

Medical Coding Preparatory®

Syllabus for MCP Prep to prepare for the AAPC's Certified Physician Coder and AHIMA's Certified Coding Specialist-Physician

Strategic Plan for (Your Name):_____ **Purchase Date:**_____

Syllabus Contents

This is an action-oriented syllabus document that requires you to do the following before you purchase our prep, or any prep for a certification exam. Please print out the 12 pages.

1. **Develop a Strategy:** Complete your personal strategic plan to see if you are ready and willing to make the commitment required for self-study.
2. **Make a Study Plan:** Review the Course Lessons content for Tier 1, Modules 1-5. Note that if you have a strong medical terminology (anatomy, physiology, pathophysiology) background, you do not need to do the first eBook review unless you want to. It is optional.
3. **Review Requirements:** Compare and contrast CPC versus CCS in regard to testing and costs. The fees and links are provided for you below.
4. **Create a Budget:** At the end of this document is an area where you may use the information provided in the review requirements taken from AAPC and AHIMA websites and create your cost budget. What is the cost commitment for physician coding certification?

After you have a strategy, plan, and budget, if you have any additional questions you may email us at info@medicalcodingprep.com.

Healthcare is a business. All businesses are bottom-line driven. The bottom line of healthcare is driven by medical codes. The codes tell the story of the healthcare industry in terms of quality, measuring performance, and enhancing medical and administrative decision-making.

As medical professionals and certified medical coders, we have seen how coding plays a vital role in the healthcare industry. Coding tells a story of the patient's health and the services provided, and it affects the financial and administrative aspects of healthcare. We have also used our coding expertise to enhance our careers and consulting services, and to help others prepare for coding certification exams. Our goal is to help you decide if you want to pursue medical coding and to guide you through your self-education journey.

If you fail to plan, you plan to fail!

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My Strategic Plan and Self Reflection

Core Topic	Description	Estimated Date of Completion	Actual Date Completion			
Mission (Purpose)	Prepare and Pass CPC® Certification	Exam Date Set:	Exam Results:			
SWOT Analysis			My S trengths:			
			My W eaknesses:			
			My O pportunities:			
			My T hreats:			
Prep Objectives	My Certification Preparation Plan					
STUDY GOALS: Identify what areas of coding you need to focus on. TIME MANAGEMENT: Make a schedule to avoid procrastination and reduce stress, using estimated dates and actual dates of completion for the Prep tasks you wish to complete.						
What I need to study to Prepare?						
Study Plan	Readings	View Webinar Lectures	Mock Exam	Research	Other study tasks:	
When I will study, i.e., 20-50 minute time periods.						
Where I will study for optimal concentration.						
How I will study to be most effective, i.e., read, write, repeat, other.						
Who will I study with (partner, group, solo)						
Why will I study is a given!	To pass the coding certification Exam!					

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Schedule: Course Lessons	Study Guide Readings	Date Completed & Notes
Getting Started Video for the AAPC's CPC versus the AHIMA's CCS-P	<ul style="list-style-type: none"> • Video & Script 	
CPC/CCS-P Pre-Test <ul style="list-style-type: none"> • Pre-Test • CPC 150 MC Questions • CCS-P 150 MC Questions and 10 outpatient medical records (cases) 	NOTE: Requires Outpatient Coding Reference Books that you must purchase separately.	
Tier 1. Module 1. Medical Terminology Abstraction Anatomy and Physiology for Health Information Management and Medical Billers & Coders Table of Contents: Preface: 7 Chapter 1. Introduction 11 Preparatory Goals 11 Chapter 2: The Human Body Positions and Cavities 17 Chapter 2 Practice Prep 27 Chapter 2 Answer Key 35 Chapter 3: Integumentary System 38 Chapter 3 Practice Prep: 48 Chapter 3 Answer Key: 54 Chapter 4: Skeletal System 57 Chapter 4 Practice Prep: 87 Chapter 4 Answer Key: 96 Chapter 5: Muscular System 98 Chapter 5 Practice Prep: 118 Chapter 5 Answer Key: 130 Chapter 6: Cardiovascular System 132 Chapter 6 Practice Prep: 153 Chapter 6 Answer Key: 162 Chapter 7: Lymphatic and Immune System 164 Chapter 7 Practice Prep: 183 Chapter 7 Practice Prep Answer Key: 190 Chapter 8: Respiratory 192 Chapter 8 Practice Prep 208 Chapter 8 Answer Key 217 Chapter 9: Digestive System 219 Chapter 9 Practice Prep 238 Chapter 9 Practice Prep Answer Key 246 Chapter 10: Genitourinary Systems 248 Chapter 10 Practice Prep 276 Chapter 10 Practice Prep Answer Key 283 Chapter 11: Nervous System and Special Senses 285 Chapter 11 Practice Prep 313 Chapter 11 Practice Prep Answer Key 321	<ul style="list-style-type: none"> • Video & Script • eBook and Exercises 	

