WASHINGTON STATE
COLLEGE OF OHIO

Health Information Management Technology/

Medical Billing and Coding

Program Student Handbook

2025-2026/2026-2027

Revised 8.4.2025

Welcome

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Welcome to Washington State College of Ohio's Health Information Management Technology program. We are excited you have chosen this robust program and field! You will find the program policy and information in this handbook. Please reach out to me with any questions or concerns along the way. We are excited you are here with us! Let's learn, grow, and achieve excellence and success together!

Sincerely,

Christina Manley, MA. Ed., RHIT
Director of Health Information Management Technology

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STATEMENT OF NON-DISCRIMINATION

Washington State College of Ohio embraces human diversity and is committed to equal employment opportunities, affirmative action, and eliminating discrimination. Discrimination against any individual based upon protected status, which is defined as age, color, disability, gender identity or expression, national origin, race, religion, sex, sexual orientation, or veteran status, is prohibited. Equal access to employment opportunities, admission, educational programs, and all other university activities is extended to all persons.

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Program Introduction

The Health Information Management Technology Program was developed in response to the community's need for skilled medical coders, medical billers, and health information technicians, and a pathway for employees in patient access to earn stackable credentials and a degree to grow into positions at the facility regionally. Projection Central (2021) reports that the Ohio job outlook for medical records and health information technicians projects a 9.8 percent increase through 2028. The state of Ohio has the fourth-highest employment level in this occupation and has the highest concentration of jobs for medical dosimetrists, medical record specialists, and health technologists by state (U.S. Bureau of Labor Statistics, 2021). The average hourly wage in Ohio is $21.79. Wages depend upon region, certification, and degree level. Additionally, this program will also be able to answer the national needs for medical billers, medical coders, and health information technicians as the credential's students will be eligible to earn through external examinations are national credentials. The United States has an average annual opening of 11,700 Health Technologists positions and projects long-term there will be an increase of 22,400 positions through 2028 (Projection Central, 2021).

Health information management technologists showcase diverse skills and functions while keeping humans in the health information. Information about a patient, their visit, and treatment is generated when a patient has an encounter. HIM professionals manage this patient information from behind the scenes by acquiring, analyzing, and protecting patient information and work to ensure patient information is protected and accurate so that when patient information is needed, it is accurate, precise, and immediately accessible to authorized users. Health information management is a blend of business, health science, and information technology.

Medical billing, medical coding, and release of information are commonly associated with health information management professionals. These are common positions, but health information management technology is so much more as health information management professionals work in bridge roles to connect patient data with clinicians, departments, authorized users, and authorized health systems. Below is a video created by the Ohio Health Information Management Association (OHIMA) that describes the importance, responsibilities, and types of jobs HIMT professionals have.

Program Organization

The Health Information Management Technology (HIMT) program is strategically organized to earn stackable credentials when working towards the medical billing and coding certificate and the health information management technology degree. Medical coding and medical billing credentials offered through the Healthcare Financial Management Association (HFMA), American Academy of Professional Coders (AAPC), and American Health Information Management Association (AHIMA) can be earned upon completion of their second and third semester to be eligible to sit for external certifications to become credentialed and be qualified to obtain medical billing and medical coding positions and continue to work towards completing the HIMT degree in hopes students can earn employee tuition reimbursement assistance to complete the last two semesters of the HIMT degree.

Program Admission Requirements

This online program has been developed for everyone, but strategically created especially for those who have a busy lifestyle and need flexibility. So, if you work full-time, have a family, are looking for a career, or need additional credentials and education to advance your career, you can be successful in the HIMT program.

Applicants are urged to apply early. You must have the following to apply to the HIMT degree program:

1. Complete a Washington State College of Ohio application for admission.
2. Must be a high school graduate or possess a GED Certificate.
3. Submit an official high school transcript or GED Certificate, and official transcripts from any college(s) attended.
4. Complete an application for the HIMT program.
5. Submit three (3) non-family references.
6. Successfully complete the one-week free online readiness course if no prior online course has been completed with a grade of C or above. (Starts Monday at 8:00 a.m. and ends Saturday at 5:00 p.m. every week. Sign up here.
7. Completed H.S. Algebra II (or higher) or MATH 0106.
8. Cumulative GPA of 2.5 or higher when applying, and upon program entry.
9. A grade of "C" or above is required in all courses.

