDUCT

The student is responsible for his/her own learning. The Health Information Technology (HIT) faculty is available to assist and support each student in mastering the competencies of the HIT program. The faculty believes academic integrity is essential to the development of professional conduct. Students engaging in acts of academic dishonesty such as cheating or plagiarism, compromise the culture of integrity which defines the HIT profession. Students who choose to violate academic integrity erode the foundation of trust between the students, faculty, clients and community they serve.

St. Clair County Community College (SC4) considers academic honesty to be essential to all academic performance. The policy of the college states that instances of academic dishonesty will be treated as serious offenses of the Student Code of Conduct. Students involved in activities such as cheating and/or plagiarism will be subject to disciplinary action up to and including dismissal.

- **Definition of Plagiarism:** Plagiarism is the appropriation of language, thoughts or ideas of another author and claiming that as one’s own. Plagiarism is work not produces by the student, or work that does not credit borrowings from the original source(s).

- **Definition of Cheating:** Cheating can be, but is not limited to, a student using electronic technology, notes or other written materials not permitted by the instructor; looking at other students’ papers without the instructor’s permission; requesting answers from other students; or working with other students when independent work is required. Situations where cheating may occur are during tests, exams, quizzes or other similar methods of evaluation.

Cheating is further defined in the HIT department as fraud, deceit or dishonesty in any academic or clinical activity. It may include, but is not limited to:

- Copying, or attempting to copy, from others during testing or for an assignment;
- Communicating any testing information to, or receiving such information from, another person prior, during or following an exam or test;
- Using, attempting to use or assisting others in using materials that are prohibited or
inappropriate in the context of the assignment or examination in question, such as: books, prepared answers, written notes, concealed information or web sites (including cutting and pasting from web sites);

- Copying the work of another person, including a peer or an author of a published book, pamphlet or article, and turning it in as one’s own. Quotations, statistics and other factual data from someone else work must be annotated as such by documentation of the authoritative source;
- Allowing others to do one’s assignment or a portion of one’s assignment; or using a commercial term paper service;
- Altering an assignment after it has been completed or altering recorded grades;
- Resubmitting a previously written assignment for a new course without the permission of the prior and current instructor;
- Misrepresenting performance or falsifying documentation related to the performance of any activity required to complete course/curriculum objectives

Cheating will not be tolerated in class. You are not to share test questions, class/simulation activity answers, quiz information, etc. All work submitted must be original, and any sources utilized must be appropriately referenced. Violation of academic integrity codes will result in a grade of ‘E’ for the course, as well as dismissal from the HIT program. Students dismissed for academic integrity violations will be ineligible for any future readmission to the SC4 HIT program.

CREDIT FOR WORK EXPERIENCE

Students may request credit for work experience for PPEs only. Students are required to submit the following six weeks prior to the beginning of the semester in which they will be completing the PPE:

1. Letter of request
2. Resume
3. Current and past job descriptions and detail of all duties
4. Notarized letter on facility letterhead from their employer validating the resume, job description and detail of duties

Once the required documents have been reviewed, credit may or may not be granted. In the event credit is granted, students will be required to pay tuition for the PPE. If a student possesses a current CCS credential and is working in the inpatient coding arena, this will be accepted in lieu of any coding aspects of PPEs. Proof of credentials is required.

GRADE APPEAL PROCESS

Any appeal for a change of grade, other than a final grade, must be initiated in the semester during which the student is enrolled in the course. Appeals of a final grade for the semester must be made prior to the last day of classes of the subsequent semester with the option (student) of excluding spring and summer sessions. There will be no formal grade appeals during the week of final exams or during semester breaks. Grade appeals occurring during the spring and summer sessions will adhere to the process with time lines
to be established by the Dean of Students with reasonable flexibility as needed. The only grounds for a student grade appeal shall be as follows:

1. The grade is allegedly based on an error in calculation.
2. The grade assigned allegedly did not follow the grading criteria as stated in the course syllabus.

It shall be the responsibility of the student to prove that the grade is incorrect or unjustified. A student wishing to file a grade appeal begins by contacting the Dean of Students for information. Procedures for the formal appeal are available in the Student Success Center, room 124, Acheson Technology Center, and online on the SC4 website (under Student Grade Appeal Process) at www.sc4.edu/consumerinformation.

GRADE CHANGE

All grade change requests must be initiated within one year following the end of the course(s) for which the grade was officially recorded. No grade change requests will be accepted following the expiration of that period of time.

GRADING FOR PROFESSIONAL PRACTICE EXTERNSHIPS

S = Satisfactory  
U = Unsatisfactory

Grading for PPEs is pass or fail. This will be determined through completion of all assignments and evaluation from clinical site coordinators.

GRADING SCALE FOR HIT CORE LECTURE/LABORATORY COURSES

<table>
<thead>
<tr>
<th>Grade</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>96% - 100%</td>
</tr>
<tr>
<td>A-</td>
<td>94% - 95%</td>
</tr>
<tr>
<td>B+</td>
<td>92% - 93%</td>
</tr>
<tr>
<td>B</td>
<td>89% - 91%</td>
</tr>
<tr>
<td>B-</td>
<td>87% - 88%</td>
</tr>
<tr>
<td>C+</td>
<td>84% - 86%</td>
</tr>
<tr>
<td>C</td>
<td>80% - 83%</td>
</tr>
<tr>
<td>C-</td>
<td>78% - 79%</td>
</tr>
<tr>
<td>D+</td>
<td>76% - 77%</td>
</tr>
<tr>
<td>D</td>
<td>74% - 75%</td>
</tr>
<tr>
<td>D-</td>
<td>73%</td>
</tr>
<tr>
<td>E</td>
<td>72% and below</td>
</tr>
</tbody>
</table>

In order to pass any one of these courses, a ‘C’ must be obtained. To attain a ‘C’, the percentage must be a whole number. Partial percentages will not be rounded up. For example, in order to obtain a ‘C’, the student must achieve no less than 80%; therefore 79.8% is not acceptable.

INCOMPLETE GRADES

All requests for incomplete grades will be reviewed by the instructor and HIT administration, and will only be granted (1) if the student qualifies in according to the incomplete grade policy outlined in the SC4 catalogue AND (2) in the event of an extreme emergency (defined under ‘Emergencies’ in this section). Students receiving an incomplete grade will not be eligible to continue in the HIT program until such time
the grade is changed from incomplete to a satisfactory grade in the SC4 records. The purpose for this policy is to ensure student success. As the HIT core courses are foundational in nature (meaning they build upon one another), students receiving an incomplete grade in a course will not be sufficiently prepared to enter the course HIT core courses in the following semester.

STUDENT COMPLAINT PROCESS

The following guidelines have been established to provide students at St. Clair County Community College with a process for resolving concerns related to the academic environment and/or support services. When a concern arises that is covered by college policy, including sexual harassment, racial or sex discrimination, or those arising under the Americans with Disabilities Act, the issue should be referred to the Office of Human Resources. All other will be handled in the following manner:

1. The student will meet with the faculty or staff member involved to attempt to resolve the concern.
2. If a satisfactory resolution has not been reached, the student has the option to consult with the appropriate department chair or supervisor.
3. If the issue has not been satisfactorily resolved with the department chair or supervisor, the student has the option to meet with the next appropriate supervisor for final resolution. Academic environment matters should be addressed to the Vice President of Academic Services and other matters to the Dean of Instruction.
4. The student must provide specific documentation of the resolution efforts and to support issues and concerns related to the complaint.

