

Prepare for a Professional Career as a **Medical Billing & Coding Specialist**





WE ALL DREAM OF SUCCESS. OUR GOAL IS TO HELP YOU ACHIEVE IT.

Meet American Career College

With more than 45 years of experience in healthcare training and more than 70,000 graduates, ACC is here to help you make your goals a reality.

Our classes are modeled after real-life scenarios, using the same medical tools and equipment you'll use on the job. That way, you're prepared to jump in on your very first day. We provide education focused on real-world skills and knowledge, giving our students the opportunity to change their lives for the better.

What is a Medical Billing & Coding Specialist

Medical billing and coding specialists work at healthcare facilities, collecting and processing patient data, assigning standardized codes for diagnoses and procedures, and verifying information on insurance claims forms. They can work in a variety of settings, including physicians' offices, hospitals, dental offices, and more.¹

Program Overview

Our program offers 100% online coursework designed to familiarize students with medical billing and coding software and help them develop the skills needed to work in a healthcare setting. The Medical Billing and Coding Specialist program is divided into eight learning modules, consisting of seven instructional modules and one six-week practicum/capstone course completed at the end of the program. All coursework is completed online, giving students the flexibility to study wherever it is convenient for them. The final practicum provides hands-on, real-world experience that allows students to apply the knowledge and skills gained throughout the program.

Medical Billing and Coding Skillset



Proficiency in Industry Software and Forms

Track patient health by learning to use electronic health record and billing software.



Revenue Cycle Management

Understand the claim processing cycle and identify a rejected or denied claim form.



Understand Medical Terminology

Includes pathophysiology and pharmacology relating to those body systems.

¹ <https://accedu.org/I9eGMv>

MBCS100**Clock Hours 72 | Quarter Credits 5****Student Success Course**

This course is intended to provide the foundation for success in the Medical Billing and Coding Specialist program and in the Medical Billing profession. Course content will cover the components of medical terms, including prefixes, suffixes, and word roots. Correct spelling, pronunciation, abbreviations, and definitions of medical terms is emphasized to prepare students for effective communication with healthcare professionals. Medical terminology will cover basic anatomy, physiology, and pathophysiology among body systems. Students will engage in collaborative activities to build competence utilizing medical terminology. Students will also be introduced to the tools necessary for Medical Billing, including the ICD-10-CM, ICD-10-PCS, CPT, and HCPCS manuals. Professionalism, collaboration, and effective communication strategies will also be discussed.

MBCS200**Clock Hours 72 | Quarter Credits 5****Medical and Dental Billing Procedures**

This course focuses on the daily operations of medical and dental billing procedures, building on prior learning on medical terminology and related topics. Students will explore the healthcare revenue cycles and the various types of medical and dental insurance. Students will also begin to use and practice skills on logic-based computerized billing software. The legal and ethical issues related to medical and dental billing will be explored. Students will also begin to apply the ICD-10, CPT, and HCPCS codes from the appropriate manuals in case studies.

MBCS300**Clock Hours 72 | Quarter Credits 5****Medical and Dental Claims Processing**

This course focuses on the implementation of the medical and dental billing claims cycle. This course continues to build on skills and content knowledge from all previous MBCS courses, including medical terminology and billing procedures. An overview of the CMS-1500 claims form will provide students with an opportunity to recognize claim locators and sections relevant to the Medical Billing process. Medical and dental health plans will be explored in relation to participation and payment methods within the healthcare revenue cycle. Students will continue to apply the ICD-10, CPT, and HCPCS codes from the appropriate manuals in case studies.

MBCS400**Clock Hours 72 | Quarter Credits 5****Hospital and Clinic Billing**

This course focuses on concepts needed for an effective and efficient billing process for acute and ambulatory care settings. This course continues to build on skills and content knowledge from all previous MBCS courses, including medical terminology and billing procedures and processing. An overview of the hospital and clinical organizational structures and billing systems will be provided. Hospital-based reimbursement systems such as Diagnosis-Related Groups (DRG), Resource-Based Relative Value Scale (RBRVS), and Ambulatory Payment Systems (APC), as well as logic-based computerized billing software, will be explored. Students will also examine the Uniform Billing (UB-04) form and its application to hospital billing. Students will continue to apply the ICD-10, ICD-10-PCS coding, CPT, and HCPCS codes from the appropriate manuals in case studies.

MBCS500**Clock Hours 72 | Quarter Credits 5****Medical and Dental Reimbursement and Denial Management**

This course focuses on the role of the Medical Biller in dealing with reimbursement, denial, and rejection of insurance claims. This course continues to build on skills and content knowledge from all previous MB courses, including medical terminology and billing procedures. Once a claim has been processed, a decision will have been made regarding reimbursement. The various decision options, including proceeding to reimbursement, denial, or rejection, will be reviewed and their consequences will be evaluated. Students will continue to apply the ICD-10, CPT, and HCPCS codes from the appropriate manuals in case studies.

