



**MEDICAL
BILLING AND CODING
SPECIALIST PROGRAM
STUDENT HANDBOOK
2015 - 2016**

Welcome to the College of Health Sciences Department and to the Medical Billing and Coding Specialist Program!

Medical Billing and Coding is a very versatile health care career, which is forecast to be one of the fastest growing professions for the 21st century. As a professional medical billing and coding specialist you will have the knowledge and understanding to analyze medical records and assign codes to classify diagnoses and procedures while applying the principles of professional and ethical conduct. The program will prepare the student for an entry-level position as a medical coder in a hospital, clinic, physician's office or other healthcare facility.

If we were asked to offer some advice to new students as they begin our program, we would provide the following:

- ❖ Participate fully in all the experiences that you are offered.
- ❖ Have the ability to get along with and work well with others is a quality that employers are seeking.
- ❖ Be open to new ideas.
- ❖ Realize that you will probably have at least 2-3 hours of homework/study for each hour of instruction.
- ❖ Participate actively in your learning.
- ❖ Read this handbook carefully; it describes the program and departmental policies and procedures.

Everyone at Finlandia University wants you to succeed. Developing technical skills is important, but growing personally, working effectively with others, and being an ethical, professional person is equally important.

Again, welcome! Do not hesitate to come in to see us or ask for help.

Sincerely,

The Finlandia University Medical Billing and Coding Faculty

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*MBC Faculty and Staff are available to assist you.
We welcome any questions, comments or suggestions you may have.*



**THE MEDICAL BILLING AND CODING DEPARTMENT IS LOCATED WITHIN
THE COLLEGE OF HEALTH SCIENCES**

**INTRODUCTION TO THE
MEDICAL BILLING AND CODING (MBC) SPECIALIST
STUDENT HANDBOOK**

The guidelines contained within this publication have been prepared by the medical billing and coding faculty and is used in conjunction with the guidelines set forth by the University to inform students of the policies and the procedures that will guide you through your educational experience at Finlandia University and assist you with understanding the expectations within the medical billing and coding curriculum. It is the student's responsibility to read and understand the contents of the various University publications, including the MBC Student Handbook, Finlandia University Catalog and the Finlandia University Student Handbook. Questions can be directed to any medical billing and coding faculty member.

AASMBC PROGRAM DESCRIPTION

The Medical Billing and Coding Specialist Associate Degree is a two-year, five-semester program, including one summer semester. Freshman-level students take such courses as college English, math, anatomy and physiology, medical terminology, and computer applications. Later, students will take courses in medical office administrative procedures, EHRs, Insurance and Coding. One externship is also required for the completion of the program. Upon graduation, a student will have completed 68 credits. This curriculum provides the student with the opportunity for progression from the associate degree to a bachelor's degree in other disciplines such as health care administration, health sciences, nursing, nutrition, and health care law. Upon successful completion of the Medical Billing and Coding Specialist Program, graduates are eligible to apply for the Certified Coding Specialist (CCS) examination through the American Health Information Management Association (AHIMA).

Finlandia University Medical Billing and Coding Program Goals

The goal of the Medical Billing and Coding Specialist (MBC) program is to provide the student with a thorough understanding of the content of the medical record as well as extensive training in anatomy, physiology, the disease processes, and medical terminology. This program will provide the student with the knowledge and understanding to analyze medical records and assign codes to classify diagnoses and procedures while applying the principles of professional and ethical conduct. The program will prepare the student for an entry-level position as a medical coder in a hospital, clinic, physician's office, or other healthcare facility. An associate degree in medical billing and coding provides the basic knowledge, skills, and applied studies needed for entry-level positions in the healthcare field. The associate of applied science degree program in Medical Billing and Coding provides students with educational opportunities in a quality learning environment, fostering competence, compassion, and dedication to the expectations of their chosen profession. The program integrates learning with the exploration of spirituality and ethics to promote intellectual and personal growth and development. Students actively participate in a competency-based curriculum, both within the classroom and through various clinical sites. Students engage in critical thinking activities, demonstrate cognitive competencies, and develop professional behaviors.

Medical Billing and Coding Specialist Learning Outcomes

The Medical Billing and Coding Specialist curriculum provides the educational foundation for entry into the field of medical coding within a healthcare organization. Educational experiences are organized within the framework of identified collegiate competencies. Curricular content increases in scope and complexity as the MBC student progresses towards successful completion of each of the core competencies required for graduation from Finlandia University's Medical Billing and Coding Specialist Program. The learning outcomes are successfully completed through cognitive competencies demonstrating:

1. **Communication:** The MBC graduate exhibits effective interpersonal written and oral communication skills required for successful performance in the healthcare environment with the ability to read and understand medical documentation, diagnoses and procedures, and ensure that documentation supports the diagnosis and procedures performed.
2. **Analytical Skills:** The MBC graduate applies knowledge of medical terminology, the disease process, anatomy and physiology, and pharmacology to analyze medical records and assign codes.
3. **Citizenship:** The MBC graduate demonstrates personal and social responsibility for the safe and effective delivery of healthcare services; integrates knowledge of ethical and legal responsibilities into the workplace environment of healthcare organizations.
4. **Critical and Creative Thinking:** The MBC graduate will think critically, write and speak effectively, use basic computer applications, and understand human behavior in the context of the greater society.
5. **Cultural Heritage and Literacy:** The MBC graduate demonstrates sensitivity to cultural, spiritual, and religious influences when providing care to individuals in non-emergent healthcare environments.
6. **Concentration in Medical Billing and Coding:** The MBC graduate possesses the necessary entry level billing and coding skills to practice as a medical billing and coding specialist in a variety of practice settings.
7. **Concentration in Medical Billing and Coding:** The MBC graduate is successful in qualifying for certification/registration.