The program director can offer contingent program acceptance. It is up to the student to fulfill the contingencies by the given due date to remain in the program when accepted into the program with contingencies. Should the contingencies not be met, then administrative withdrawal may be done to pull the student from the program, and an application to enter the program the next year, but be submitted by the next year's program application deadline. The program director reserves the right to make exceptions to admit and retain students within the program. The program director reserves the right to work with a

student individually to help the student navigate the student's work-life circumstances and extend professional practice time to complete the program.

College foundation courses may be required if a student has not completed high school Algebra II or WSCOs Math 0106.

Applications will be approved based on the timely submission of all required materials being received and not necessarily the date on the application. Applications will be reviewed for approval once all items are received. Should the program director, academic advisor, or student success coach reach out with a due date to receive a missing piece of the application requirement and the materials not be received by the due date, the program reserves the right to deny the application based on not meeting all application requirements by failure to submit all requested items and the student will need to reapply and resubmit references and all required materials with a new application.

Medical Billing and Coding Certificate Curriculum

MEDICAL BILLING AND CODING CERTIFICATE
One-Year Technical Certificate

SEMESTER I (Fall)

BIOL	1300	The Human Body	(4) 4-0
HLTH	1420/**OR**	Introduction to Human Disease/**OR**	(3) 3-0
BIOL	2450	Pathophysiology	(3) 3-0
HIMT	1100	HIMT Legal Aspects	(2) 2-0
HIMT	1200	Health Record Management I	(3) 3-0
HLTH	1800	Medical Terminology	(3) 3-0
			(15)

SEMESTER II (Spring)

BUSM	1600	PC Applications	(3) 2-2
ENGL	1510	English Comp I	(3) 2-2
HIMT	1301	Clinical Classification ICD 10-CM/PCS	(3) 2-2
HIMT	1302	Current Procedural Terminology	(3) 3-0
			(12)

SEMESTER III (Summer)

HIMT	1400	Healthcare Reimbursement	(3) 3-0
HIMT	1500	Advanced Clinical Classification System	(3) 3-0
HIMT	1700	Revenue Cycle and Coding	(3) 2-2
			(9)

SUBJECT TO CHANGE WITHOUT NOTICE   **Program Total   36**

2025-2026

Health Information Management Technology Curriculum

Associate Degree of Applied Science
Health Information Management Technology
Coding & Reimbursement Track

SEMESTER I (Fall)

BIOL	1300	The Human Body	(4) 4-0
HLTH	1420/**OR**	Introduction to Human Disease /**OR**	(3) 3-0
BIOL	2450	Pathophysiology	(3) 3-0
HIMT	1100	HIMT Legal Aspects	(2) 2-0
HIMT	1200	Health Record Management I	(3) 3-0
HLTH	1800	Medical Terminology	(3) 3-0
			(15)

SEMESTER II (Spring)

BUSM	1600	PC Applications	(3) 2-2
HIMT	1301	Clinical Classifications/ ICD-10-CM/PCS	(3) 2-2
HIMT	1302	Current Procedural Terminology	(3) 3-0
MATH	2110	Statistics	(4) 4-0
			(13)

SEMESTER III (Summer)

ENGL	1510	English Comp I	(3) 2-2
HIMT	1400	Healthcare Reimbursement	(3) 3-0
HIMT	1500	Advanced Clinical Classification Systems	(3) 3-0
HIMT	1700	Revenue Cycle and Coding	(3) 2-2
			(12)

SEMESTER IV (Fall)

HIMT	2100	Health Record Management II	(3) 3-0
HIMT	2200	Health Information Technology Systems	(3) 3-0
PSYC	1010/**OR**	General Psychology/**OR**	(3) 3-0
SOCI	1010	Introduction to Sociology	(3) 3-0
SPCH	1510/**OR**	Speech/**OR**	(3) 3-0
SPCH	2060	Interpersonal Communications	(3) 3-0
			(12)

SEMESTER V (Spring)

