

Duration: 12 Months (3 Semesters)	Total Credits: 36 SCH	Delivery: Blended (Online/On-Campus)	Clinical Externship: 160 Hours
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1. Executive Summary and Institutional Rationale

The University of Justice extends its academic leadership in legal compliance, healthcare administration, and public health systems through the 12-Month Medical Billing & Coding Assistant Certificate Program. Modern hospital networks, physician groups, insurance carriers, ambulatory surgical centers, and institutional healthcare facilities face an increasing demand for certified health information professionals skilled in diagnostic and procedural coding, revenue cycle management, and healthcare compliance.

Designed for rapid entry into health informatics, this program provides comprehensive training in ICD-10-CM, ICD-10-PCS, CPT-4, and HCPCS Level II coding systems, insurance reimbursement methodologies, CMS compliance, claims adjudication, auditing, and electronic health record (EHR) management. Graduates are prepared for national certification examinations (CPC/CBCS/CCA) and immediate employment in administrative healthcare settings.

2. Program Learning Outcomes (PLOs)

- **Assign Accurate Classification Codes:** Abstract clinical documentation and assign precise ICD-10-CM, ICD-10-PCS, CPT-4, and HCPCS Level II codes according to official coding guidelines.
- **Manage Revenue Cycle & Claims Processing:** Navigate the complete healthcare revenue cycle, including insurance verification, CMS-1500 and UB-04 claim preparation, electronic claim submission, clearinghouse edits, and denial management.
- **Apply Healthcare Compliance & Medico-Legal Laws:** Enforce HIPAA privacy/security rules, Anti-Kickback Statute, False Claims Act, OIG compliance guidelines, and medical record documentation standards.
- **Utilize Health Information Technologies:** Operate Electronic Health Record (EHR) systems, encoder software, billing management systems, and practice management software platforms.
- **Execute Claims Auditing & Financial Reconciliation:** Audit medical charts for coding accuracy, evaluate Explanation of Benefits (EOB) and Remittance Advice (RA), process appeals, and perform patient billing reconciliation.

3. Admissions Requirements

- **Educational Background:** High School Diploma or GED equivalent with a minimum cumulative GPA of 2.0.
- **Prerequisites:** High School Biology or introductory computer literacy course (or passing score on institutional placement assessments).
- **Background Clearance:** Criminal background check and drug screening prior to administrative externship placement.
- **Technical Competency:** Demonstrated computer proficiency and keyboarding speed of at least 35 WPM.

4. Comprehensive 12-Month Curriculum Structure

The program spans three continuous semesters (Fall, Spring, Summer), blending online didactic coursework, hands-on coding lab simulations, and a 160-hour administrative externship (Total: 36 Credit Hours).

SEMESTER 1: MEDICAL ANATOMY, TERMINOLOGY & COMPLIANCE (12 CREDITS)

MBC 101: Medical Terminology and Pathophysiology for Coders	3 Credits
Comprehensive study of medical roots, prefixes, suffixes, body systems, anatomical structures, and pathophysiological disease processes required for diagnostic coding.	
MBC 103: Healthcare Legal Frameworks, HIPAA, and Compliance	3 Credits
In-depth review of HIPAA regulations, OIG compliance guidelines, legal aspects of medical records, False Claims Act, and ethical standards in medical coding.	
MBC 105: Health Information Systems and EHR Management	3 Credits
Hands-on instruction in electronic health record (EHR) systems, master patient indexes, document imaging, health data security, and practice management software.	
MBC 107: Introduction to Medical Insurance and Reimbursement	3 Credits
Overview of health insurance models (PPO, HMO, POS, Medicare, Medicaid, TRICARE, Workers' Comp), deductible/copay structures, and fee schedules.	

SEMESTER 2: ADVANCED DIAGNOSTIC & PROCEDURAL CODING (15 CREDITS)

MBC 201: ICD-10-CM Diagnostic Coding Principles	4 Credits
Instruction in assigning ICD-10-CM codes for diseases, conditions, injuries, and external causes using official coding guidelines and tabular/index conventions.	
MBC 202: CPT-4 and HCPCS Level II Procedural Coding	4 Credits
Coding outpatient medical, surgical, evaluation and management (E/M), radiology, pathology, and laboratory services using CPT and HCPCS coding systems.	
MBC 203: Inpatient Coding and ICD-10-PCS Systems	4 Credits
Overview of hospital inpatient coding using ICD-10-PCS, DRG assignment, principal vs. secondary diagnoses, and inpatient prospective payment systems (IPPS).	
MBC 204: Medical Claims Processing and Revenue Cycle Management	3 Credits
End-to-end training in preparing CMS-1500 and UB-04 claim forms, clearinghouse submission, claim editing, ERA/EOB posting, and denial resolution.	