TRANSFER OF COLLEGE CREDIT

The SC4 HIT program may accept credit from HIT accredited programs at other institutions. Students are to submit a copy of transcripts, which will be evaluated along with course descriptions, by HIT administration. The criteria used will be:

1. Course description
2. Grade received (must be no less than a 2.0 or ‘C’)
3. Course(s) completed within the last five (5) years

Review of credit from other colleges is not a guarantee of acceptance at SC4, and additional assessment may be required. An example of additional assessment is completing a final for the course in question, completing a laboratory project or requiring the student to audit the class.
HEALTH INFORMATION TECHNOLOGY PROGRAM POLICIES

ACCOUNTABILITY PROCESS

Personal accountability and integrity are paramount to each Health Information Management professional. Therefore, the Health Information Technology Program at St. Clair County Community College has put in place a process by which students are held accountable for their own actions. The process is as follows:

- **Step One – Verbal Warning**
  - This is a communication between an instructor and a student. The instructor will discuss the intent to issue a verbal warning with the Director of Health Information Technology. This will be conducted in a private setting, and will address any unacceptable behavior displayed by the student. This should be used as an opportunity to coach the student in ways to correct the behavior. This will be documented by the instructor, and submitted to the Director of the Program. The documentation will be placed in the student’s Health Information Technology file. Examples of times when verbal warning would be appropriate include, but are not limited to:
    - Disturbing other students and faculty in class or laboratory
    - Failure to give faculty current accurate information about a situation or assignment in course either by intent or omission
    - Being ill-prepared for class
    - Inappropriate personal appearance

- **Step Two – Written Warning**
  - This is a formal warning issued to the student using the Student Accountability Process form. The instructor will discuss the intent to issue a written warning to a student with the Director of the Health Information Technology program. An appointment will be scheduled with the student, the instructor and the Director. The written warning will be issued at that time. A copy of the written warning (Fig. 1) will be given to the student, the original will be placed in the student’s Health Information Technology file. Examples of times when written warning would be appropriate include, but are not limited to:
    - Habitually disturbing other students and faculty in class or laboratory
    - Habitually being ill-prepared for class
    - Habitually failing to give faculty current accurate information about a situation or assignment in course either by intent or omission
    - Habitually missing assignment/project deadlines
    - Habitual inappropriate personal appearance
    - Academic dishonesty
• Failure to meet PPE requirements/standards

• Step Three - Written Probation Notice

  o This is formal notification to a student that s/he has been placed on probation with the Health Information Technology program. The instructor will discuss the situation with the Director of the Health Information Technology program. The decision to place a student on probation lies with the Director of Health Information Technology. An appointment will be scheduled with the student, the instructor and the Director. The probation notice will be issued at that time. A copy of the probation notice will be given to the student, the original will be placed in the student’s Health Information Technology file.

  o The probationary period will last 16 academic weeks. This is sufficient time to allow the student to correct the undesirable behavior. If, at any time during the 16 weeks, it is necessary to issue a warning of any kind, the student will be dismissed from the Health Information Technology program. The instructor will discuss the intent to issue a warning with the Director of Health Information Technology. An appointment will be scheduled with the student, the instructor and the Director. At that time, the student will be dismissed from the program. Examples of times when written probation notice would be appropriate include, but are not limited to:

    ▪ Continued display of behavior for which the student has received a written warning
    ▪ Violations of AHIMA Code of Ethics or AHIMA Standards of Ethical Coding
    ▪ Testing positive for alcohol or other drugs; or declining to be tested (as required for PPE placement)
    ▪ Violations of the Drug and Alcohol policy as outlined in the SC4 Catalogue

  o If, at the end of the probationary period, the student has sufficiently corrected the undesirable behavior, s/he will receive written release of probationary status, a copy of which will be placed in the student’s Health Information Technology file. Following this, if necessary, the accountability process would begin from Step One.
# Accountability Written Warning/Probation Notification Form (fig. 1)

St. Clair County Community College  
Health Information Technology Program  
Accountability Written Warning/Probation Notification Form (fig. 1)

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>Student Number:</th>
<th>Action Type:</th>
</tr>
</thead>
</table>
|               |                 | ☐ Written Warning  
|               |                 | ☐ Probation Notification |

<table>
<thead>
<tr>
<th>Course:</th>
<th>Course Title:</th>
<th>Instructor:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date of Infraction/Violation/Incident:</th>
<th>Time of Infraction/Violation/Incident:</th>
<th>Location of Infraction/Violation/Incident:</th>
</tr>
</thead>
</table>

Instructor Description of Infraction/Violation/Incident

If more space is needed, please use back of form:
ATTENDANCE

All HIT students are expected to attend all lectures, labs and PPEs, and they are expected to be on time. Any routine medical or dental appointments for students or their family members are to be scheduled outside of any HIT course time, including lecture, lab and PPE. Policies for each HIT section are outlined below:

2. Classroom lectures
   a. Absences
      i. Students are to email instructors prior to the beginning of class if they will not be attending.
      ii. Students are responsible for obtaining any assignments or handouts for the missed class.
      iii. Students missing more than two (2) classes during an HIT course in a semester may be dismissed from the HIT program.
   b. Tardiness
i. Students are to arrive on time, and be prepared to begin class at the appointed time.
ii. Students tardy more than five (5) times during an HIT course in a semester may be dismissed from the HIT program.

3. Laboratory
   a. Absences
      i. Students are to email instructors prior to the beginning of lab if they will not be attending.
      ii. Students missing more than two (2) labs in an HIT course in a semester may be dismissed from the HIT program.

4. Professional Practice Externships
   a. Absences
      i. Absences are not tolerated during PPEs.
      ii. If an absence is for health reasons, a note from a physician is required.
      iii. If an absence is due to an emergency, documentation may be required.
      iv. Students missing more than one (1) PPE without documentation may be dismissed from the HIT program.
   b. Tardiness
      i. Tardiness is absolutely not tolerated for PPEs.
      ii. Students tardy more than two (2) times, without good cause, may be dismissed from the HIT program.

ATTIRE

An integral part of the learning process for HIT students is professionalism. This encompasses attire and personal presentation. While in class on the SC4 campus, students are expected to present themselves in an appropriate manner. Personal cleanliness and hygiene are imperative. Examples of inappropriate personal presentation and attire are strong body odor, unkempt facial hair (for males), unkempt hair, wearing pajamas or pajama bottoms, wearing midriff or halter tops, short shorts or hot pants, etc. Denim, shorts of appropriate length, and t-shirts are appropriate for class and laboratory attendance.

When attending PPEs, in addition to appropriate hygiene outlined above, students are adhere to the facility’s dress code. Failure to do so may result in the student being dismissed from the HIT program. For instance, wearing denim is not appropriate, unless the facility sponsors a ‘Blue Jean’ day. If this is the case, then students may participate and wear appropriate denim. Please remember, you are representing not only yourself, but SC4, your fellow students and the HIT profession.
If you are ever in doubt concerning attire appropriate for the classroom or PPE site, please request advice from the HIT Director or Faculty.

**CHANGE OF NAME, CONTACT INFORMATION OR NAME**

It is imperative you notify HIT administration of any change in address, contact information or name which may occur during your tenure in the HIT program. This information is utilized for program certification tracking purposes, and will be kept confidential.

**COMMUNICATIONS**

As all HIT courses are web-enhanced, all written communications between instructors and students should be via Webstudy internal email (Webstudy will be discussed later in the handbook). In addition, if Webstudy is not accessible to a student, s/he may also utilize the SC4 email system to contact instructors. Both email systems should be checked regularly by students. It is recommended to check your email daily.

**CREDIT FOR CERTIFIED CODING SPECIALISTS OR CERTIFIED CODING ASSOCIATES**

Credit for HIT courses may be received by students having the following credentials:

- CCS – Certified Coding Specialist
- CCS-P – Certified Coding Specialist – Physician-based
- CCA – Certified Coding Associate

Proof of credentials is required. If proof of credentials is received, St. Clair County Community College will give credit for the following courses:

- HIT 103 ICD-9-CM Coding
- HIT 210 Advanced ICD-9-CM Coding
- HIT 105 CPT Coding
- HIT 201 ICD-10-CM & ICD-10-PCS

**NOTE:** Students will be expected to pay tuition for these courses in order to receive credit.

**DISMISSAL**

A student may be dismissed from the HIT program for any of the following reasons:

- Violation of the academic integrity codes outlined in the SC4 and HIT Program handbooks.
- Noncompliance with any SC4, HIT or PPE site policies.
- HIPAA, HITECH or general confidentiality violation.
- Failure to demonstrate professional behavior as outlined in the HIT handbook.
- Failure to adhere to the American Health Information Management Code of Ethics.
• Failure to notify HIT administration of change(s) in criminal background.
• Failure to achieve, and maintain, a 2.0 grade point in any HIT course

ELECTRONIC DEVICES

1. Cell Phones
   a. Are to be placed on silent when entering the classroom, laboratory or PPE settings.
   b. Are only to be answered only in the event of an extreme emergency.
   c. If a call is answered, the student is expected to step out of the room before answering.
   d. No outgoing calls are to be made during class, laboratory or PPE time, except during formal breaks.
   e. No texting is to take place during class, laboratory or PPE time, except during formal breaks.
   f. Are not to be accessed or placed on desk during tests/exams. To do so will be considered academic dishonesty.

2. Laptops, iPads and tablets
   a. May be used for taking notes.
   b. Are not to be used to access websites, or ‘surfing’ during class, laboratory or PPE settings.
   c. Are not to be used for communication during class, laboratory or PPE time, except during formal breaks.
   d. Are not to be accessed or placed on a desk during tests/exams. To do so will be considered academic dishonesty.

3. Recording devices (audio, video, photo)
   a. May be used during class and laboratory time ONLY at the discretion of the instructor.
   b. Are not to be used in the PPE setting under any circumstances. To do so is a violation of the federal Health Information Portability and Accessibility Act.