BUSM	1550	Business Management	(3) 3-0
HIMT	2301	HIMT Statistics Analysis	(2) 2-0
HIMT	2400	HIMT Quality Management	(2) 2-0
HIMT	2500	Health Information Management & Data Governance	(3) 3-0
HIMT	2900	HIMT Professional Practice	(2) 1-3
			(12)

SUBJECT TO CHANGE WITHOUT NOTICE   **Program Total   64**

2025-2026   2026-2027

HIMT Course Shelf-Life

The HIMT courses will have a shelf-life of 3 years. It is important to communicate with your academic advisor if you wish to attend as a full-time or part-time student. It is recommended that non-HIMT courses be completed in the first year before taking HIMT courses to help prevent HIMT course expiration.

College Mission and Values

The HIMT and MBC program is built in accordance with community needs and to meet the mission, vision, and strategic goals for the college.

Mission
Washington State College of Ohio responds to the education and workforce needs of our community by providing dynamic and affordable degree and certificate programs in an atmosphere that promotes student success.

Vision
Our vision is to inspire and facilitate individual excellence and success.

Values
In creating an environment of trust and respect for faculty, staff, and students, the WSCO community strives to live by a set of values to be practiced each day and in each encounter.

Respect – To acknowledge the humanity of all individuals through compassionate action.

Ethics – To demonstrate honesty, integrity, responsibility, and accountability.

Inspiration – To provide an atmosphere that encourages our campus community to develop, grow, and succeed as lifelong learners.

Inclusion – To provide an atmosphere that fosters respect and acknowledges, explores, and embraces the diversity and uniqueness of all regional and global cultures.

Success – To enable all students, faculty, and staff to be successful academically, personally, and professionally.

Excellence – To reach our maximum potential as a community college through continuous improvement, institutional growth, excellence in teaching, and community engagement.

Teamwork – To foster a culture of collaboration within the campus community that supports our mission, our students, our employees, and the surrounding area.

Stewardship – To be responsible stewards of college resources: human, fiscal, natural, physical, and virtual.

HIMT Mission & Goals

Mission

The HIMT program responds to the education and workforce needs of our community by providing support and promotion of student access, student success, and community workforce development to help students obtain external national credentials in health information management technology and medical billing and coding.

Strategic Planning Goals

Student Access
The HIMT program will be a fully offered online program to promote access to underrepresented and underserved residents, as no cost for travel will be required to attend classes. Single parents with young children will be able to attend and still meet the demands of their work and family schedules. This program includes dual-enrolled and college credit-plus students.

Student Success
Personalized academic advising pathways will be provided to students to help them meet their schedules as part-time or full-time students. It is recommended that students meet with their program advisor at a minimum once every semester to check-in to ensure to gauge continued program interest, success, and help students navigate through obstacles or barriers that occur.

Community and Workforce Development
The creation of the new health information management technology program expands sector partnerships as the program will engage with various medical facilities, medical billing and medical coding companies, and health insurance companies. The program will build a talent supply chain of employees to meet the community's workforce needs by increasing the number of eligible external certifications that companies can use and advertise for to meet their current and future workforce needs.

Program Goals

Curriculum Goals
The program's mission and goals are outcome-focused and relevant to the mission of the Washington State College of Ohio. The appropriateness and effectiveness of the curriculum will be assessed, and the results of the assessment will be used as the basis for ongoing planning and program development.

Student and Graduate Goals
The program will provide assurance that the educational needs of students are met and that graduates demonstrate at least the AHIM entry-level curriculum requirements.
1. **Goal:**
   All students will become AHIMA student members and student members of their choice to AAPC and/or HFMA.
2. **Goal**:
   All students will take one external certification exam in billing or coding through AAPC, AHIMA, or HFMA after completion of their medical billing coding courses (courses listed within the first three semesters), and students completing the health information management degree will take the AHIMA Registered Health Information Technical certification exam.
3. **Goal:**
   All students will create an e-portfolio or resume and submit it to three different employers in their third and fifth semesters.
4. **Goal:**
   Eighty percent of graduates will be employed in their area of study within six months after graduation.
5. **Goal:**
   Thirty percent of graduates will remain connected to the WSCO HIMT program in some capacity: guest speaker, etc...