Medical Billing and Coding Student Learning Outcomes

Domain I. Data Content Structure and Standards
<i>DEFINITION: Academic content related to diagnostic and procedural classification and terminologies; health record documentation requirements; characteristics of the healthcare system; data accuracy and integrity; data integration and interoperability; respond to customer data needs; data management policies and procedures; information standards.</i>
Subdomain I.A Classification Systems
1. Evaluate the accuracy of diagnostic and procedural coding.
2. Manage diagnostic/procedural groupings
3. Evaluate the accuracy of diagnostic/procedural groupings
4. Consult reference materials to facilitate code assignment
Subdomain I.B. Health Record Content and Documentation
1. Interpret health record documentation using knowledge of anatomy, physiology, clinical disease processes, pharmacology, and medical terminology to identify codeable diagnoses and/or procedures.
2. Analyze the documentation in the health record to ensure quality and completeness of coding.
3. Determine when additional clinical documentation is needed to assign the diagnosis and/or procedure code(s).
4. Differentiate the roles and responsibilities of various providers and disciplines, to support documentation requirements, throughout the continuum of healthcare.
5. Engage with physicians and other healthcare providers to obtain further clinical documentation to assist with code assignment.
6. Differentiate patient encounter type
7. Determine and post charges for healthcare services based on documentation.
8. Determine and resolve coding edits such as Correct Coding Initiative (CCI), Medicare Code Editor (MCE) and Outpatient Code Editor (OCE).
Subdomain I.C. Data Governance
1. Access the quality of coded data
2. Determine the accuracy of abstracted data elements for data base integrity and claims processing.
3. Facilitate healthcare providers' education regarding reimbursement methodologies, documentation rules, and regulations related to coding.
Domain II. Information Protection: Access Disclosure Archival Privacy and Security
<i>Definition: Understand healthcare law (theory of all healthcare law to exclude application of law covered in Domain V); develop privacy, security, and confidentiality policies, procedures and infrastructure; educate staff on health information protection methods; risk assessment; access and disclosure management.</i>
Subdomain II.B. Data Privacy Confidentiality and Security
1. Comply with policies and procedures for access and disclosure of personal health information.
2. Determine/ report privacy issues/ problems
Subdomain III. H. Information integrity and Data Quality
1. Ensure data integrity and validity using software of hardware technology reliability.

Domain V. Compliance
<i>Definition: COMPLIANCE activities and methods for all health information topics. For example, how to comply with HIPAA, Stark Laws, Fraud and Abuse, etc.; coding auditing; severity of illness; data analytics; fraud surveillance; clinical documentation improvement.</i>
Subdomain V.A. Regulatory
1. Analyze policies and procedures to ensure organizational compliance with regulations and standards
2. Collaborate with staff in preparing the organization for accreditation, licensure, and/or certification.
Subdomain V.B. Coding
1. Analyze current regulations and established guidelines in clinical classification systems
2. Determine accuracy of computer assisted coding assignment and recommend corrective action
3. Determine the diagnoses and procedures that require coding according to the current coding and reporting requirements for acute care (inpatient) and outpatient services.
4. Interpret conventions, formats, instructional notations, tables, and definitions of the classification system and/or nomenclature to select diagnoses, conditions, problems or other reasons for the encounter that require coding to include the procedures/services that require coding.
5. Determine sequence of diagnoses and other reasons for encounter according to notations and conventions of the classification system and standard data set definitions (such as Uniform Hospital Discharge Data Set (UHDDS)).
6. Determine the sequence of procedures according to notations and conventions of the classification system/nomenclature and standard data set definitions (such as UHDDS).
7. Comply with the official classification systems coding guidelines (ICD9 and ICD10)
8. Comply with the official CPT/HCPCS Level II coding guidelines.
9. Take Part in the development of institutional coding policies to ensure compliance with official coding rules and guidelines.
10. Evaluate the accuracy and completeness of the patient record as defined by organizational policy and external regulations and standards.
11. Evaluate compliance with organization wide health record documentation and coding guidelines.
12. Appraise/ report compliance concerns/findings.
13. Determine the principal diagnosis, principal procedure, complications, comorbid conditions, other diagnoses and procedures that require coding according to UHDDS definitions and Coding Clinic for the classification systems.
14. Evaluate the impact of code selection on Diagnoses Related Group (DRG) assignment.
15. Verify DRG assignment based on Inpatient Prospective Payment System (IPPS) definitions.
16. Assign the appropriate discharge disposition.
17. Determine the reason for encounter, pertinent secondary conditions, primary procedure, and other procedures that require coding according to UHDDS definitions, Official Coding Guidelines, CPT Assistant, Coding Clinic for classification systems, and HCPCS.
18. Comply with Outpatient Prospective Payment System (OPPS) reporting requirements: <ol style="list-style-type: none"> a) Modifiers b) CPT/HCPCS Level II c) Medical necessity d) Evaluation and Management code assignment (facility reporting).