EMERGENCIES

In the event of an emergency, consideration will be given to students*. However, it is possible that continued absences due to emergency may interfere with meeting the requirements of course(s).

Examples of emergencies include, but are not limited to:

• Personal Illness
• Family Illness
• Death of Immediate Family Member
• Vehicular Accident (day of)
**NOTE:** Documentation is required when final exams are missed due to emergencies.

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### EMPLOYMENT

Whether or not a student maintains full time employment during the HIT program is at the discretion of the student. No special consideration will be made for students engaging in full time employment outside of class. All students will be expected to attend class, labs and PPEs; and to meet all deadlines for assignments.

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### MAKE UP WORK

1. **Homework**
   a. Homework assignments are due at the beginning of each class period. Assignments will be accepted late for one week following the due date. After that week, the assignment will no longer be accepted. For each day an assignment is late, you will lose points. The number of points lost will be determined by the instructor of your course.

   b. It is the student’s responsibility to obtain any missed material due to an absence. Homework assignments will be due at the time stated in the course syllabus, regardless of absences. Exceptions will only be made in the case of an extreme emergency, and will be made at the discretion of the instructor.

2. **Laboratory**
   a. The will be no formal allotted time for lab make up. As instructors must be present for laboratory sessions, students are not guaranteed an opportunity to make up any missed sessions. This will be up to the sole discretion of the instructor.

3. **Tests**
   a. All take-home tests are to be submitted in person at the beginning of class on the due date. If you do not submit these in person at the beginning of class, they will not be accepted. **No exceptions will be made.**

   **THERE WILL BE NO MAKE-UP OPPORTUNITIES FOR TESTS, MIDTERM OR FINAL EXAMS, EXCEPT IN THE EVENT OF AN EXTREME EMERGENCY, AND AT THE DESCRESTION OF THE INSTRUCTOR.**

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### NONCOMPLIANCE WITH POLICIES

Noncompliance with any SC4, HIT or PPE site policies may result in dismissal from the HIT program.

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### POLICY CHANGES

All HIT policies are subject to change at the discretion of HIT program administration and faculty. In the event there is a change in policy, HIT program administration will make every effort to inform current HIT students in writing.
PROFESSIONAL CONDUCT

While preparing to enter the HIT profession, students are required to demonstrate certain expected behaviors. Integrity and honest of the HIT student are crucial in the development of an HIT professional. The HIT profession requires that all members adhere to the AHIMA Code of Ethics, demonstrate accountability and responsibility, and provide for the confidentiality of information. Professional behavior is expected in all components of the HIT program, including classroom and PPE. Students are expected to do the following:

- Adhere to the SC4 College policies as outlined in the catalogue. (www.sc4.edu/catalog)
- Adhere to the HIT Program policies as outlined in this handbook.
- Follow the HIT department chain of command. The student must first discuss any issues or concerns with the faculty teaching that component of the course. If the situation is not resolved, the student may make an appointment to speak with the Director of HIT.
- Be personally accountable for his/her own behavior. Students are expected to conduct themselves professionally, according to the legal and ethical standards of the community and society. This includes, but is not limited to, classroom, PPE sites and online social and networking sites.

Additionally, students should commit themselves to behave in a civil manner that recognizes professional/personal respect/boundaries, and demonstrate concern for the personal dignity, rights and freedoms of every member of the community college. Examples of uncivil behavior include, but are not limited to, chronic absences and/or tardiness, use of electronic devices during class/laboratory/PPE, reading materials during class that do not pertain to class (e.g. newspaper, magazine), chatter with other students during class, sleeping, rudeness, frequent interruptions, monopolizing class time, loudness, obscene or abusive language (verbal or written) and substance abuse. If a student is asked to leave the classroom and/or PPE site because of uncivil behavior, that behavior will be reflected in classroom and/or PPE evaluations. Students are required to seek faculty assistance if they are having difficulty with any aspects of the HIT program.

PROOF OF CREDENTIALS

Requirements for proof of credentials are as follows:

- Students must submit a copy of certificate
- Students must annually submit copies of coding self-assessments
- Students must submit any certificate renewals

REPEATING HIT COURSES

Students may repeat any HIT course one time only. Course sections will be filled on a first come, first served basis. Students will not be allowed to progress in the HIT program until the course in question is completed. If a student withdraws from or fails to obtain the minimum grade of ‘C’ upon second attempt of the course in question, s/he will be dismissed from the HIT program, and will not be eligible for reapplication to the program.
REINSTATEMENT

Any lapse in progression, longer than one fall or winter semester, through the HIT model schedule will require reapplication to the program. Reinstatement criteria are as follows:

1. All pre-admission qualifications must be met at the time of reapplication. For instance, students must have taken BIO 271 within five (5) years of reapplication.
2. Students withdrawing from any HIT course may repeat the course a maximum of one (1) time.
3. Reinstatement must take place within a two (2) year period from the semester of withdrawal. If this does not occur, all HIT courses previously taken must be repeated.

Reinstatement for the following semester is not guaranteed as these applications will be accepted along with all other applications on a first come, first served basis.

STUDENT RECORDS

As a condition of accreditation, the HIT program must report statistical information to the Commission on Accreditation of Health Informatics and Information Management Education on an annual basis. In order to meet such requests, the HIT department does maintain academic and health information concerning students in the HIT offices. Please note these records are kept in the strictest confidence, and used only for reporting and tracking purposes. Following student graduation or withdrawal from the HIT program, these records will be maintained in the HIT offices for five (5) years. At the end of the five (5) years, all records are destroyed in such a way to preserve student confidentiality.

Students are entitled to view these files, and may do so by arranging an appointment with the Director of Health Information Technology. These records include, but are not limited to:

- Applications
- Transcripts
- Forms signed by the student
- Correspondence to and from the student
- PPE evaluation tools
- Conference forms
- Student information sheets
- Documentation of Universal Precautions and Environment of Care (Joint Commission) education
- Physical examination forms
- Immunization records
- Correspondence to and from healthcare provider
- Medical release forms

STUDENT RESPONSIBILITY FOR LEARNING

As a student in the HIT program, you are responsible for your own learning. We will provide the information to you, but you must do the learning. You should take advantage of any learning opportunity. Complete all
assignments. Each assignment is designed to assist you in becoming the most successful HIT professional you can be.

Next, do the best you can possibly do. Throughout the HIT program, you will have opportunities to learn the theory behind HIM, as well as the chance to apply the theory through real-life assignments. Take advantage of these opportunities.

Finally, remember each HIT course builds upon the last. So, it is your responsibility to bring everything you have learned in previous courses to new courses each semester. Come to class prepared to learn.

TESTING

1. Tests
   a. Students may only make up missed tests if they have contacted the instructor prior to the test time. Contact may be in person, via telephone, voice mail message, or email. The date and time stamp on emails will be noted when this takes place.

2. Midterm and Final Exams
   a. Absolutely no make up midterm or final exams will be given, except in the case of an extreme emergency. This will be reviewed and determined by the instructor and HIT program administration. (Please refer to the ‘Emergencies’ section of this handbook).

In regard to any testing done during the Health Information Technology program, no student will be allowed to leave that room once testing has begun. Once a student has completed a test, s/he is to quietly leave the room. Any discussion during testing will result in automatic zero points for the test.

TEXTBOOKS

Students are required to maintain their own textbooks for each HIT core course. Students are expected to have obtained all textbooks prior to the start of class. Most textbooks are available in print or e-book format.

TRANSPORTATION

Transportation to and from the SC4 campus and all PPE sites is the sole responsibility of the student. Although every attempt will be made to place students locally at PPE sites, some students may need to commute to facilities in the Metropolitan Detroit and Flint areas.

WEB-ENHANCEMENT

All HIT courses are web-enhanced. You will need to complete a free three (3) hour online course to introduce you to the SC4 Learning Management System, Webstudy. All assignments, including textbook readings, web readings, group projects, homework, handouts, etc., are available via Webstudy.
HEALTH AND SAFETY POLICIES

CRIMINAL BACKGROUND CHECK

The State of Michigan Public Acts 26, 27, 28 and 29 of 2006 mandates the obtainment of criminal background information, including FBI fingerprinting, of all individuals who seek employment, independent contractor relationships, students training over 40 hours in total or clinical privileges in positions that provide “direct access” to the consumers served at healthcare facilities. “Direct Access” is defined under Public Acts 26, 27, 28 and 29 of 2006 as access to a patient or resident or to a patient or resident’s property, financial information, medical records, treatment information or any other identifying information. Due to this mandate, all HIT students will be required to submit to a criminal background check at the cost of the student.