Accreditation
Washington State College of Ohio is regionally accredited by the Higher Learning Commission (HLC). The health information management technology program is accredited by The Commission on Accreditation for Health Informatics and Information Management (CAHIIM) Education and will follow the new program accreditation process guideline recommendations. Receipt of CAHIIM accreditation creates eligibility for graduates to sit for their registered health information technical (RHIT) credential through the American Health Information Management Association (AHIMA).

CAHIIM
200 East Randolph Street
Suite 5100
Chicago, IL 60601
(312) 235-3255

Plan for Consistency of Professional Practice Instruction & Evaluation of Professional Practice Courses, Preceptors & Professional Practice Sites

The purpose of this Continuous Improvement Plan is to reduce inconsistencies in professional practice experience (PPE) instruction.

We try to schedule students' PPE sites that would provide equitable professional practice experience for all the Health Information Management Technology students. We try to have the same/similar PPE experiences at larger hospitals (CCMH, MMH & Genesis) and smaller hospitals for all students. PPE experiences may be virtual or at a location, pending PPE availability.

We assess the student's PPE on the student's evaluations of the professional practice course, industry preceptors, and professional sites, Program Student Resource Survey, and other surveys, such as: Graduate Surveys and Employer Surveys.

Students are required to complete a preceptor evaluation on each preceptor, and after completing the PPE experience, they are required to complete the site evaluation plus a course evaluation.

If the results of surveys and/or students' evaluations of the professional practice preceptors demonstrate a valid trend and concern regarding the consistency of their professional practice experience, the director of the HIMT program or clinical coordinator will attempt to validate the information with the student in conjunction with the clinical preceptor or any other related issues. If there is a valid concern, the professional practice preceptor may consult with the Program Director and/or clinical coordinator and send the results to the clinical preceptor's supervisor, depending on the issue. If there is a need for student remediation, the student will enroll in an individual investigation course with the department faculty, demonstrate an understanding of deficient topics, and receive one more opportunity to pass the Professional Practice Experience. The student must pass the PPE on the second attempt. New preceptors are evaluated within a year. Only preceptors who have an RHIT or RHIA may evaluate student professional practice competencies. If there are professional practice preceptors that are found in need of improvement, the HIMT program director will meet with the Professional Practice Coordinator at the site to discuss the points of discrepancy and address deficiencies, if needed.

Health Information Management Technology Performance Standards

Acceptable Grades
Students are expected to achieve a grade of C or higher in all required courses within the Medical Billing and Coding Certificate Program and the Health Information Management Technology Degree. Students are responsible for knowing what standards and outcomes are expected within each course through review of the course syllabi. Some courses require a performance standard of 80 percent or higher to receive a grade of B or higher in the course, and this will be found within the syllabus if this is the case. It is the student's responsibility to understand the grading in the syllabus and seek understanding with the faculty in the course or the program director to gain understanding.

Incomplete Grades
Incomplete grades may be assigned by the HIMT faculty or the HIMT program director as needed at the HIMT faculty and the HIMT program director's discretion. To be eligible for an incomplete grade, communication must be occurring with the HIMT faculty teaching the course, and the HIMT faculty must approve the incomplete grade. The HIMT faculty may assign a due date that occurs before the college's incomplete due date deadline. It is important that you work with the HIMT faculty in the course.

Late Homework Policy
Late work policy in HIMT will follow the syllabus for the course. Be sure to pay attention to the syllabus for **each** course. Students should be in communication with their professors if they are going to be late with their assignments. Should the professor view the reason behind being late as inexcusable, then no points will be awarded for the late assignment.

Professionalism
Professionalism is important and is evaluated from the beginning of working with the HIMT faculty. The student should uphold the AHIMA code of ethics at all times. It is also important that the student exhibit a professional speaking and writing tone when communicating with HIMT faculty, the program director, colleagues, and professionals in the college or Professional Practice Experience, in academic advising, and in class. The student may receive a conduct report should the student exhibit aggression or unprofessionalism. The first conduct issue will receive a written warning, a grade of zero for the assignment, a conduct report filed, and a meeting with the HIMT Director. The second conduct issue will receive a second written warning and a conduct report filed, a grade of F for the course, and a meeting with the Program Director/Dean. The third conduct issue will receive a third conduct report filed, a meeting with the Dean and the HIMT Program Director, a grade of F for the course, and dismissal from the MBC/HIMT program with no readmission. Pending the conduct, the Dean may disenroll the student from the college.