SEMESTER 3: AUDITING, CERTIFICATION PREP & EXTERNSHIP (9 CREDITS)

MBC 301: Medical Chart Auditing and Quality Management	3 Credits
Techniques for auditing medical records for coding accuracy, clinical documentation improvement (CDI), compliance monitoring, and appeal drafting.	
MBC 302: National Certification Board Prep Seminar (CPC / CBCS / CCA)	2 Credits
Targeted exam review and mock exams for national coding certifications including AAPC's CPC, NHA's CBCS, and AHIMA's CCA/CCS exams.	
MBC 305: Medical Billing & Coding Administrative Externship (160 Hours)	4 Credits
Supervised 160-hour professional placement in a hospital health information management (HIM) department, billing service, or outpatient clinic setting.	

5. Tuition and Comprehensive Cost Structure

Transparent pricing covering tuition, digital encoder software licenses, coding manuals, and health informatics technical infrastructure.

Direct Institutional Costs (Billed Directly)

Expense Category	Cost (USD)	Description
Tuition (\$450 / credit × 36 credits)	\$16,200.00	Covers all 36 didactic, laboratory, and externship credits.
Institutional Program Fee	\$1,200.00	Includes student services, library access, technology fees, and LMS infrastructure.
Coding Encoder & Software Fee	\$650.00	Access to professional medical coding software, 3M encoder suite, EHR practice billing software, and clearinghouse simulation tools.
Health Informatics Tech Fee	\$300.00	Access to digital medical record databases, online testing engines, and virtual lab platforms.
Total Direct Institutional Costs	\$18,350.00	Total billed directly by the University of Justice.

Estimated Indirect Expenses (Out-of-Pocket / Third-Party)

Note: These items are not billed by the university but are required for program participation.

Expense Item	Estimated Cost (USD)	Notes
Coding Manual Set (ICD-10, CPT, HCPCS)	\$380.00	Annual official coding codebooks (AMA CPT Professional, Optum ICD-10-CM/PCS, HCPCS).
Textbooks & Digital Study Resources	\$350.00	Required bundles (Pathophysiology, Billing, Compliance).
Background Check & Drug Screen	\$120.00	Mandatory for administrative externship placement clearance.
National Coding Exam Fee (CPC / CBCS / CCA)	\$160.00 – \$399.00	Varies by credentialing association (AAPC, NHA, or AHIMA).
Professional Association Membership	\$90.00 – \$200.00	Student membership fee for AAPC or AHIMA.
Total Estimated Indirect Costs	\$1,100.00 – \$1,449.00	Estimated out-of-pocket expenses.

GRAND TOTAL ESTIMATED PROGRAM INVESTMENT: \$19,450.00 – \$19,799.00

6. Financial Aid and Payment Options

Financial support mechanisms for the Medical Billing & Coding Assistant Program include:

- **Institutional Monthly Payment Plans:** Interest-free monthly installment options spread across the 12-month program duration.
- **Workforce Innovation and Opportunity Act (WIOA):** State and federal workforce development grant funding for eligible health informatics candidates.
- **Veterans' Educational Benefits:** Approved for GI Bill® and VA educational funding streams.
- **Private Student Financing:** Specialized loan partnerships for short-term healthcare administration certificate students.

7. Professional Certification Pathway

Upon program completion, graduates are prepared to obtain nationally recognized credentials from leading professional associations:

- **CPC (AAPC):** Certified Professional Coder through the American Academy of Professional Coders.
- **CBCS (NHA):** Certified Billing and Coding Specialist through the National Healthcareer Association.
- **CCA / CCS (AHIMA):** Certified Coding Associate / Certified Coding Specialist through the American Health Information Management Association.
- **CPB (AAPC):** Certified Professional Biller credential pathway.