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Chapter 12 Practice Prep 342 Chapter 12 Practice Prep Answer Key 349 Appendix A: Module I: Glossary of Medical Terminology 351 Appendix B: Medical Abbreviations and Symbols List 380 Reference Sources: 386		
<p>Tier 1. Module 2. ICD-10-CM Coding</p> <p>International Classification of Diseases Tenth Edition, Clinical Modification (ICD-10-CM)</p> <p>Table of Contents</p> <p>ICD-10-CM Objectives 9 Chapter 0: ICD-10-CM Introduction 10 Chapter 0 Practice Prep: 31 Chapter 0 Coding Answer Key: 36 Chapter 1 ICD-10-CM-CM Codes A00-B99 Infectious and Parasitic Diseases 38 Chapter 1 Practice Prep: 52 Chapter 1 Coding Answer Key: 57 Chapter 2 ICD-10-CM Codes C00-D49 Neoplasms 59 Chapter 2 Practice Prep: 72 Chapter 2 Coding Answer Key: 77 Chapter 3 ICD-10-CM Codes D50–D89 Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism 79 Chapter 3 Practice Prep: 87 Chapter 3 Coding Answer Key: 92 Chapter 4 ICD-10-CM Codes E00-E89 Endocrine, Nutritional and Metabolic Diseases 94 Chapter 4 Practice Prep: 108 Chapter 4 Coding Answer Key: 115 Chapter 5. ICD-10-CM Codes F01-F99 Mental and Behavior Disorders 117 Chapter 5 Coding Answer Key: 132 Chapter 6 ICD-10-CM Codes G00-G99 Diseases of the Nervous System 134 Chapter 6 Practice Prep: 149 Chapter 6 Coding Answer Key: 154 Chapter 7 ICD-10-CM Codes Diseases of the eye and adnexa 156 Chapter 6 Practice Prep: 160 Chapter 6 Coding Answer Key: 165 Chapter 8 ICD-10-CM Codes H60-H95 Diseases of the Ear and Mastoid Process 167 Chapter 9 ICD-10-CM Codes I00-I99 Diseases of the Circulatory System 172 Chapter 9 Practice Prep: 183 Chapter 9 Coding Answer Key: 197 Chapter 10 ICD-10-CM Codes J00-J99 Diseases of the Respiratory System 200</p> <ul style="list-style-type: none">• Video & Script• eBook and Exercises <p>NOTE: Required Reference Book: ICD-10-CM Volume 1 and 2 Code Book [Outpatient]</p>		

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Tier 1. Module 3: Current Procedure Terminology(CPT)

- Video & Script
- eBook and Exercises

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Tier I, Module III, the focus is CPT procedure coding, modifiers, national correct coding initiatives and the physician fee schedules.

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- **NOTE:**
Required Reference
Book: AMA's Current Procedural Terminology (CPT) Reference Guide.

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Tier 1. Module 4. HCPCS Level II Coding

Durable Medical Equipment, Prosthetics, Orthotic, or Supply (DMEPOS)

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 - b. HCPCS Level II Process
 - c. Pricing Methods for DMEPOS
 - d. DME Fee Schedule Calculations
 - e. CMS DMPOS Fee Schedule Format
2. HCPCS Processes and Coding
 - a. HCPCS DMEPOS Credentialing Process
 - b. 6-Keys for Accurate HCPCS Coding
 - c. Chapter 2, Appendix A: CMS DMEPOS Supplier Application and Instructions
3. HCPCS Coding Conventions
 - a. Code Categories and Symbols
 - b. HCPCS Coding Conventions
4. HCPCS Modifiers
 - a. Modifier Background
 - b. 9-Keys for RT/LT vs. CPT Modifier -50
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5. Appendix A: 2024 HCPCS Level II Modifiers

- Video & Script
- eBook and Exercises
- **NOTE:**
- **Required Reference Book: HCPCS Level II Coding**