Subdomain V.D. Clinical Documentation Improvement
1. Examine discrepancies between supporting documentation and coded data
2. Develop appropriate physician queries to resolve data and coding discrepancies
3. Develop documentation improvement projects.
4. Create a chain of command for resolving unanswered queries.
5. Create consequences for non-compliance to queries or lack of responses to queries in collaboration with providers
6. Develop CDI policies and procedures in accordance with AHIMA practice briefs.
Domain VI. Leadership
<i>Definition: Leadership models, theories, and skills; critical thinking; change management; workflow analysis, design, tools and techniques; human resource management; training and development theory and process; strategic planning; financial management; ethics and project and management</i>
Subdomain: VI.A Leadership Roles
1. Ensure affiliation with professional organizations devoted to the accuracy of diagnosis coding and reporting.
2. Advocate CDI efforts throughout the organization
3. Collaborate working relationship with CDI team members for reconciliation of queries
4. Collaborate with physician champions to promote CDI initiatives
Subdomain VI.E., Training and Development
1. Facilitate healthcare providers' education regarding reimbursement methodologies, documentation rules, and regulations related to coding.
Subdomain VI.H. Ethics
1. Comply with ethical standards of practice
2. Evaluate the consequences of a breach of healthcare ethics
3. Assess how cultural issues affect health, healthcare quality, cost, HIM
4. Create programs and policies that support a culture of diversity

Program of Study

The MBC program offers a unique two year program of study. Successful graduates will be awarded an Associate of Applied Science Degree.

Two Year Schedule

FIRST SEMESTER (fall)			18 CREDITS	SECOND SEMESTER (spring)			16 CREDITS
*ENG 103	College English I	3		*ENG 104	College English II	3	
*BIO 171	Anatomy & Physiology I	4		BIO 172	Anatomy & Physiology II	4	
*MAT ___	MAT 140 or above	4		PSY 101	Introductory Psychology	3	
*CIS 102	Intro Computer Apps	3		HSC 118	Medical Term. for Health Care	3	
COM 101	Intro to Communication	3		REL/FNS	Religion/ Finnish elective	3	
**UNS 115	Sisu Seminar	1					
THIRD SEMESTER (summer)			8 CREDITS				
HSC 246	Law & Ethics for Health Professionals	2					
MAS 205	MA Administrative Procedures	4					
MAS 207	Electronic Health Records	2					
FOURTH SEMESTER (fall)			13 CREDITS	FIFTH SEMESTER (spring)			13 CREDITS
HSC 240	Pharmacology for Allied Health	2		MBC 256	Procedure Coding II	3	
HSC 260	Pathological Conditions	2		MBC 266	Diagnosis Coding II	3	
MAS 215	Medical Insurance Billing	3		MBC 270	Billing and Coding Externship	4	
MBC 252	Procedure Coding I	3		HCM 442	Health Information Systems	3	
MBC 262	Diagnosis Coding I	3					

***Must be successfully completed before taking courses at the 300-or400- level.**

****Required for students with less than 24 earned college-level credits.**

AAS – Medical Billing and Coding Specialist Program Course Descriptions

Note: Numbers in parentheses denote credits assigned for theory (1st) and lab/clinical components (2nd). Contact hours for lab/clinical are calculated on a 3-hour per credit ratio.

HSC118 Medical Terminology for Health Care (3-0)

This course focuses on the component parts of medical terms: Prefixes, suffixes, combining forms, and root words. Students will learn, through a step-by-step word-building process, to understand and to be understood in the use of the language of medicine. Students practice formation, analysis and reconstruction of terms. Emphasis is placed on spelling, definition and pronunciation. This course provides an introduction to body systems, their operative, diagnostic, therapeutic and symptomatic terminology, as well as systemic and surgical terminology. Students study the application of these terms to medical documentation, physical examinations, and medical diagnostic procedures. Mastery of medical terminology is essential for successful administrative, clinical and laboratory interaction in the complex health care environment.

HSC240 Pharmacology for Allied Health (2-0)

This course introduces students to the classification of medications and basic pharmacological principles. Students apply these basic principles to the identification of common medications, medication preparation, and administration of medications and effects of medications on major body systems. (Prerequisites: BIO171, BIO172 and MAT140)

HSC246 Law and Ethics for the Health Professions (2-0)

This course engages the student in legal and ethical issues within the health care environment. The focus will be on identifying complex legal and ethical issues, tort and criminal laws, and rules governing medical and health care practices. Specific issues of professional legal and ethical conduct, laws governing confidentiality, bioethics, medical records, reporting, end-of-life and beginning-of-life issues, legal and ethical issues and the effects of managed care, and risk management procedures will be examined. (Prerequisite PHL 212)

HSC260 Pathological Conditions (2-0)

Major pathophysiological concepts will be studied from the cellular level to the resultant abnormal functioning of the organ systems. Topics include inflammation, immunity, neoplasia and allergy, as well as the most commonly acquired and hereditary diseases. Disorders commonly encountered by practicing physical therapist assistants will be particularly emphasized. Concepts from anatomy and physiology provide the foundation for exploring human dysfunction. (Prerequisite: BIO171, BIO172, PSY 101)

MAS205 Medical Assistant Administrative Procedures (3-1)

This course introduces medical assistant students to office management and business administration. Students will learn to schedule appointments, file, manage records, perform telephone and reception duties and communicate effectively with patients, community members, and other health care and medical office staff. Prerequisites: CIS102 or higher, BUS201, ENG 104, HSC118. Co-requisites: HSC 240, HSC 246, acceptance into the Medical Assisting Program.

MAS207 Electronic Health Records Management (2)

Introduction to the basics of medical records management. This course provides the opportunity to put administrative skills learned in previous coursework into practice in a simulated medical setting using electronic health care records (EHR) and allows the student to learn about EHR management practices. Prerequisites: HSC 246, MAS 205

MAS215 Introduction to Medical Insurance Billing (2-1)

Introduction to medical office insurance billing procedures, patient financial records, computerized billing, collection procedures, and the identification and billing of various insurance plans including private, Medicare, Medicaid, TRICARE, Worker's Compensation, HMO, group insurance plans, CHAMPUS, and disability. Prerequisites: HSC 118, MAS 205

MBC252 Procedure Coding I (3)

Introduces the student to a coding system used by physician's offices and outpatient facilities for coding outpatient procedures. The course will include instruction on how to analyze, assign, and sequence coding procedures in the CPT and HCPS coding systems. Fall semester. Prerequisite CIS102, HSC118 and MAS207.