Background checks must be completed and submitted to the HIT administration office prior to the beginning of the student’s first fall semester. Background checks will be honored for the duration of the HIT program, unless there is a break in enrollment of one or more semester(s). However, it is the responsibility of the student to immediately notify the HIT administration of any changes in criminal history. Failure to do so will result in immediate dismissal from the HIT program. To that end, students should be aware that PPE sites often run their own criminal background checks as a part of the PPE validation process.

Students must be aware, although having a criminal history does not legally preclude one from becoming an HIT professional, it may make placing a student in a PPE, or securing employment following graduation significantly more difficult.

HIPAA

The Health Insurance Portability and Accountability Act requires all protected health information be kept confidential and secure by all people responsible for handle or have access to said information. Throughout the education process, HIT students will have access to protected health information, both real and fictional. As the HIT program is providing ‘true-to-life’ scenarios for learning, students are to treat all protected health information as real, maintain the confidentiality and conduct themselves in a professional manner related to dissemination of the information. Students are required to sign a confidentiality agreement at the beginning of the HIT program. Failure to adhere to this agreement may result in dismissal from the HIT program.

Students must complete the HIPAA training course which is located at http://www.hipaalexams.com/, at a nominal cost to the student. When this has been completed, a certificate is to be printed and turned in to the HIT administration offices no later than two (2) weeks prior to the start of the PPE. Failure to complete this training will result in delay of PPE start, which may delay graduation for the student.
INCLEMENT WEATHER

1. If the college closes because of severe weather, announcements will be made as early as possible.
2. The Port Huron campus may close for day classes only, night classes only, or for both day and night classes. Day classes are defined as classes that begin between 8 a.m. and 5:30 p.m. Night classes are defined as classes that begin between 6 and 10 p.m. (Note: If the college is closed for day classes, but open for night classes, the Achievement Center, College Bookstore, Library and student support services offices will remain closed for the evening.)
3. The Port Huron campus also may close early at any point in the day or evening.
4. Off-campus centers make independent decisions about closing. Whether they are open or closed is not related to if the Port Huron campus is open or closed.
5. To ensure you are getting accurate information, check the front page of the college website (www.sc4.edu), listen to the voicemail message on the college's main switchboard at (810) 984-3881 or the class cancellation hotline at (810) 989-5770, or login from home and check your SC4 email account. Please note: Cancellations by the instructor for individual classes will be reported only on the class cancellation hotline at (810) 989-5770, at www.sc4.edu/cancellations and through other methods the instructor chooses.
6. **Text alert messages available:** You may sign up to get text alert messages about closings delivered to your cellular phone or other wireless device. Sign up by logging in to the college’s online class registration system at www.sc4.edu/wave. Alerts will arrive labeled from "SC4 alerts."
7. While details about closings also will be reported by local newspapers, radio and television stations, and their websites, the only information the college can guarantee the accuracy of for SC4 closings will be on the college website, switchboard, class cancellation hotline, and email and text alert messages.
8. **Specifically for early closings:** If the Port Huron campus closes early at any point in the day or evening, Campus Patrol will notify classes in session about the closing. Because of the possibility of closing early, students should monitor the various communications listed above throughout the day.
9. Because SC4 is not in a busing situation, the college’s decision on closing is not related to decisions to close by any K-12 school districts.
10. If the college must close for severe weather during finals week, special announcements will be made regarding final exams.

It is recommended students sign up for Text Message Alerts, as outlined in number six (6) above.

IMMUNIZATIONS

Although HIT professionals do not have patient contact equivalent to that of nurses, facilities are still required to prove certain immunizations have been received by all individuals. Therefore, all HIT students are required to provide proof of immunity for the following:

1. Measles, Mumps, Rubella (MMR) – Adult booster – past the age of 18 years or titer
2. Varicella – Proof of vaccine or titer
3. Hepatitis B series – Evidence of beginning the series of three (3) hepatitis B vaccines prior to beginning the PPE portion of the HIT program.
4. Tetanus, diphtheria, a-cellular pertussis (TDap) – within the past 10 years
5. Flu vaccine – annually unless the student declines, in which case the student must sign a declination form to be kept in the student’s file in the HIT office.
6. TB test – must be done prior to the start of the program, and renewed annually

**PHYSICAL EXAMINATION**

Each student must pass a physical examination taken at his/her own expense not more than three (3) months before entering his/her first PPE in the program.

Physical examination forms are available on the SC4 HIT website. All required lab work, 10 panel drug screen (urine), a chest x-ray or TB skin test must be completed and verification submitted to the HIT department two (2) weeks prior to the start of the first HIT PPE. The drug screen must be no earlier than six (6) weeks prior to the start of the first HIT PPE. Failure to submit any required health forms will result in the inability to attend the PPE, and may delay the student’s program completion.

**PROFESSIONAL LIABILITY INSURANCE**

Each student enrolled in the HIT program must carry professional liability insurance. This can be purchased through SC4 for a nominal fee. Students will be required to produce proof of coverage prior to beginning the first PPE. Any student not producing proof of coverage will not be permitted to begin his/her PPE, which may delay graduation.

**UNIVERSAL PRECAUTIONS AND BLOODBORNE PATHOGENS TRAINING**

All students are required to complete training in Universal Precautions and Bloodborne Pathogen training at their own cost. This must be completed online at the cost of the student utilizing the following website:

http://www.hipaaexams.com/bloodborne-pathogens-training.html

When this has been completed, a certificate is to be printed and turned in to the HIT administration offices no later than two (2) weeks prior to the start of the PPE. Failure to complete this training will result in delay of PPE start, which may delay graduation for the student.

**PROFESSIONAL PRACTICE EXTERNSHIP POLICIES**

**PPE ATTENDANCE**

Students are expected to attend all PPE sessions, and are expected to be on time. Only in an extreme emergency (as outlined in HIT policies) would missing a PPE session be acceptable. Lack of childcare, lack of transportation, etc., are not acceptable reasons for missing a PPE session.
Any missed PPE time must be made up, and must be done so at the convenience of the PPE site. Failure to make up PPE time will result in course failure or incomplete, and will delay or prevent the student from graduating.

Additionally, no call/no show to a PPE session may result in removal from the PPE site. As PPE sites are difficult to obtain, it may be challenging to place a student a second time, which may result in an inability to graduate from the program on time. (Please refer to the 'Attendance' section of this handbook).

HIPAA AND CONFIDENTIALITY

Students of the SC4 HIT program will have access to protected health information that is, by law, the property of the patient. Students are expected to adhere to HIPAA regulations, and to maintain complete confidentiality of all patient information, real or fictional, at all times during the HIT program. Failure to comply may result in dismissal from the HIT program.

PROFESSIONAL BEHAVIOR

Faculty of SC4 and the HIT department have academic, legal and ethical responsibilities to protect members of the public and of the healthcare community from unsafe or unprofessional practices. HIT students, while representing SC4 at any PPE site, must conduct themselves in and ethical, professional, and safe manner. Students are expected to assume responsibility for their actions and will be held accountable for them. Students will adhere to SC4 and PPE site policies during each PPE. Failure to comply with program, SC4 or PPE site policies may result in dismissal from the HIT program.

PROFESSIONAL ETHICS

Students are expected to adhere to the AHIMA Code of Ethics at all times during the HIT program. Failure to comply may result in dismissal from the HIT program.

SERVICE WORK

SC4 HIT students are not allowed to operate in place of qualified staff during PPEs. Once a student has been successfully evaluated concerning particular procedures, then s/he may perform those procedures under supervision of qualified staff only.

No will be placed for his/her PPE at their current place of employment. This represents a conflict of interest due to potential service work issues.

UNIVERSAL PRECAUTIONS

SC4 HIT students are expected to observe all universal precautions while at PPE sites.
STUDENT RESOURCES

SC4 RESOURCES

HIT students are encouraged to take advantage of the many resources SC4 offer to ensure student success. These resources include, but are not limited to:

- Educational planning
- Academic advising
- Personal crisis services
- Student Success seminars
- The Library
- Computers in the Library and Achievement Center
- Tutoring
- Disability Services
- English as a second language assistance
- Writing Center
- Math Center

Further information concerning these and other services, and where to obtain them, can be found in the SC4 catalogue.

ST. CLAIR COUNTY COMMUNITY COLLEGE LIBRARY

What we offer:

- One search to find it all! Research @ SC4 library box searches: hundreds of thousands of Books & eBooks, Reference, Articles, Journals, Magazines, Newspapers, Streaming Videos & more
- 24/7 Live Chat support. Ask the library, email, text, walk-in research and reference assistance, information literacy programs, research guides
- Computer workstations, group study rooms, printing, study space, interlibrary loan, course reserves, citation management tool
- Off campus access to all online resources using Student ID# & Skippers OneCard barcode (on back of card)

Why use the library?