AHIMA Code of Ethics

The AHIMA Code of Ethics serves six purposes:
1. Promotes high standards of HIM practice.
2. Summarizes broad ethical principles that reflect the profession's core values.
3. Establishes a set of ethical principles to be used to guide decision-making and actions.
4. Establishes a framework for professional behavior and responsibilities when professional obligations conflict or ethical uncertainties arise.
5. Provides ethical principles by which the general public can hold the HIM professional accountable.
6. Mentor practitioners new to the field to HIM's mission, values, and ethical principles.

The code includes principles that are enforceable and aspirational. The extent to which each principle is enforceable is a matter of professional judgment to be exercised by those responsible for reviewing alleged violations of ethical principles.

Principles

The following principles are based on the core values of the American Health Information Management Association and apply to all AHIMA members, non-members, CCHIIM certifications, and students.

1. Advocate, uphold, and defend the consumer's right to privacy and the doctrine of confidentiality in the use and disclosure of information.
2. 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, their peers, and the health information management profession.
3. Preserve, protect, and secure personal health information in any form or medium and hold in the highest regard health information and other information of a confidential nature obtained in an official capacity, taking into account the applicable statutes and regulations.
4. Refuse to participate in or conceal unethical practices or procedures and report such practices.
5. Use technology, data, and information resources in the way they are intended to be used.
6. Advocate for appropriate uses of information resources across the healthcare ecosystem.
7. Recruit and mentor students, peers, and colleagues to develop and strengthen the professional workforce.
8. Represent the profession to the public in a positive manner.
9. Advance health information management knowledge and practice through continuing education, research, publications, and presentations.

10. 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.
11. State truthfully and accurately one's credentials, professional education, and experiences.
12. Facilitate interdisciplinary collaboration in situations supporting ethical health information principles.
13. Respect the inherent dignity and worth of every person.

AHIMA Code of Ethics Guidelines

Violation of principles in the Code of Ethics does not automatically imply legal liability or violation of the law. Such determination can only be made in the context of legal and judicial proceedings. Alleged violations of the code are subject to a peer review process. Such processes are generally separate from legal or administrative procedures and insulated from legal review or proceedings to allow the profession to counsel and discipline its own members. Although in some situations, violations of the code would constitute unlawful conduct subject to legal process.

Guidelines for ethical and unethical behavior are provided to assist with the interpretation of the American Health Information Management Association (AHIMA) Code of Ethics. The terms "shall" and "shall not" are used as a basis for setting high standards for behavior. This does not imply that everyone "shall" or "shall not" do everything that is listed. This concept is true for the entire code. If someone engages in the stated activities, ethical behavior is the standard. The guidelines are not a comprehensive list. For example, the statement "safeguard all confidential consumer information to include, but not limited to, personal, health, financial, genetic and outcome information" can also be interpreted as "shall not fail to safeguard all confidential consumer information to include personal, health, financial, genetic, and outcome information."

A code of ethics cannot guarantee ethical behavior. Moreover, a code of ethics cannot resolve all ethical issues or disputes or capture the richness and complexity involved in striving to make responsible choices within a moral community. Rather, a code of ethics sets forth values and ethical principles to which a Health Information Management (HIM) professional can aspire and by which actions can be judged. Ethical behaviors result from a personal commitment to engage in ethical practice.

Professional responsibilities often require an individual to move beyond personal values. For example, an individual might demonstrate behaviors that are based on the values of honesty, providing service to others, or demonstrating loyalty. In addition, professional values may require promoting confidentiality, facilitating interdisciplinary collaboration, and refusing to participate in or conceal unethical practices. Professional values could require a more comprehensive set of values than an individual's need to be an ethical agent in their own personal life.