MBC256 Procedure Coding II (3)

Introduces the student to a coding system used by hospitals for coding inpatient procedures. The course will include instruction on how to analyze, assign, and sequence coding procedures in the ICD-10-PCS coding system. Spring semesters. Prerequisite MCB252.

MBC262 Diagnosis Coding I (3)

Introduces the student to ICD-10-CM data set used for reporting diagnoses. This course will also include instruction on how to classify and index diagnoses in the healthcare setting. The various uses for diagnosis codes will be discussed as well. Fall semesters. Prerequisite CIS 102, HSC 118 and MAS 207.

MBC266 Diagnosis Coding II (3)

Further expands upon Diagnosis Coding I. The application of coding guidelines will continue to be reinforced. Spring semesters. Prerequisite MBC262.

MBC270 Billing and Coding Externship (4)

Prepares students for challenges in the workplace by improving their critical thinking and problem-solving skills using case studies. Students will examine, analyze, develop and implement workplace solutions. During the externship phase of training, the student will experience various aspects of working in the insurance billing and coding field. Spring semesters. Co-requisites MBC 256, MBC 266. Spring semesters.

MBC Program Statement of Conduct and Ethical Standards

The student will abide by the American Health Information Management Association (AHIMA) Code of Ethics.

The following ethical principles are based on the core values of the American Health Information Management Association 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 healthcare 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 a person legally authorized to consent on behalf of 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 an official capacity, taking into account the applicable statutes 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 management 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 management 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
- Misusing sensitive information about a competitor
- Violating the privacy of individuals

Refer to the [AHIMA Standards for Ethical Coding](#) for additional guidance.

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 management 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 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 interests 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 qualifications, 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 equitably, deal effectively with all races, cultures, disabilities, ages and genders.

11.4. Ensure all voices are listened to and respected.

Medical Billing and Coding Specialist Student Code of Conduct

In congruence with the professional values outlined previously, medical billing and coding students at Finlandia University will adhere to the following guidelines for professional behavior in addition to those set forth in the Finlandia University Student Handbook. Not adhering to the policies and procedures set forth by the University and/or Medical Billing and Coding Department will be grounds for disciplinary action.

- Adherence to the standards outlined in the program competencies and level outcomes, the AHIMA Code of Ethics.
- Respect for peers, faculty, university and clinical agency personnel. It is the instructor's prerogative to dismiss a student from class or clinical who exhibits rude, disrespectful, or disruptive behavior.
- Adequate preparation for, and participation in, both classroom and clinical assignments.
- Academic honesty in all class and clinical work (see Academic Honesty, Cheating and Plagiarism)
- Daily and timely attendance in class and clinical (see Attendance Policy). Leaving a class early or arriving late is disruptive and will not be accepted.
- Notification of appropriate persons when unable to attend class or clinical as required for both class and clinical activities (see Attendance Policy and refer to course syllabi).
- Exams and assignments are completed when scheduled (see Exam/Quiz Policy).
- Confidentiality is maintained at all times in class and clinical settings. Instructors are to arrange clinical experiences, including clinical make up sessions. Students are not to contact agencies, hospitals, or other health care personnel to arrange clinical activities unless directed to do so by the appropriate faculty member (see HIPAA and Confidentiality Policy).
- Adherence to all University and Medical Billing and Coding Department policies in class and clinical settings including, but not limited to, those policies addressing the use of illicit drugs and alcohol, dress codes, and academic honesty.

Medical Billing and Coding faculty and clinical instructors will document behaviors and situations that deviate from the established standards. Faculty will determine any further discussions and actions to be taken involving the student and parties involved. Student input will be solicited as needed.

ACADEMIC HONESTY

Academic honesty is always a serious concern to faculty and therefore the medical billing and coding faculty at Finlandia University expects that all students will maintain a high standard of academic integrity. The Medical Billing and Coding Department requires a rigid adherence to academic honesty as part of the Medical Billing and Coding Student Code of Conduct. Confidentiality and respect for the patient must be maintained at all times.

Academic honesty applies to exams and written assignments for class, as well as assigned clinical activities. This includes the accurate and timely reporting of clinical incidents and interactions to the instructor and appropriate clinical agency personnel. Academic honesty statements and guidelines for theory classes, test taking, and clinical practice are further defined for each course in the course syllabi.

Any student who breaches academic honesty is believed to place patient safety at risk in addition to jeopardizing his or her own career potential. Student medical billing and coding specialists share in the responsibility of reporting errors and events to their instructors; this includes reporting classmates and peers who may be jeopardizing patient safety or student performance by cheating.

CHEATING AND PLAGIARISM

Cheating is committing fraud on a record, report, paper, computer assignment, examination, or other course requirement. **Plagiarism** is taking someone else's ideas, words, statements, or other works and presenting it as your own work without the proper acknowledgment. This includes the work of fellow classmates. **Self-plagiarism** is defined as submitting your own work for multiple course assignments without the expressed permission of the course instructors.

Any student found guilty of cheating or plagiarism at any time may be dropped from a course and/or receive an "F" grade for the test, assignment, or the entire course. The course instructor has the authority to determine the response to the violation. The student(s) involved in such an incident may appeal to the academic dean. (See Appeals Process in this document and in the Finlandia University Catalog.)