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6. References		
<p>Tier 1. Module 5. Medical Billing and Reimbursement</p> <p>Chapter 1: Introduction: Organization Structure and the Revenue Cycle</p> <p><input type="checkbox"/> U.S. Healthcare Organizations</p> <p><input type="checkbox"/> 10-Keys Revenue Cycle</p> <p><input type="checkbox"/> Health Insurance Portability and Accountability Act (HIPAA)</p> <p><input type="checkbox"/> Health Information Technology for Economic and Clinical Health (HITECH) Act</p> <p><input type="checkbox"/> Financial Compliance</p> <p><input type="checkbox"/> Transaction Codes Sets Standard/Rule</p> <p>Chapter 2: Insurance 101</p> <p><input type="checkbox"/> Indemnity Health Insurance</p> <p><input type="checkbox"/> Commercial Health Insurance</p> <p><input type="checkbox"/> Liability Coverage</p> <p><input type="checkbox"/> Automobile Personal Injury Protection (PIP)</p> <p><input type="checkbox"/> Self-insured group coverage under ERISA</p> <p><input type="checkbox"/> Point of Service Plan Option (POS)</p> <p><input type="checkbox"/> Medicare (Part A, B, C and D)</p> <p><input type="checkbox"/> Medicaid</p> <p><input type="checkbox"/> TriCare (CHAMPUS, CHAMPVA)</p> <p><input type="checkbox"/> Worker's Compensation (WC)</p> <p><input type="checkbox"/> Blue Cross and Blue Shield (BCBS)</p> <p><input type="checkbox"/> Independent Provider Organization (IPA)</p> <p><input type="checkbox"/> Physician-Hospital Organization (PHO)</p> <p><input type="checkbox"/> Preferred Provider Organization (PPO)</p> <p><input type="checkbox"/> Health Maintenance Organization (HMO)</p> <p><input type="checkbox"/> Network Model</p> <p><input type="checkbox"/> Staff Model</p> <p><input type="checkbox"/> HMO + Medicare</p> <p><input type="checkbox"/> HMO + Medicaid</p> <p><input type="checkbox"/> Exclusive Provider Organization (EPO)</p> <p><input type="checkbox"/> Other: Black Lung</p> <p><input type="checkbox"/> Other: Crime Victims</p> <p><input type="checkbox"/> Other: Veterans' Administration (VA)</p> <p><input type="checkbox"/> Other: Indian Health Services (IHS)</p> <p><input type="checkbox"/> Coordination of Benefits</p> <p>Chapter 3: Front Desk</p> <p><input type="checkbox"/> Front Desk Registration</p> <p><input type="checkbox"/> Co-payments, Deductibles and Non-Covered Services</p> <p><input type="checkbox"/> Third Party Coverage</p> <p><input type="checkbox"/> Insurance Authorizations and Verifications</p> <p><input type="checkbox"/> General Payment Policy</p>	<ul style="list-style-type: none">• Video & Script• eBook and Exercises <p>NOTE: No reference book required.</p>	

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<ul style="list-style-type: none"><input type="checkbox"/> No-Show Policy<input type="checkbox"/> Patient Account Balances<input type="checkbox"/> Extended Payment Guidelines<input type="checkbox"/> Extended Charge Account Agreement		
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Chapter 4: Back Office Procedures

- Billing Policy
- Claims Appeal Process
- Bad-Debt Definition
- Small Balance Allowances Defined
- In-house Monthly Private Collection Process
- Letter of Inquiry
- Pre-Collection Letter
- Collection Letter
- Discharge Letter
- ABN (Advanced Beneficiary Notice) Policy
 - ABN Patient Form Medicare
 - ABN Patient Form for Insurance
- Professional Courtesy Policy
- Charity Care Assistance Policy
- Charity Care Application Form
- Refund Policies
- Legal Procedure Codes and Rates
- Legal Service Request Form
- AR Action Request Form Policy
- AR Action Request Form

Chapter 5: Medical Billing Computer Systems

- Introduction to Medical Software
- System Selection Factors
- System Implementation
- System Hardware
- System Networks
- System Integration

Chapter 6: Medical Records Maintenance and Retention

- Medical Records Release and Forms Payment Policy
- Fees for Patient Requested Medical Records
- Fees for Attorney Requested Medical Records
- Forms Invoice
- Medical Records Invoice

Appendix A: CMS 1500 Billing Instructions and Example Form

Appendix B: CMS UB-04 Billing Instructions and Example Form

Appendix C: Explanation of Benefits Reason Code List

Glossary: For Medical, Insurance, Billing and Coding (MIBC)

Final Assessment (Page 406)