Librarians can assist in guiding you through the research process, from selecting sources to formatting citations. The amount of available information can be daunting, and librarians help select reliable, current, and comprehensive sources

Starting a search
Start at the library homepage http://esearch.sc4.edu. The Research @ SC4 search box finds books, reference, journal articles, images, videos, and searches the library catalog and all library databases.

- **Find your topic** - If you have trouble coming up with a topic, browse some of the library’s Health & Science databases or browse reputable industry websites for ideas to start with and build upon.

  - **Search strategies** - For information on search strategies visit http://esearch.sc4.edu/search_strategies

- **Keywords** - Keep track of terms you search. Try different combinations of synonyms, etc. Use terms that those writing about the topic would use. This may require some background research to come up with good terms.

- **Use the library and the internet too!** - Don’t limit yourself to one or the other.

- **Get Help!** - Talk to a librarian, tutor, and watch tutorials at http://esearch.sc4.edu/pqrc for guidance through the research process

### Evaluating the quality of sources

To consider when choosing a source:

- Publication - What site, journal or publisher has chosen to publish this work? Did it go through an editorial process? Is it self-published?

- Authorship - Qualifications, affiliations, body of work

- Sources and quotes - To what other sources does the author refer? Do they seem credible? Are they correctly citing their sources?

- Bias or interest - Does the author express a strong point of view? Are they dismissing one side of the argument?

- Currency - Does the information provide topic background? When was it published? Have more recent developments or advancements been made?

- Relevancy to topic - Does the source cover your topic, or does it just mention it in passing?

When reading a source consider:

- What is the author trying to accomplish in their writing?

- Do they reference other research or authors on the topic?

- Who is the intended audience?

- Is this fact, opinion, or propaganda? Is the author being objective?

- Is the information presented accurate?

- Is the argument one-sided? Does the author make generalizations or back up opinion with facts?

- If required to use evidence based practice, does this source integrate research with clinical & patient values and expertise?

### Citing your sources & plagiarism
It is always important to give credit whenever you are using a direct quote, paraphrasing, or otherwise referring to an idea, statistic, or passage created by someone other than yourself, aside from those that are considered common knowledge.

Refer to:


Purdue OWL - https://owl.english.purdue.edu/

Flow citation management - https://flow.proquest.com (sign up for a free account)

Where to find help

SC4 Library - College Center A100 (810) 989-5640 library@sc4.edu

Achievement Center Tutors - College Center B100 (810) 989-5759 ac@sc4.edu

TRIO Student Support Services - College Center C101 (810) 989-5801 trio@sc4.edu

Writing Center - Main Building 121 (810) 984-3881 ext. 6223 wc@sc4.edu (open Fall & Winter Semesters only)

Math Center - Clara E. MacKenzie building 104 (810) 989-5701 (open Fall & Winter Semesters only)

Sources: Online Writing Lab (Purdue University) https://owl.english.purdue.edu/owl/resource/553/1/

Writing Tutorial Services (Indiana University)
http://www.indiana.edu/~wts/pamphlets/plagiarism.shtml#terms

**EXTERNAL RESOURCES**

The following table is a listing of resources which may assist students throughout their educational career. Note: This is not an exhaustive list.

<table>
<thead>
<tr>
<th><strong>CAHIIM</strong></th>
<th>Commission on Accreditation for Health Informatics and Information Management Education</th>
<th><a href="http://www.cahiim.org">www.cahiim.org</a></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AHIMA</strong></td>
<td>American Health Information Management Association</td>
<td><a href="http://www.ahima.org">www.ahima.org</a></td>
</tr>
<tr>
<td><strong>MHIMA</strong></td>
<td>Michigan Health Information Management Association</td>
<td><a href="http://www.mhima.org">www.mhima.org</a></td>
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<tr>
<td></td>
<td>South Eastern Michigan Health Information Management</td>
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</table>
The AHIMA Virtual Lab will be utilized for the SC4 HIT program. This virtual environment consists of software applications commonly used in the day to day operations of an HIM department. These applications are:

- ATHENS/Cerner PowerChart – An electronic medical record for student use
- QuadraMed MPI Suite – Registration software
- QuadraMed Quantim Encoders – Coding, abstracting, compliance and coding reference software
- 3M Coding and Reimbursement System – Coding and coding reference software (logic based)
- Solcom EDMS – Read-only electronic document management system for imaged documents
- HealthPort eSmartLog Release of Information – Release of Information and correspondence tracking software
- Tableau – Data visioning and analysis software and practice data sets

These applications will be available via a web portal. Access cards to the Virtual Lab must be purchased once per calendar year. These cards are available through the SC4 Bookstore. Each student will then be registered as an authorized Virtual Lab user by HIT Administration, and will receive his/her own login IDs and passwords.
homework assignments will be completed electronically; therefore a student taking 14 credits in a semester will have 28 hours of homework AT A MINIMUM. In this scenario, at least 25 hours a week would require use of a computer. All computers must meet the following system requirements (please note these minimum requirements are subject to change due to updates by portal and software providers, and every effort will be made to notify students of changes in a timely fashion):

Software – Minimum requirements
- ONLY Microsoft Windows Vista or Windows 7 are supported. **Mac OSX is not supported.**
  - Broadband High Speed Internet Access: Cable or DSL
- Internet Explorer 8
- Microsoft Word 2010
- Microsoft Excel 2010
- Microsoft PowerPoint 2010

Hardware – Minimum requirements
- 1Ghz Intel or AMD processor (minimum)
- 2 GB of RAM (minimum)
- Screen resolution capable of 1024 x 768.
- CD-ROM
- USB ports
- Built in sound card
- Headphone jack and/or USB port for speakers and/or headphones

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**ETHICS**

**AMERICAN HEALTH INFORMATION MANAGEMENT ASSOCIATIONS CODE OF ETHICS**

The ethical obligations of the health information management (HIM) professional include the safeguarding of privacy and security of health information; disclosure of health information; development, use, and maintenance of health information systems and health information; and ensuring the accessibility and integrity of health information.

Healthcare consumers are increasingly concerned about security and the potential loss of privacy and the inability to control how their personal health information is used and disclosed. Core health information issues include what information should be collected; how the information should be handled, who should have access to the information, under what conditions the information should be disclosed, how the information is retained and when it is no longer needed, and how is it disposed of in a confidential manner. All of the core health information issues are performed in compliance with state and federal regulations, and employer policies and procedures.
Ethical obligations are central to the professional’s responsibility, regardless of the employment site or the method of collection, storage, and security of health information. In addition, sensitive information (e.g., genetic, adoption, drug, alcohol, sexual, health, and behavioral information) requires special attention to prevent misuse. In the world of business and interactions with consumers, expertise in the protection of the information is required.

Purpose of the American Health Information Management Association Code of Ethics

The HIM professional has an obligation to demonstrate actions that reflect values, ethical principles, and ethical guidelines. The American Health Information Management Association (AHIMA) Code of Ethics sets forth these values and principles to guide conduct. The code is relevant to all AHIMA members and CCHIIM credentialed HIM professionals [hereafter referred to as certificants], regardless of their professional functions, the settings in which they work, or the populations they serve. These purposes strengthen the HIM professional’s efforts to improve overall quality of healthcare.

The AHIMA Code of Ethics serves seven purposes:

- Promotes high standards of HIM practice.
- Identifies core values on which the HIM mission is based.
- Summarizes broad ethical principles that reflect the profession’s core values.
- Establishes a set of ethical principles to be used to guide decision-making and actions.
- Establishes a framework for professional behavior and responsibilities when professional obligations conflict or ethical uncertainties arise.
- Provides ethical principles by which the general public can hold the HIM professional accountable.
- Mentors practitioners new to the field to HIM’s mission, values, and ethical principles.

The code includes principles and guidelines that are both enforceable and aspirational. The extent to which each principle is enforceable is a matter of professional judgment to be exercised by those responsible for reviewing alleged violations of ethical principles.

THE CODE OF ETHICS 2011 ETHICAL PRINCIPLES AND HOW TO INTERPRET THEM

PRINCIPLES AND GUIDELINES, CODE OF ETHICS INTERPRETATION

The following ethical principles are based on the core values of AHIMA and apply to all AHIMA members and certificants. Guidelines included for each ethical principle are a non-inclusive list of behaviors and situations that can help to clarify the principle. They are not meant to be a comprehensive list of all situations that can occur.

I. Advocate, uphold, and defend the individual’s right to privacy and the doctrine of confidentiality in the use and disclosure of information.

A health information management professional shall:

1.1. Safeguard all confidential patient information to include, but not limited to, personal, health, financial, genetic, and outcome information.
1.2. Engage in social and political action that supports the protection of privacy and confidentiality, and be aware of the impact of the political arena on the health information issues for the health care industry.

1.3. Advocate for changes in policy and legislation to ensure protection of privacy and confidentiality, compliance, and other issues that surface as advocacy issues and facilitate informed participation by the public on these issues.

