



EXECUTRAIN OF IDAHO  
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www.boisetraining.com

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## **Medical Insurance Coding Specialist/Coder Live Virtual Instructor led**

Dear (Candidate),

Thank you for your interest in ExecuTrain's Medical Coding Professional Program. Medical Coding Professionals have one of the 'brightest outlooks' for future upward mobility, increased wages and job opportunities.

The demand for medical coders is so high that the U.S. Bureau of Labor Statistics lists medical coder among the *20 fastest-growing occupations* and projects an 11% rise in jobs by 2028. An aging population drives the demand for medical billers and coders.

***Medical coding ranks third on the U.S. News and World Report's list of Best Jobs without a College Degree.***

Pre-Requisites: High Diploma or equivalent

Idaho Average Wage: \$43,000

ExecuTrain's Professional Coder certification course is the best one to start with as a new medical coder. Our training provides an education in physician-based, or professional fee, coding. This knowledge is foundational to all types of medical coding, such as outpatient coding, hospital coding, and risk adjustment coding.

Many medical coders enjoy lifelong careers with their CPC credential, while others choose to build on their education by training in a physician-based specialty or becoming certified for hospital coding.

What to Expect:

This course provides an education in physician-based coding, which is used in the majority of healthcare environments—medical offices, walk-in clinics, telehealth groups, labs. Students of the CPC Preparation Course will learn the proper use of CPT®, HCPCS Level II, and ICD-10-CM codes as they apply to these healthcare settings. Additionally, CPC training lays the foundation for advanced types of medical coding.

At ExecuTrain, a team of AAPC-certified coaches offers guidance and answer questions as you work through the training program. You should be able to attend all the required classes in less than 4 months.

Job Duties:

Compile, process, and maintain medical records of hospital and clinic patients in a manner consistent with medical, administrative, ethical, legal, and regulatory requirements of the healthcare system. Classify medical and healthcare concepts, including diagnosis, procedures, medical services, and equipment, into the healthcare industry's numerical coding system.

Program Cost: \$4,000

\*Installment Plans Available

<p><u>Course Textbooks and Materials Included:</u> Medical Terminology Textbook Buck's Step-by-Step Medical Coding with Workbook CPT® Professional Edition code book ICD-10-CM HCPCS Level II code book</p>
<p><u>Supplemental Materials not included in course cost:</u> Medical Dictionary Medical Terminology Flashcards</p>
<p><u>Required items not included in course cost:</u> This course can be taken using a PC with a dedicated internet connection Headset with microphone or equivalent</p> <p>Software Requirements: Windows 10 or later. Browser: The latest version of Google Chrome or Mozilla Firefox is preferred. Microsoft Edge is also compatible. Email software Microsoft Outlook, Gmail or similar Microsoft Word or equivalent (not included with enrollment) Adobe Acrobat Reader. Software must be installed and fully operational before the course begins.</p>

Thank you,

Cynthia Thompson  
Education Manager

Medical Coder Course	
<p><u>Description:</u>            The student will learn principles of medical coding related to the three main code books: CPT® , ICD-10- CM Code Set and HCPCS Level II. This course is recommended for anyone who is preparing for a career in medical coding for a physician's office and strongly recommended for anyone who is preparing for the CPC certification examination.</p>	
<p><u>Objectives:</u></p> <ul style="list-style-type: none"> <li>• Identify the purpose of the CPT® , ICD-10-CM, and HCPCS Level II code books</li> <li>• Understand and apply the official ICD-10-CM coding guidelines</li> <li>• Apply coding conventions when assigning diagnoses and procedure codes</li> <li>• Identify the information in appendices of the CPT® code book</li> <li>• Explain the determination of the levels of E/M services</li> <li>• Code variety of patient services using CPT® , ICD-10-CM, HCPCS Level II codes</li> <li>• List the major features of HCPCS Level II codes</li> <li>• Provide practical application of coding operative reports and evaluation and management services</li> </ul>	
<p><u>Content:</u></p> <ul style="list-style-type: none"> <li>• The Business of Medicine</li> <li>• Overview of ICD-10-CM • Applying the ICD-10-CM Guidelines</li> <li>• Accurate ICD-10-CM Coding</li> <li>• Introduction to CPT® , HCPCS Level II, and Modifiers</li> <li>• Integumentary System</li> <li>• Musculoskeletal System</li> <li>• Respiratory System</li> <li>• Cardiovascular System</li> <li>• Hemic &amp; Lymphatic Systems, Mediastinum, Diaphragm</li> <li>• Digestive System</li> <li>• Urinary System and Male Genital System</li> <li>• Female Reproductive System and Maternity Care &amp; Delivery</li> <li>• Endocrine System and Nervous System</li> <li>• Special Senses (Ocular and Auditory)</li> <li>• Anesthesia • Radiology</li> <li>• Pathology &amp; Laboratory</li> <li>• Evaluation &amp; Management Services</li> <li>• Medicine</li> </ul>	
<p><u>Medical Terminology</u>            Medical terminology is the language used to describe components and processes of the human body, medical procedures, diseases, disorders, and pharmacology. Simply put, it is the vocabulary that medical professionals use to describe the body, what it does, and the treatments they prescribe.</p> <p>Includes:            Medical Terminology Course Materials            Instructor Handouts</p>	<p>24 hours</p>

<p><u>Certified Professional Coder (CPC)</u>  A certified professional coder (CPC) is responsible for overseeing the medical coding for healthcare agencies. Coders make sure that medical coding used is in compliance with all medical coding laws and regulations and ensure that the coding used is for reimbursable expenses when necessary. They may provide regular coding, surgical coding, or hospital coding as appropriate. Certified coders are also sometimes responsible for communicating with patients regarding rejected claims or procedures, so effective communication skills are necessary. They must also maintain confidentiality and stay current on changes to insurance coding (especially Medicare).</p> <p>Certified professional coders usually work independently and report to an office supervisor or manager when necessary. They may interact with doctors, nurses, and office staffs, so good interpersonal skills are helpful. Coders usually work during regular business hours and rarely work overtime or weekends. There are no physical demands to this career, but the medical coding aspect requires a high level of repetition that can be mentally draining.</p> <p>Includes:  Buck's Medical Coding Online for Step-by-Step Medical Coding, 2021 Edition (Access Code, Textbook and Workbook Package)  ICD-10</p>	<p>50 hours</p>
<p><u>Healthcare Common Procedure Coding System (HCPCS)</u>  HCPCS is a collection of standardized codes that represent medical procedures, supplies, products and services. The codes are used to facilitate the processing of health insurance claims by Medicare and other insurers.</p> <p>Includes:  2021 HCPCS Level II</p>	<p>8 hours</p>
<p><u>The Health Insurance Portability and Accountability Act of 1996 (HIPAA)</u>  Federal law that required the creation of national standards to protect sensitive patient health information from being disclosed without the patient's consent or knowledge.</p> <p>Includes:  Instructor Handouts</p>	<p>3 hours</p>