WRITING STANDARDS

Communication is critical for student success. As such the Medical Billing and Coding Department has adopted consistent writing standards across the curriculum. Medical Billing and Coding Specialist students are required to use the guidelines presented by the American Psychological Association (APA) in the most recent edition of the APA Publication Manual for all written assignments. Copies of the text can be found in the Maki Library. Additional information is available on the APA website at www.apa.org

Clinical paperwork is specifically assigned for each course. Requirements may vary; however, standards regarding plagiarism still apply. Students who are unsure of the quality and accuracy of their work are advised to contact their instructor(s) prior to submitting their final work.

CERTIFICATION

Upon successful completion of the medical assistant curriculum at Finlandia University, the medical billing and coding specialist student is eligible to apply to take the Certified Coding Specialist (CCS) examination sponsored by the American Health Information Management Association (AHIMA).

Admission Standards for the Medical Billing and Coding Specialist Program

A. Introduction to Admission

Graduates of the Finlandia University Medical Billing and Coding Specialist Program receive an associate in applied science degree. The program consists of a minimum of 33 credits in general education, and 34 credits in Medical Assisting (MA) and Medical Billing and Coding (MBC) education. Incoming students with less than 24 earned college credits must take the 1 credit Finlandia Sisu Seminar. A student may be admitted into the program:

- a) As a high school graduate
- b) As a transfer student
- c) As a student with a General Education Degree (GED) if they meet the University's admission requirements.

The student to faculty ratio is considered when determining the number of students to admit into the (technical component of the) program. Students applying for admission to the program will be considered without regard to race, color, national origin, gender, disability, or age.

B. Admission to the Medical Billing and Coding Specialist Program

To be eligible for admission into the MBC program, the student must have:

1. Completed an application for admission to Finlandia University.
2. Received a high school diploma or equivalent with an overall grade point average of 2.5 "C+" or higher on a scale of 4.0 (or the equivalent).
3. Completed one year of high school algebra with a grade of "C" or better.
4. Completed two years of high school science in biology and anatomy/physiology or chemistry with a grade of "C" or better.
5. Completed a high school class that incorporates the use of computers such as word processing and basic computer skills

6. Students who do not meet the above criteria are required to complete preparatory college courses with a grade of “C” or better.
7. Transfer students will contact the MBC faculty for assistance in planning a course of study. They must have a GPA of 2.5 or higher from the previous college. Transfer credits from other colleges will be accepted per University policy.

C. Pre-Medical Billing and Coding

The title of Pre-MBC student belongs to any student who has not yet met the general education requirements of the MBC program.

D. Progression Criteria into the Technical Component (2nd Year)

Progression into the technical component (second year) of the program requires the following:

1. Successful completion of the first year curriculum with a GPA of 2.5 or above.
2. Successful completion of all coursework with a “C” or better. Required courses may be repeated only once.

The MBC student must complete the technical component (final year) of the program as a full-time student. Students who have successfully completed the first year of the Medical Billing and Coding Specialist curriculum are required to complete a letter of application for entry into the technical component. A limited number of eligible students are accepted into the technical component each summer, based on available clinical site placements. If the number of eligible applicants exceeds the number of positions available, the faculty reserves the right to select the applicants based on academic qualifications and performance. The remaining applicants will be placed on a waiting list and are encouraged to apply for admission to the Medical Billing and Coding Specialist technical component the following year. Transfer students are advised to contact the Medical Billing and Coding Specialist program director for assistance in planning their academic plans of study.

E. Additional Requirements

These requirements must be met before you can begin the technical component (final year) of the program.

1. CPR Training (**Student Cost**): The student must submit evidence of current training in adult and infant CPR. Training is available through the local chapter of the Red Cross. A recent valid

certificate from a course you completed at a YMCA/YWCA, health department, or fire department, will be accepted.

Local Red Cross, Houghton/Hancock Office: 906-482-8085

2. **Physical Examination (Student Cost):** The student must submit a completed physical examination by a physician or physician's assistant with no limitations found that would interfere with successfully performing medical assisting tasks required by the MBC program during the technical phase.
3. **Immunization/Health Tests (Student Cost):** The student is required to provide a current record of a negative tuberculosis skin test. If a TB test is positive, a negative chest x-ray no older than twelve months is required. The student must provide proof of immunization of Rubella, Rubeola (measles) and Mumps. Proof of a chicken pox immunization must be provided unless the student can provide a note from their physician that they have had the chicken pox. It is recommended that the student be immunized for Hepatitis B. However, in the event that the student does not want this immunization, the student must sign a Hepatitis B Immunization Information and Release from Responsibility Form.

Forms are available in the MBC Department Administrative Offices and include the following:

- Physical Examination and Immunization Form
- Personal Health and Medical History Form
- Hepatitis B Immunization Form and/ or Release from Responsibility Form

4. **Health Insurance (Student Cost):** During the technical component of the final year of the MBC program, the student is required to provide evidence of basic health insurance. If a student does not have such insurance, the MBC program can recommend short-term policies and provide information from different vendors. This insurance is at the cost of the student. Finlandia University and its affiliated health care agencies assume no fiscal responsibilities for injuries or illnesses incurred while performing duties as a medical billing and coding student.
5. A criminal history check is required prior to clinical placement for all MBC students, and will be organized by the MBC program faculty during the technical component.
6. Finlandia University provides students with the necessary malpractice insurance and the premium is included in tuition fees.

F. Mandatory Meetings

In addition to the requirements to be fulfilled after a student is accepted into the program, the student must meet with their advisor once during orientation into the program and twice during each semester. Any other meetings deemed “mandatory” will be determined throughout the school year and each student will be informed in advance. During the technical component of the program, the student site coordinator will meet the students at designated intervals.

G. Student Considerations

After graduation, the student is not guaranteed employment within driving distance of Finlandia University.