1.4. Protect the confidentiality of all information obtained in the course of professional service. Disclose only information that is directly relevant or necessary to achieve the purpose of disclosure. Release information only with valid authorization from a patient or as authorized by federal or state regulations. The minimum necessary standard is essential when releasing health information for disclosure activities.

1.5. Promote the obligation to respect privacy by respecting confidential information shared among colleagues, while responding to requests from the legal profession, the media, or other non-healthcare related individuals, during presentations or teaching and in situations that could cause harm to persons.

1.6. Respond promptly and appropriately to patient requests to exercise their privacy rights (e.g., access, amendments, restriction, confidential communication, etc.) Answer truthfully all patients’ questions concerning their rights to review and annotate their personal biomedical data and seek to facilitate patients’ legitimate right to exercise those rights.

II. Put service and the health and welfare of persons before self-interest and conduct oneself in the practice of the profession so as to bring honor to oneself, peers, and to the health information management profession.

A health information management professional shall:

2.1. Act with integrity, behave in a trustworthy manner, elevate service to others above self-interest, and promote high standards of practice in every setting.

2.2. Be aware of the profession’s mission, values, and ethical principles, and practice in a manner consistent with them by acting honestly and responsibly.

2.3. Anticipate, clarify, and avoid any conflict of interest, to all parties concerned, when dealing with consumers, consulting with competitors, in providing services requiring potentially conflicting roles (for example, finding out information about one facility that would help a competitor), or serving the Association in a volunteer capacity. The conflicting roles or responsibilities must be clarified and appropriate action taken to minimize any conflict of interest.

2.4. Ensure that the working environment is consistent and encourages compliance with the AHIMA Code of Ethics, taking reasonable steps to eliminate any conditions in their organizations that violate, interfere with, or discourage compliance with the code.

2.5. Take responsibility and credit, including authorship credit, only for work they actually perform or to which they contribute. Honestly acknowledge the work of and the contributions made by others verbally or written, such as in publication.

A health information management professional shall not:

2.6. Permit one’s private conduct to interfere with the ability to fulfill one’s professional responsibilities.
2.7. Take unfair advantage of any professional relationship or exploit others to further one’s own personal, religious, political, or business interests.

III. Preserve, protect, and secure personal health information in any form or medium and hold in the highest regards health information and other information of a confidential nature obtained in a n official capacity, taking into account the applicable statues and regulations.

A health information management professional shall:

3.1. Safeguard the privacy and security of written and electronic health information and other sensitive information. Take reasonable steps to ensure that health information is stored securely and that patients’ data is not available to others who are not authorized to have access. Prevent inappropriate disclosure of individually identifiable information.

3.2. Take precautions to ensure and maintain the confidentiality of information transmitted, transferred, or disposed of in the event of termination, incapacitation, or death of a healthcare provider to other parties through the use of any media.

3.3. Inform recipients of the limitations, and risks associated with providing services via electronic or social media (e.g., computer, telephone, fax, radio, and television).

IV. Refuse to participate in or conceal unethical practices or procedures and report such practices.

A health information professional shall:

4.1. Act in a professional and ethical manner at all times.

4.2. Take adequate measures to discourage, prevent, expose, and correct the unethical conduct of colleagues. If needed, utilize the Professional Ethics Committee Policies and Procedures for potential ethics complaints.

4.3. Be knowledgeable about established policies and procedures for handling concerns about colleagues’ unethical behavior. These include policies and procedures created by AHIMA, licensing and regulatory bodies, employers, supervisors, agencies, and other professional organizations.

4.4. Seek resolution if there is a belief that a colleague has acted unethically or if there is a belief of incompetence or impairment by discussing one’s concerns with the colleague when feasible and when such discussion is likely to be productive.

4.5. Consult with a colleague when feasible and assist the colleague in taking remedial action when there is direct knowledge of a health information management colleague’s incompetence or impairment.

4.6. Take action through appropriate formal channels, such as contacting an accreditation or regulatory body and/or the AHIMA Professional Ethics Committee if needed.

4.7. Cooperate with lawful authorities as appropriate.

A health information professional shall not:

4.8. Participate in, condone, or be associated with dishonesty, fraud and abuse, or deception. A non-inclusive list of examples includes:
• Allowing patterns of optimizing or minimizing documentation and/or coding to impact payment
• Assigning codes without physician documentation
• Coding when documentation does not justify the diagnoses or procedures that have been billed
• Coding an inappropriate level of service
• Miscoding to avoid conflict with others
• Engaging in negligent coding practices
• Hiding or ignoring review outcomes, such as performance data
• Failing to report licensure status for a physician through the appropriate channels
• Recording inaccurate data for accreditation purposes
• Allowing inappropriate access to genetic, adoption, health, or behavioral health information
• Violating the privacy of individuals

4.9. Engage in any relationships with a patient where there is a risk of exploitation or potential harm to the patient.

V. Advance health information management knowledge and practice through continuing education, research, publications, and presentations.

A health information professional shall:

5.1. Develop and enhance continually professional expertise, knowledge, and skills (including appropriate education, research, training, consultation, and supervision). Contribute to the knowledge base of health information management and share one’s knowledge related to practice, research, and ethics.
5.2. Base practice decisions on recognized knowledge, including empirically based knowledge relevant to health information management and health information management ethics.
5.3. Contribute time and professional expertise to activities that promote respect for the value, integrity, and competence of the health information management profession. These activities may include teaching, research, consultation, service, legislative testimony, advocacy, presentations in the community, and participation in professional organizations.
5.4. Engage in evaluation and research that ensures the confidentiality of participants and of the data obtained from them by following guidelines developed for the participants in consultation with appropriate institutional review boards.
5.5. Report evaluation and research findings accurately and take steps to correct any errors later found in published data using standard publication methods.
5.6. Design or conduct evaluation or research that is in conformance with applicable federal or state laws.
5.7. Take reasonable steps to provide or arrange for continuing education and staff development, addressing current knowledge and emerging developments related to health information management practice and ethics.
VI. Recruit and mentor students, staff, peers, and colleagues to develop and strengthen professional workforce.

A health information management professional shall:

6.1. Provide directed practice opportunities for students.
6.2. Be a mentor for students, peers, and a new health information management professionals to develop and strengthen skills.
6.3. Be responsible for setting clear, appropriate, and culturally sensitive boundaries for students, staff, peers, colleagues, and members within professional organizations.
6.4. Evaluate students’ performance in a manner that is fair and respectful when functioning as educators or clinical internship supervisors.
6.5. Evaluate staff’s performance in a manner that is fair and respectful when functioning in a supervisory capacity.
6.6. Serve an active role in developing HIM faculty or actively recruiting HIM professionals.

A health information management professional shall not:

6.7. Engage in any relationships with a person (e.g., students, staff, peers, or colleagues) where there is a risk of exploitation or potential harm to that other person.

VII. Represent the profession to the public in a positive manner.

A health information management professional shall:

7.1. Be an advocate for the profession in all settings and participate in activities that promote and explain the mission, values, and principles of the profession to the public.

VIII. Perform honorably health information management association responsibilities, either appointed or elected, and preserve the confidentiality of any privileged information made known in any official capacity.

A health information management professional shall:

8.1. Perform responsibly all duties as assigned by the professional association operating within the bylaws and policies and procedures of the association and any pertinent laws.
8.2. Uphold the decisions made by the association.
8.3. Speak on behalf of the health information management profession and association, only while serving in the role, accurately representing the official and authorized positions of the association.
8.4. Disclose any real or perceived conflicts of interest.
8.5. Relinquish association information upon ending appointed or elected responsibilities.
8.6. Resign from an association position if unable to perform the assigned responsibilities with competence.
8.7. Avoid lending the prestige of the association to advance or appear to advance the private interest of others by endorsing any product or service in return for
remuneration. Avoid endorsing products or services of a third party, for-profit entity that competes with AHIMA products and services. Care should also be exercised in endorsing any other products and services.

IX. State truthfully and accurately one’s credentials, professional education, and experiences.

A health information management professional shall:

9.1. Make clear distinctions between statements made and actions engaged in as a private individual and as a representative of the health information management profession, a professional health information association, or one’s employer.

9.2. Claim and ensure that representation to patients, agencies, and the public of professional qualification, credentials, education, competence, affiliations, services provided, training, certification, consultation received, supervised experience, and other relevant professional experience are accurate.

9.3. Claim only those relevant professional credentials actually possessed and correct any inaccuracies occurring regarding credentials.

9.4. Report only those continuing education units actually earned for the recertification cycle and correct any inaccuracies occurring regarding CEUs.