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<p>CPC/CCS-P Post-Test</p> <ul style="list-style-type: none">• Pre-Test• CPC 150 MC Questions <p>CCS-P 150 MC Questions and 10 outpatient medical records (cases)</p>	<ul style="list-style-type: none">• Post-Test <p>Note: Requires Outpatient Coding Reference Books.</p>
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AAPC CPC Exam	AHIMA CCS-P Exam
<p>The AAPC CPC Exam is a 150-question, multiple-choice exam that tests your knowledge of medical coding for outpatient settings. The exam covers topics such as anatomy, physiology, medical terminology, diagnosis coding, procedure coding, modifiers, compliance, and reimbursement. You have five hours and 40 minutes to complete the exam, which is divided into two sections of 75 questions each. You can use approved coding manuals during the exam, but no electronic devices or notes are allowed.</p> <p>To pass the exam, you need to score at least 70% (105 out of 150 questions).</p> <p>The exam fee is student pricing: \$375 for 1 attempt, \$475 for 2 attempts. Core exams: \$399 for 1 attempt, \$499 for 2 attempts</p> <p>Location: You can take the exam online or at a local testing center.</p> <p>Required Membership: The 2024 annual membership fee for the AAPC is \$210 for individuals and \$145 for student members. Membership is required for the certification exams.</p> <p>Ongoing cost, annual fees and CEUs.</p> <p>AAPC (2024) CPC Certification Overview. https://www.aapc.com/certifications/cpc</p> <p>AAPC (2024) CPC Certification-Exam. https://www.aapc.com/certifications/cpc/taking-the-cpc-exam</p>	<p>The AHIMA CCS-P Exam is a four-hour exam that consists of 150 multiple-choice questions and 10 medical record cases. The exam tests your knowledge and skills in coding for outpatient services, such as office visits, emergency department visits, same-day surgeries, diagnostic tests, and radiology procedures. The exam covers topics such as health information documentation, diagnosis and procedure coding, regulatory guidelines, data quality and management, and compliance. You can use approved coding books and electronic tools during the exam, but no personal notes or references are allowed.</p> <p>To pass the exam, you need to score at least 300 out of 400 points.</p> <p>The exam fee is \$299 for AHIMA members and \$399 for non-members.</p> <p>Location: You can take the exam online or at a Pearson VUE testing center.</p> <p>Optional Membership: \$149-professional, \$49 higher education student.</p> <p>Ongoing cost, annual fees and CEUs.</p> <p>AHIMA (2024). CCS-P Exam Content. https://www.ahima.org/media/mpocfdci/ccs-p-exam-content-outline.pdf</p> <p>AHIMA. (2024). About CCS-P®. https://www.ahima.org/certification-careers/certification-exams/ccs-p/</p>

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Code Reference Books

You will need code reference books for training and for the test. You will need Current Procedural Terminology (CPT), Healthcare Common Procedure Coding System Level II (HCPCS Level II) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM). You may purchase them from any supplier, as long as it is the current year 2024, or the next year's, 2025, which comes out in November/December 2024:



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Your AAPC CPC Exam Budget	Your AHIMA CCS-P Exam Budget
Coding Reference Books: \$ _____	Coding Reference Books: \$ _____
Prep Workshop: \$ _____	Prep Workshop: \$ _____
Membership (mandatory): \$ _____	Membership (mandatory): \$ _____
The AAPC CPC Exam: \$ _____	The AAPC CPC Exam: \$ _____
Total Cost: \$ _____	Total Cost: \$ _____
Ongoing cost: Annual dues. One Certification requires 36 CEUs every two years (AAPC LINK) for CEUs.	Ongoing cost: annual dues. One Certification requires 40 CEUs every two years (AHIMA LINK) for CEUs.

Read Medical Coding Preparatory® disclosures before purchasing a prep workshop.

Both Drs. Mike and Madeline Meyer are certified coders and educators that have worked in healthcare their entire careers in high level positions and higher education. Our goal is to provide quality certification prep workshop to prepare for your select certification exam. We cannot guarantee you will pass the certification exam, nor we can guarantee you will not need additional training, as this amount of training and preparation varies between individuals.

Once you purchase the prep workshop you will receive a link and have immediate access to the materials. Therefore, there are no refunds for electronic purchasing of these materials.

Please carefully review the Medical Coding Preparatory® content and this disclosure carefully before enrolling in a prep workshop.

Medical Coding Preparatory® is owned by Drs. Mike and Madeline Meyer. Our aim is to offer cost-effective, quality certification prep workshops to help you prepare for your chosen certification exam. However, we do not guarantee that you will pass the exam as these factors depend on your individual abilities and circumstances.

By enrolling in a prep workshop, you agree to pay the full fee and access the materials electronically. No refunds will be issued for any reason. If your computer does not allow you to access the materials we are happy to create and send you the prep workshop on a compact disc (CD).

Best regards,

Drs. Madeline & Mike Meyer