Clinical education sites in the local area are servicing nursing students from two schools, physical therapy students, medical assisting students and will service medical billing and coding students. Upon saturation of the local clinical sites, students may be asked to travel more than 50 miles to do their externships. The students are responsible for funding transportation and room/board for these experiences. Some facilities may provide room and board at no charge or at varying costs.

Students are required to follow the policies and procedures of their designated clinical and administrative sites, and may be required by these sites to obtain additional immunizations or health tests. Prior to beginning the externship portion of the MBC Program the students will be informed of the policies and procedures of their clinical site. Such information will include but is not limited to confidentiality and dress code. The students will be evaluated by their site coordinator at varying intervals.

Progression and Retention in Medical Assistant Program

A. Grading Scale

Letter Grade	Scale	Letter Grade	Scale
A	100-94	C	76-74
A-	93-90	C-	73-70
B+	89-87	D+	69-67
B	86-84	D	66-64
B-	83-80	D-	63-60
C+	79-77	F	<59

B. Academic Retention in the Medical Billing and Coding Specialist Program

Retention Requirements; to retain your position in the MBC Program for the Technical Component (second or third year):

1. Students must follow the MBC program class sequence as outlined in the MBC program manual. All pre-requisite courses must be successfully completed prior to entering the final externships.
2. The student needs to maintain at least a 2.0 (“C”) in any individual course but must have a cumulative GPA of 2.5 (“C+”) in the required general education course work. If these requirements are not met, the MBC faculty will review the student’s academic record on a case by case basis each semester to determine if the student will be declared Pre-MBC or MBC.
3. In order for students to pass the class he/she must receive an average of 74% or above in the given course which encompasses the cognitive competencies.
4. Students must demonstrate appropriate professional behaviors as defined by the medical billing and coding specialist code of conduct which include; commitment to learning, interpersonal skills, communication skills, problem solving, critical thinking, effective use of time and resources, responsibility, stress management, professionalism, and use of constructive feedback.
5. If at any time during the semester a student falls below a 2.0 grade point average in one class, s/he must meet with the instructor to determine if there is a remedy for the situation.
6. If at mid-semester* a student falls below a 2.0 grade point average in more than one class the

student must write a letter to the program director with an explanation of why they think they are failing and what they intend to do to correct the problem(s).

7. If at any time during the semester a student is not demonstrating the proper professional behaviors as determined by the MBC faculty, a learning contract will be developed to facilitate the adoption of appropriate professional behaviors.
8. A cumulative grade point average (GPA) of 2.0 must be maintained throughout the program in order to graduate.

*Fall mid-semester is after the fifth week - Spring mid-semester is after the sixth week

C. Advising

Advising is mandatory for all MBC students. Each MBC student is assigned a Medical Billing and Coding Faculty Advisor who will serve as that student's advisor throughout the AASMBC program. The student will be notified of his/her appointed advisor upon entry into Finlandia University and should plan to meet with the advisor early in the first semester. Academic advising at regular intervals is strongly encouraged and each student is required to meet with his or her advisor at least twice during each semester. The Faculty Advisor will assist and advise the student on academic concerns and career planning. It is the student's responsibility to schedule and keep appointments with the advisor. The student and Faculty Advisor will track these meetings.

Faculty office hours are posted on the door of each individual's office and are also available through the medical billing and coding administrative assistant. If a faculty member is not in their office, students should either leave a message with the administrative assistant or leave a voice message on the faculty member's private line. Faculty Advisors will respond as soon as they are able. Students should include their home phone number and the hours during which they can be reached with the message. Setting an appointment with your advisor is the best way to ensure a successful meeting.

Students should consult their advisors for, although not limited to, the following:

- For assistance in planning class schedules prior to the next semester's registration.
- When adding, dropping, or changing a class.
- When experiencing academic difficulty.
- Prior to signing the "Application for Graduation" form required for graduation.
- When you simply need to talk.

D. Student Support Services

A variety of resource centers are available for student learning and testing. The medical billing and coding laboratory provides the space for students to practice and test mastery of skills used in patient care. The Maki library contains a large collection of medical billing and coding texts, medical assistant texts, nursing texts, journals and web sites for student use. Students are encouraged to use the library. The Teaching Learning Center (TLC) offers the opportunity to strengthen academic skills in all course subjects. Tutoring services are available once individual arrangements have been made.

Computers are available in the Maki Library, the Business Computer Lab (also in the Maki Library), for student learning. Use of this equipment in the Business Computer Lab can be scheduled through an instructor or lab personnel. Printing is available in the Maki Library.

Refer to the Student Development section of the Finlandia University catalog for more information on student support, student services, and student activities available.

E. Retention Statement

The AASMBC degree signifies the beginning of professional medical billing and coding specialist practice. The medical billing and coding faculty recognizes a responsibility to both students and patients to produce graduates able to carry out medical billing and coding functions that support the profession. If, in the best professional judgment of the medical billing and coding faculty, a student appears to be potentially unsafe to him or herself, to patients, or colleagues, the medical billing and coding faculty will refuse to allow the student to attend or remain in the clinical setting, potentially preventing him or her from meeting the course and program requirements.

F. Withdrawal From Medical Assisting Studies

Students who have discontinued enrollment for one or more semesters must apply by letter to the Office of the Registrar requesting permission to be readmitted to the University. Transcripts of courses taken from another institution while away from Finlandia University will be required for re-entry. Students who choose to withdraw from the Medical Billing and Coding major are encouraged to meet with their instructor and advisor to discuss options for readmission.