X. Facilitate interdisciplinary collaboration in situations supporting health information practice.

A health information management professional shall:

10.1. Participate in and contribute to decisions that affect the well-being of patients by drawing on the perspectives, values, and experiences of those involved in decisions related to patients.

10.2. Facilitate interdisciplinary collaboration in situations supporting health information practice.

10.3. Establish clearly professional and ethical obligations of the interdisciplinary team as a whole and of its individual members.

10.4. Foster trust among group members and adjust behavior in order to establish relationships with teams.

XI. Respect the inherent dignity and worth of every person.

A health information management professional shall:

11.1. Treat each person in a respectful fashion, being mindful of individual differences and cultural and ethnic diversity.

11.2. Promote the value of self-determination for each individual.

11.3. Value all kinds and classes of people equitable, deal effectively with all races, cultures, disabilities, ages and genders.

11.4. Ensure all voices are listened to and respected.

THE USE OF THE CODE OF ETHICS
Violation of principles in this code does not automatically imply legal liability or violation of the law. Such determination can only be made in the context of legal and judicial proceeding. Alleged violations of the code would be subject to a peer review process. Such processes are generally separate from legal or administrative procedures and insulated from legal review or proceedings to allow the profession to counsel and discipline its own members although in some situations, violations of the code would constitute unlawful conduct subject to legal process.

Guidelines for ethical and unethical behavior are provided in this code. The terms ‘shall and shall not’ are used as a basis for setting high standards for behavior. This does not imply that everyone ‘shall or shall not’ do everything that is listed. This concept is true for the entire code. If someone does the stated activities, ethical behavior is the standard. The guidelines are not a comprehensive list. For example, the statement ‘safeguard all confidential patient information to include, but not limited to, personal, health, financial, genetic and outcome information’ can also be interpreted as ‘shall not fail to safeguard all confidential patient information to include personal, health, financial, genetic, and outcome information.’

A code of ethics cannot guarantee ethical behavior. Moreover, a code of ethics cannot resolve all ethical issues or disputes or capture the richness and complexity involved in striving to make responsible choices within a moral community. Rather, a code of ethics sets forth values and ethical principles, and offers ethical guidelines to which a HIM professional can aspire and by which actions can be judged. Ethical behaviors result from a personal commitment to engage in ethical practice.

Professional responsibilities often require an individual to move beyond personal values. For example, an individual might demonstrate behaviors that are based on the values of honesty, providing service to others, or demonstrating loyalty. In addition to these, professional values might require promoting confidentiality, facilitating interdisciplinary collaboration, and refusing to participate or conceal unethical practices. Professional values could require a more comprehensive set of values than what an individual needs to be an ethical agent in one’s own personal life.

The AHIMA Code of Ethics is to be used by AHIMA members and certificants, consumers, agencies, organizations, and bodies (such as licensing and regulatory boards, insurance providers, courts of law, government agencies, and other professional groups) that choose to adopt it or use it as a frame of reference. The AHIMA Code of Ethics reflects the commitment of all to uphold the profession’s values and to act ethically. Individuals of good character who discern moral questions and, in good faith, seek to make reliable ethical judgments, must apply ethical principles.

The code does not provide a set of rules that prescribe how to act in all situations. Specific applications of the code must take into account the context in which it is being considered and the possibility of conflicts among the code’s values, principles, and guidelines. Ethical responsibilities flow from all human relationships, from the personal and familial to the social and professional. Further, the AHIMA Code of Ethics does not specify which values, principles, and guidelines are the most important and ought to outweigh others in instances when they conflict.
INTRODUCTION, STANDARDS OF ETHICAL CODING

The Standards of Ethical Coding are based on the American Health Information Management Association’s (AHIMA’s) Code of Ethics. Both sets of principles reflect expectations of professional conduct for coding professionals involved in diagnostic and/or procedural coding or other health record data abstraction.

A Code of Ethics sets forth professional values and ethical principles and offers guidelines to which professionals aspire and by which their actions can be judged. Health information management (HIM) professionals are expected to demonstrate professional values by their actions to patients, employers, members of the healthcare team, the public, and the many stakeholders they serve. A Code of Ethics is important in helping to guide the decision-making process and can be referenced by individuals, agencies, organizations, and bodies (such as licensing and regulatory boards, insurance providers, courts of law, government agencies, and other professional groups).

The AHIMA Code of Ethics (available on the AHIMA website) is relevant to all AHIMA members and credentialed HIM professionals and students, regardless of their professional functions, and due to the complex regulatory requirements affecting the health information coding process, coding professionals are frequently faced with ethical challenges. The AHIMA Standards of Ethical Coding are intended to assist coding professionals and managers in decision-making processes and actions, outline expectations for making ethical decisions in the workplace, and demonstrate coding professionals’ commitment to integrity during the coding process, regardless of the purpose for which the codes are being reported. They are relevant to all coding professionals and those who manage the coding function, regardless of the healthcare setting in which they work or whether they are AHIMA members or nonmembers.

These Standards of Ethical Coding have been revised to reflect the current healthcare environment and modern coding practices. The previous revision was published in 1999.

STANDARDS OF ETHICAL CODING GUIDELINES

Coding professionals should:

1. Apply accurate, complete, and consistent coding practices for the production of high-quality healthcare data.
2. Report all healthcare data elements (e.g. diagnosis and procedure codes, present on admission indicator, discharge status) required for external reporting purposes (e.g. reimbursement and other administrative uses, population health, quality and patient safety measurement, and research) completely and accurately, in conventions, rules, and guidelines.
3. Assign and report only the codes and data that are clearly and consistently supported by health record documentation in accordance with applicable code set and abstraction conventions, rules, and guidelines.
4. Query provider (physician or other qualified healthcare practitioner) for clarification and additional documentation prior to code assignment when there is conflicting, incomplete, or ambiguous information in the health record regarding a significant reportable condition or
procedure or other reportable data element dependent on health record documentation (e.g. present on admission indicator).

5. Refuse to change reported codes or the narratives of codes so that meanings are misrepresented.

6. Refuse to participate in or support coding or documentation practices intended to inappropriately increase payment, qualify for insurance policy coverage, or skew data by means that do not comply with federal and state statutes, regulations and official rules and guidelines.

7. Facilitate interdisciplinary collaboration in situations supporting prior coding practices.

8. Advance coding knowledge and practice through continuing education.

9. Refuse to participate in or conceal unethical coding or abstraction practices or procedures.

10. Protect the confidentiality of the health record at all times and refuse to access protected health information not required for coding-related activities (examples of coding-related activities include completion of code assignment, other health record data abstraction, coding audits, and educational purposes).

11. Demonstrate behavior that reflects integrity, shows a commitment to ethical and legal coding practices, and fosters trust in professional activities.

Revised and approved by the House of Delegates 09/08

HOW TO INTERPRET THE STANDARDS OF ETHICAL CODING

The following ethical principles are based on the core values of the American health Information Management Association and the AHIMA Code of Ethics and apply to all coding professionals. Guidelines for each ethical principle include examples of behaviors and situations that can help to clarify the principle. They are not meant as a comprehensive list of all situations that can occur.

1. **Apply accurate, complete, and consistent coding practices for the production of high-quality healthcare data.**

Coding professionals and those who manage coded data **shall**:

1.1 Support selection of appropriate diagnostic, procedure and other types of health service related codes (e.g. present on admission indicator, discharge status).

Example:

Policies and procedures are developed and used as a framework for the work process, and education and training is provided on their use.

1.2 Develop and comply with comprehensive internal coding policies and procedures that are consistent with official coding rules and guidelines, reimbursement regulations and policies and prohibit coding practices that misrepresent the patient’s medical conditions and treatment provided or are not supported by the health record documentation.

Example:
Code assignment resulting in misrepresentation of facts carries significant consequences.

1.3 Participate in the development of institutional coding policies and ensure that coding policies complement, and do not conflict with, official coding rules and guidelines.

1.4 Foster an environment that supports honest and ethical coding practices resulting in accurate and reliable data.

Coding professionals shall not:

1.5 Participate in improper preparation, alteration, or suppression of coded information.

2. Report all healthcare data elements (e.g. diagnosis and procedure codes, present on admission indicator, discharge status) required for external reporting purposes (e.g. reimbursement and other administrative uses, population health, public data reporting, quality and patient safety measurement, research) completely and accurately, in accordance with regulatory and documentation standards and requirements and applicable official coding conventions, rules, and guidelines.

Coding professionals shall:

2.1. Adhere to the ICD coding conventions, official coding guidelines approved by the cooperating Parties, the CPT rule established by the American Medical Association, and any other official coding rules and guidelines established for use with mandated standard code sets.

Example:
Appropriate resource tools that assist coding professionals with proper sequencing and reporting to stay in compliance with existing reporting requirements are available and used.