MBCS600**Clock Hours 72 | Quarter Credits 5****Managed Care and Private Health Plans**

This course focuses on the billing processes and procedures for dealing with managed care organizations such as Health Maintenance Organizations (HMOs) and Preferred Provider Organizations (PPOs). This course continues to build on skills and content knowledge from all previous MB courses, including medical terminology, billing procedures, billing processing, procedures pertaining to hospitals and clinics, and claim reimbursements and denials. Students will explore reimbursement methods for managed care plans. The role of the Medical Biller in facilitating the processes and procedures when dealing with a managed care claim, will also be examined. Students will continue to apply the ICD-10, CPT, and HCPCS codes from the appropriate manuals in advanced case studies.

MBCS700**Clock Hours 72 | Quarter Credits 5****State and Government Health Plans**

This course focuses on state and federally funded health care plans such as Medicare, Medicaid, Tricare, CHAMPVA, Worker's Compensation, and Disability payment systems. This course continues to build on skills and content knowledge from all previous MB courses, including medical terminology, billing procedures, billing processing, procedures pertaining to hospitals and clinics, claim reimbursements and denials, and managed health care plans. Students will explore the governmental health care payment systems related to the benefits provided and procedures for processing claims. Students are expected to attain proficiency in applying the ICD-10, CPT, and HCPCS codes from the appropriate manuals in advanced case studies.

MBCS800**Clock Hours 130 | Quarter Credits 7****Practicum Experience Course**

This capstone course provides experiential learning using case studies and simulated learning experiences. The goal is to provide students with real-world practice implementing the Medical Billing skills learned in the program. Job-seeking skills, including resume writing, completing job applications, and interviewing for a Medical Billing position, will be explored. Opportunities for personal and professional growth will be discussed. Additionally, students will gain an understanding of a career path that includes certification and other areas of the billing profession.

PROGRAM TOTAL:**634 Clock Hours
42 Quarter Credits**

“ It’s like a puzzle piece. If you don’t have the right CPT code, DX code or correct INS information, the piece won’t fit and you can’t solve the puzzle. ”

- MARIA D., MBC '21

Start Your Change Today

Accreditation

ACC is institutionally accredited by the Accrediting Bureau of Health Education Schools (ABHES). ABHES: 6116 Executive Blvd., Suite 730, North Bethesda, MD 20852, (301) 291-7550 / www.abhes.org.

Student Outcome Information

Accrediting Bureau of Health Education Schools (ABHES)

Ontario: <https://americancareercollege.edu/legal/abhes>

California Bureau for Private Postsecondary Education (BPPE)

Ontario: <https://americancareercollege.edu/uploads/School-Performance-Fact-Sheets-Ontario-Campus.pdf>

Program Costs

<https://americancareercollege.edu/catalog/current/financial-information/program-tuition-and-fees/diploma-programs-tuition>

	SOC Code	Links to Occupational Profiles on O*Net
Insurance Claims and Policy Processing Clerks: Claims Adjudicator, Claims Analyst, Claims Clerk, Claims Customer Service Representative (Claims CSR), Claims Processor, Claims Representative (Claims Rep), Claims Technician (Claims Tech), Insurance Analyst, Policy Analyst, Underwriting Assistant	43-9041.00	http://www.onetonline.org/link/summary/43-9041.00
Billing and Posting Clerk: Account Services Representative (Account Services Rep), Biller, Billing Clerk, Billing Coordinator, Item Processing Clerk (IP Clerk), Medical Biller, Pre-Audit Clerk, Statement Clerk, Statement Distribution Clerk, Statement Services Representative (Statement Services Rep)	43-3021.00	http://www.onetonline.org/link/summary/43-3021.00
Medical Secretaries and Administrative Assistants: Clinic Office Assistant, Front Desk Receptionist, Medical Office Specialist, Medical Receptionist, Medical Secretary, Physician Office Specialist, Secretary, Unit Clerk, Unit Support Representative, Ward Clerk	43-6013.00	http://www.onetonline.org/link/summary/43-6013.00

To obtain a list of the objective sources of information used to substantiate the salary disclosures, please refer to the California Employment Development Department website at: <https://www.labormarketinfo.edd.ca.gov/Occupational-Guides.html> ACC provides career guidance and assistance but cannot guarantee employment. Programs lengths vary by schedule and session. The opinion is the individual’s sole opinion and not necessarily representative of that of the school, any instructor or any other student.

Location

Ontario campus

Duration

Less than 9 months

Schedule

100% Online

Enrollment Requirements

Some of the admissions requirements include:

- › Must be at least 18 or have a parent’s or guardian’s signature

- › Must have a high school diploma or the equivalent

- › Must take and pass entrance exams

Be sure to speak with an admissions advisor to get all the necessary information to apply for the Medical Billing & Coding program.

Instructional Equipment

Here are some of the exciting tools you will get hands-on experience with: billing and coding references (CPT, ICD-10-CM, ICD-10-PCS, and HCPCS), medical office software, word processing software, medical claims software, textbook and e-text materials, and online course material.

Curious to Learn More? Let’s Connect

Discover how ACC’s program helps set you on the path towards a rewarding career, **connect with an advisor** to learn more about the Medical Billing & Coding Specialist program and explore financial aid options.

AmericanCareerCollege.edu

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