G. Probation

The Medical Billing and Coding Department adheres to the probation policies set forth by the University. Students in the AASMBC program may be placed on probation if they demonstrate an inability to meet the

clinical competencies in the areas of safety and adherence to the program standards. The student and advisor will be notified by the instructor should the situation arise. Learning contracts are instituted as needed.

H. Dismissal

A student is subject to dismissal from the AASMBC program for any of the following:

1. The policy on performance is not maintained and/or for health problems such that it is inadvisable for the student to remain in the program, and/or persistent behavior that is not reflective of safe MBC practice.
2. The faculty has the responsibility to exercise its professional judgment in determining a student's competence to continue in the program. During his/her end-of-semester review, the faculty considers not only the academic standing but also the student's professional behavior as defined by the medical billing and coding code of conduct. Acceptable grades are only one indicator of a student's ability to perform as a medical billing and coding specialist. A student who achieves acceptable academic standing but demonstrates unacceptable professional behavior may not be recommended for an internship and may be dismissed from the program. A decision not to place a student (to withhold externship placement) or a dismissal from the program will occur only after a student has been notified of the faculty's concerns and given the opportunity to correct the deficiencies.
3. A student may be dismissed for substance abuse.
4. Any student found guilty of cheating on an examination or plagiarizing on a paper or report will be dropped from the class and will receive an "F" in the class. This will make the student ineligible for reentry into the MBC program. The MBC instructor of the class has the authority to take the above action. Any student(s) involved in such an incident may initially appeal to the program director if she/he does not agree with the actions of the instructor and then to the Provost if further review is necessary.
5. It is the responsibility of each student to read the Finlandia University catalog, student handbook and the Medical Billing and Coding Specialist Student Handbook and to seek consultation with the department personnel should specific problems or questions arise.

Procedure:

- Document the student's misconduct, poor academics, inappropriate externship/professional behaviors, etc. Place this in the student's file.

- Provide documentation of the necessary action used to reprimand the student. Include dates of phone calls-content of conversation, dates of meetings with student-content, written notification. Place all documentation in the student's file.
- Upon a dismissal decision, a letter will be sent to the student stating the reasons for dismissal. Recorded documentation will be provided to the student upon request.
CC: Deans of College of Health Sciences
CC: Director of Student Affairs

I. Readmission

Requests for readmission will be granted on a first-come, first-served basis dependent upon the following:

1. Space availability.
2. The evaluation of previous performance.
3. Satisfactory completion of course pre-requisites and any deficiencies as identified by the faculty.
4. The demonstration of competency in previously learned clinical skills, procedures, and theory content.
5. The student's cumulative GPA.

Students may be required to repeat previously taken medical billing and coding and support courses to ensure competency in coding and billing skills, procedures, and theory content. Students requesting readmission will be subject to the departmental policies found in the AASMBC Student Handbook in effect and published at the time of re-entry.

J. Appeals Process

Any student who is the subject of academic action via grades or professional behaviors may appeal by taking the following steps:

1. The matter should be discussed with the course instructor. Many times actions can be easily resolved at this level.
2. If the matter is not resolved, the student is advised to meet with either his or her advisor or the Medical Billing and Coding Department Chair. These meetings are generally informal but should be scheduled in advance to ensure that the appropriate time is made available.

3. If the matter remains unresolved, the student submits a written appeal to the Medical Billing and Coding Department Chair for a response. Statements should include a summary of the situation, actions taken and a proposed plan for successful resolution. Written appeals will be reviewed for further action, which may include a formal hearing with the MBC faculty.
4. If at this point, the matter remains unresolved, the complaint will be submitted by the Medical Billing and Coding Department Chair to the Deans of the College of Health Sciences, who will conduct a hearing on the related issues.

For additional information, see Grade Appeal Process found in the University Catalog.

K. Disciplinary Action Appeals

The procedure for the appeal of a *disciplinary action* is outlined in the Finlandia University Student Handbook.

L. Social Or Personal Appeals

Concerns relative to housing, parking, or other personal living matters should be appealed to the Director of Residence Life.

Medical Billing and Coding Specialist Program Policies

A. Attendance Policy

Attendance is **required**. Students are expected to be **punctual** in attending all scheduled sessions of the course for satisfactory achievement of the learning outcomes. This includes classes, clinicals, medical assisting skills lab, examinations, **and student-faculty evaluation sessions**. Failure to meet the attendance requirements will be cause for disciplinary action.

If a student cannot attend a scheduled learning activity due to illness or extraneous circumstances, it is the responsibility of the student to contact the course and clinical instructor prior to the scheduled class/clinical start time.

Absences or tardiness that prevent the student from meeting the course outcomes will be reviewed by the faculty to determine if the student can continue in the MBC program sequence. Students should have a “Plan B” in place for such things as childcare and transportation to minimize absences. Students are advised to review the attendance policy in the University Catalog.

B. Attendance At Externship

Externship contact hours associated with each course contribute meaningfully to the students’ ability to meet course objectives and become competent employees in the delivery of medical billing and coding. The student enrolled in a clinical course is responsible for the following:

- Contacting both the instructor and clinical agency when unable to attend clinical or when arriving late.
- Abiding by the existing rules and regulations of the assigned clinical agency, including the dress code requirements.
- Providing his or her transportation to and from the assigned clinical agency.
- Appearing neat, clean, and well groomed at all times.
- Being fully prepared mentally and physically to carry out the billing and coding assignment including the completion of pre-clinical assignments. Students are expected to make the appropriate and necessary arrangements in his or her work schedule and personal life in an effort to meet the course and clinical requirements.
- Standard precautions are to be used in the care of all persons regardless of their diagnosis or possible infection status. These precautions apply to blood, all body fluids, secretions, and excretions (except sweat), non-intact skin, and mucous membranes.