2.2 Select and sequence diagnosis and procedure codes in accordance with the definitions of required data sets for applicable healthcare settings.

2.3 Comply with AHIMA’s standards governing data reporting practices, including health record documentation and clinician query standards.

3. Assign and report only the codes that are clearly and consistently supported by health record documentation in accordance with applicable code set conventions, rules, and guidelines.

Coding professionals shall:
3.1 Apply skills, knowledge of currently mandated coding and classification systems, and official resources to select the appropriate diagnostic and procedural codes (including applicable modifiers), and other codes representing healthcare services (including substances, equipment, supplies, or other items used in the provision of healthcare services).

Example:
Failure to research or confirm the appropriate code for a clinical condition not indexed in the classification, or reporting a code for the sake of convenience or to affect reporting for a desired effect on the results, is considered unethical.

4. **Query provider (physician or other qualified healthcare practitioner) for clarification and additional documentation prior to code assignment when there is conflicting, incomplete, or ambiguous information in the health record regarding a significant reportable condition or procedure or other reportable data element dependent on health record documentation (e.g. present on admission indicator).**

Coding professionals **shall**:

4.1 Participate in the development of query policies that support documentation improvement and meet regulatory, legal, and ethical standards for coding and reporting.

4.2 Query the provider for clarification when documentation in the health record that improvement and meet regulatory, legal, and ethical standards for coding and reporting.

4.3 Use queries as a communication tool to improve the accuracy of code assignment and the quality of health record documentation, not to inappropriately increase reimbursement or misrepresent quality of care.

Coding professionals **shall not**:

4.4 Query the provider when there is no clinical information in the health record prompting the need for a query.

Example:
Query the provider regarding the presence of gram-negative pneumonia on every pneumonia case, regardless of whether there are any clinical indications of gram-negative pneumonia documented in the record.

5. **Refuse to change reported codes or the narratives of codes so that meanings are misrepresented.**

Coding professionals **shall not**:
5.1 Change the description for a diagnosis or procedure code or other reported data element so that it does not accurately reflect the official definition of the code.

Example:
The description of a code is altered in the encoding software, resulting in incorrect reporting of this code.

6. *Refuse to participate in or support coding or documentation practices intended to inappropriately increase payment, qualify for insurance policy coverage, or skew data by means that do not comply with federal and state statutes, regulations and official rules and guidelines.*

Coding professionals **shall**:

6.1 Select and sequence the codes such that the organization receives the optimal payment to which the facility is legally entitled, remembering that it is unethical and illegal to increase payment by means that contradict regulatory guidelines.

Coding professionals **shall not**:

6.2 Misrepresent the patient’s clinical picture through intentional incorrect coding or Omission of diagnosis or procedure codes unsupported by health record documentation, to inappropriately increase reimbursement, justify medical necessity, improve publicity reported data, or qualify for insurance policy coverage benefits.

Examples:
A patient has a health plan that excludes reimbursement for reproductive management or contraception; so rather than report the correct code for admission for tubal ligation, it is reported as a medically necessary condition with performance of a salpingectomy. The narrative descriptions of both the diagnosis and procedures reflect an admission for tubal ligation and the procedure (tubal ligation) is displayed on the record.

A code is changed at the patient’s request to that the service will be covered by the patient’s insurance.

Coding professional **shall not**:

6.3 Inappropriately exclude diagnosis or procedure codes in order to misrepresent the quality of care provided.

Examples:
Following a surgical procedure, a patient acquired an infection due to a break in sterile procedure; the appropriate code for the surgical complication is omitted from the claims submission to avoid any adverse outcome to the institution.
Quality outcomes are reported inaccurately in order to improve a healthcare organization’s quality profile or pay-for-performance results.

7. **Facilitate interdisciplinary collaboration in situations supporting proper coding practices.**

Coding professionals **shall**:

7.1 Assist and educate physicians and other clinicians by advocating proper documentation practices, further specificity, and re-sequence or include diagnoses or procedures when needed to more accurately reflect the acuity, severity, and the occurrence of events.

Example:
Failure to advocate for ethical practices that seek to represent the truth in events as expressed by associated code sets when needed in considered an intentional disregard of these standards.

8. **Advance coding knowledge and practice through continuing education.**

Coding professionals **shall**:

8.1 Maintain and continually enhance coding competency (e.g. through participation in educational programs, reading official coding publications such as the Coding Clinic for ICD-9-CM, and maintaining professional certifications) in order to stay abreast of changes in codes, coding guidelines, and regulatory and other requirements.

9. **Refuse to participate in or conceal unethical coding practices or procedures.**

Coding professionals **shall**:

9.1 Act in a professional and ethical manner at all times.

9.2 Take adequate measures to discourage, prevent, expose, and correct the unethical conduct of colleagues.

9.3 Be knowledgeable about established policies and procedures for handling concerns about colleagues’ unethical behavior. These include policies and procedures created by AHIMA, licensing and regulatory bodies, employers, supervisors, agencies, and other professional organizations.

9.4 Seek resolution if there is a belief that a colleagues has acted unethically or if there is a belief of incompetence or impairment by discussing their concerns with the colleague when feasible and when such discussion is likely to be productive. Take action
through appropriate formal channels, such as contacting an accreditation or regulatory body and/or the AHIMA Professional Ethics Committee.

9.5 Consult with a colleague when feasible and assist the colleague in taking remedial action when there is direct knowledge of a health information management colleague’s incompetence or impairment.

Coding professionals shall not:

9.6 Participate in, condone, or be associated with dishonesty, fraud and abuse, or deception. A non-exhaustive list of examples includes:

- Allowing inappropriate patterns of retrospective documentation to avoid suspension or increase reimbursement
- Assisting codes without supporting provider (physician or other qualified healthcare practitioner) documentation
- Coding when documentation does not justify the diagnoses and/or procedures that have been billed
- Coding an inappropriate level of service
- Miscoding to avoid conflict with others
- Adding, deleting, and altering health record documentation
- Copying and pasting another clinician’s documentation without identification of the original author and date
- Knowingly reporting incorrect present on admission indicator
- Knowingly reporting incorrect patient discharge status code
- Engaging in negligent coding practices

10. Protect the confidentiality of the health record at all times and refuse to access protected health information not required for coding-related activities (examples of coding-related activities include completion of code assignment, other health record data abstraction, coding audits, and educational purposes).

Coding professionals shall:

10.1 Protect all confidential information obtained in the course of professional service, including personal, health, financial, genetic, and outcome information.

10.2 Access only that information necessary to perform their duties.

11. Demonstrate behavior that reflects integrity, shows a commitment to ethical and legal coding practices, and fosters trust in professional activities.

Coding professionals shall:
11.1 Act in an honest manner and bring honor to self, peers, and the profession.

11.2 Truthfully and accurately represent their credentials, professional education, and experience.

11.3 Demonstrate ethical principles and professionals values in their actions to patients, employers, other members of the healthcare team, consumers, and other stakeholders served by the healthcare data they collect and report.

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Receipt and Understanding of
St. Clair County Community College Health Information Technology Program
Student Handbook Signature Form

I have received a copy of the Health Information Technology Program at St. Clair County Community College. I have read and agree to the following (initial by each after reading):

__________ I understand and agree to abide by the policies set forth in this handbook, as well as the policies in the St. Clair County Community College Catalogue and Student Handbook.

__________ I have read the summary from the Public Health Code and understand the reasons for which St. Clair County Community College may deny me a placement in a professional practice externship.

__________ I have read, understand and agree to a criminal background check and FBI fingerprinting. I understand I will not be placed in a professional practice externship until such time this is completed.

__________ I have read and understand the section of the handbook pertaining to health and safety. I understand I will not be placed in a professional practice externship until such time all health requirements are met.

__________ I understand it is my responsibility to keep St. Clair County Community College updated as to any changes in my health status which may affect my ability to participate in a professional practice externship.

__________ I have read and understand the section of the handbook pertaining to academic integrity and understand that any violation of this policy may result in dismissal from the Program and make me ineligible for reinstatement to the HIT program in the future. I further agree that if at any time I know of a violation of this policy, I will discuss it with the HIT program Director immediately.

__________ I have read and understand the AHIMA Code of Ethics and agree to abide by this code throughout my participation in the Health Information Technology program at St. Clair County Community College.
I have read and understand the AHIMA Standards of Ethical Coding and agree to abide by this code throughout my participation in the Health Information Technology program at St. Clair County Community College.

I understand that violation of any policy set forth in the handbook may result in dismissal from the Program.

I have been given the opportunity to ask questions and seek clarification concerning information in the handbook.

I understand all policies and procedures as stated in this handbook are subject to change at any time at the discretion of the College with due notice to the student.

Student Signature ____________________________ Date ____________________________

Student Name (printed) ____________________________ Student ID Number ____________________________

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