- Contacting the clinical instructor when unforeseen circumstances or changes in personal status arise (such as change in physical health, potential reaction to latex, inability to meet course/clinical outcomes).

The MBC faculty reserves the right to require a student to repeat a clinical course when, in the opinion of the clinical instructor, the time the student has been absent from the externship makes it impossible to accurately assess the student's attainment of the course outcomes and competencies.

Make-up time is not guaranteed and depends upon the availability of faculty and clinical sites. The student is responsible for any costs involved in make-up or repeating the course.

C. Exam/Quiz Policy

1. The student is required to take exams and quizzes when scheduled.
2. Absence from an exam or quiz will be considered excused only in the event of illness or other imperative reasons.
3. Students must ask the instructor for permission to postpone the exam or quiz prior to the time of the scheduled exam. If there are compelling circumstances, the instructor may waive the requirement for prior notification.
4. There will be no make-up for missed exams or quizzes without the prior approval of the instructor.
5. If approval has been granted, the student must take the missed exam the first day he or she returns to class. An alternate form of the original exam may be given (example: essay or oral).
6. The student will receive a grade of zero (0) for the missed exam if the above guidelines are not followed.
7. Tardiness: Students who arrive after an exam or quiz has begun will be allowed to enter only at the discretion of the instructor.

D. HIPAA and Confidentiality

The Health Information and Portability Act of 1996 was developed to provide consumers with greater access to health care insurance, to protect the privacy of health care data, and to promote more standardization and efficiency in the health care industry. All students will be held responsible for following the regulations as set forth by the individual clinical agency during all clinical experiences.

In general, any information, either written or oral, having any relevance to patient care is considered strictly confidential. Discussion regarding patients is restricted to the proper professional or academic environment only under the supervision of appropriate health care professionals and/or MBC faculty. Under no circumstances is it ever appropriate to discuss one patient with another patient, nor to discuss a patient case

in a public area. See course syllabi and faculty instructions for further specifics associated with each assigned clinical site. Any breach of confidentiality may be grounds for dismissal from the MBC program

Although the MBC faculty acknowledges that there are times when this issue seems unclear it is important to note that this is an extremely sensitive and legal issue. Examples demonstrating a distinct breach of confidentiality include, but are not limited to:

1. Using a patient's name or identifiers in written assignments.
2. Discussing confidential information, including a patient's name and identifying characteristics, in inappropriate areas such as but not limited to cafeterias, non-MBC classrooms, elevators, or hallways.
3. Discussing confidential information about a patient with third parties who do not have a clear and legitimate need to know, including but not limited to other patients, family members without the proper clearance, other students, and faculty outside of the MBC program.
4. Photocopying *or photographing* any portion of the patient's record or the patient in the clinical setting without the expressed permission of the clinical agency. This includes the use of cell phone cameras, Xerox machines, fax machines, electronic transfers, etc.
5. Seeking information on patients when it is not necessary for you to do so in order for you to carry out your role as a student.
6. Leaving the clinical setting with any records or documents related to a client, including any paperwork which contains identifying information about clients (for example, the last name).

E. Students Who Work For Compensation

The faculty of Finlandia University's MBC program realizes the energy and time commitment needed for success within the program and therefore recommend that students enrolled in the program limit the amount of time they are employed. The faculty emphasizes that it is the responsibility of the student to regulate his or her time and activities outside of school in order to ensure success in meeting MBC program competencies. If a student chooses to work while enrolled in the program, the employing facility assumes the legal responsibility for the actions of the student during working hours. Finlandia University holds no responsibility for the student's actions outside of scheduled course or clinical activities.

Under no circumstances is a student permitted to represent himself or herself as a student billing and coding specialist, either verbally, in writing, or dress, while engaged in employment activities. This includes the requirement that students are not to wear the Finlandia University ID badge and are not to sign anything as a student MBC apart from those activities assigned under the direction of the clinical or course instructor.

F. Transportation

Students must provide their own transportation to and from class and clinical experiences regardless of location. It is advised that students consider the time involved for travel and make the necessary arrangements for a timely arrival each day, allowing time for such unforeseen events as road construction, deteriorating road conditions, or car failure.

Should unforeseen events lead to a missed clinical experience, students are responsible for arranging their makeup time with their clinical instructor.

G. Use Of Technology In The Classroom And Clinical Settings

Cell phones and personal communication technologies are not to be used in the classroom or at the clinical facilities. Cell phones and other personal communication devices are to remain off during classroom, lab, and clinical activities. If you are expecting an emergency call, please place your phone/beeper on vibrate or provide the caller with an alternative contact number and let your instructor(s) know that you are expecting the call. You may check your messages during official break times. Beepers issued by a clinical site are exempt under this policy.

There is to be no electronic text-messaging or internet surfing during classroom, lab, or clinical activities unless instructed to do so as part of a class assignment. The use of personal computers during these times is limited to the completion of specified class/clinical assignments and note taking.

Cell phones and other personal communication devices are not to be re-charged in the classroom, lab or any clinical setting.

FINLANDIA UNIVERSITY

AAS MEDICAL BILLING AND CODING SPECIALIST DEPARTMENT

Student Handbook Verification Form

I have obtained and read the following Finlandia University publications:

- Associate of Applied Science Medical Billing and Coding Department Student Handbook (Summer 2015 Edition).
- Finlandia University Catalog 2015-16
- Finlandia University Student Handbook 2015-16

I have scheduled an appointment OR have met (circle one) with my faculty advisor.
Date of appointment _____

Please return the signed and dated form to the Medical Billing and Coding Department office. This form will be placed in your student file for future reference.

Student Name – Printed

Student Signature

Date

Received in MBC Department Office _____

Signed: _____