The AHIMA Code of Ethics is to be used by AHIMA members, non-members with the Commission on Certification for Health Informatics and Information Management (CCHIIM) certifications, students enrolled in a formal certificate or degree-granting program directly relevant to AHIMA's Purposes, and consumers, agencies, organizations, and bodies (such as licensing and regulatory boards, insurance providers, courts of law, government agencies, and other professional groups) that choose to adopt it or use it as a frame of reference. The AHIMA Code of Ethics reflects the commitment of all to uphold the profession's values and to act ethically. Individuals of good character who discern moral questions and, in good faith, seek to make reliable ethical judgments must apply ethical principles.

The code does not provide a set of rules that prescribe how to act in all situations. Specific applications of the code must consider the context in which it is being used and the possibility of conflicts among the values and principles.

How to Interpret the Code of Ethics
Principles and Guidelines

The following ethical principles are based on the core values of the American Health Information Management Association and apply to all AHIMA members, non-members with CCHIIM certifications, and students enrolled in a formal certificate or degree-granting program directly relevant to AHIMA's Purposes. 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.

1. *Advocate, uphold, and defend the consumer'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 consumer 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 health information issues for the healthcare industry and the public.
    1.3. Advocate for changes in policy and legislation to ensure the 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 consumer or a person legally authorized to consent on behalf of a consumer 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 consumer requests to exercise their privacy rights (e.g., access, amendments, restriction, confidential communication, etc.). Answer truthfully all consumers' questions concerning their rights to review and annotate their personal biomedical data and seek to facilitate consumers' legitimate right to exercise those rights.

2. ***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 the organization that violate, interfere with, or discourage compliance with the code.

2.5. Take responsibility and credit, including authorship credit, only for work one actually performs, or to which one contributed. Honestly acknowledge the work of and the contributions made by others verbally or written, such as in a 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.

3. ***Preserve, protect, and secure personal health information in any form or medium and hold in the highest regard 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 consumers' data and information 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).

4. ***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 AHIMA Policy and Procedures for Disciplinary Review and Appeal 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 provider documentation
- Coding when documentation does not justify the diagnoses or procedures that have been billed
- 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 provider 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
- Developing a "record set" that excludes meaningful consumer information to be shared with consumers to protect the health system or specific providers
- Violating the privacy of individuals

Refer to the AHIMA Standards of Ethical Coding for additional guidance.

4.9. Engage in any relationships with a consumer where there is a risk of exploitation or potential harm to the consumer.

5. ***Use technology, data, and information resources in the way they are intended to be used.***

A health information management professional shall:

5.1. Use healthcare employer technology resources within the confines of organizational policies.
5.2. Ensure all data and resulting information accessed and derived from healthcare technology resources are not used outside of the scope of the job.

A health information management professional ***shall not****:*

5.3. Compromise the integrity of healthcare data through any intentional acts or acts that are generally known to create risks to data integrity.

6. ***Advocate for appropriate uses of information resources across the healthcare ecosystem.***

*A health information management professional **shall**:*

6.1. Verify requests for data and information are based on appropriate, verifiable needs and conditions and fall within the confines of organizational policies, regulations, and laws.
6.2. Educate stakeholders about the need to maintain data integrity and the potential impacts should data integrity not be maintained.

*A health information management professional **shall not**:*

6.3. Manipulate information systems to produce or display data and resulting information that is intentionally misleading

7. ***Recruit and mentor students, staff, peers, and colleagues to develop and strengthen the professional workforce.***

*A health information management professional **shall**:*

7.1. Provide directed practice opportunities for students.
7.2. Be a mentor for students, peers, and new health information management professionals to develop and strengthen skills.
7.3. Be responsible for setting clear, appropriate, and culturally sensitive boundaries for students, staff, peers, colleagues, and members within professional organizations.
7.4. Evaluate students' performance in a manner that is fair and respectful when functioning as educators or clinical internship supervisors.
7.5. Evaluate staff's performance in a manner that is fair and respectful when functioning in a supervisory capacity.
7.6. Serve an active role in developing HIM faculty or actively recruiting HIM professionals.

*A health information management professional **shall not**:*

7.7. 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.

8. *Represent the profession to the public in a positive manner.*

*A health information management professional **shall***:

8.1. 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.

9. *Advance health information management knowledge and practice through continuing education, research, publications, and presentations.*

*A health information management professional **shall***:

9.1. 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.

9.2. Base practice decisions on recognized knowledge, including empirically based knowledge relevant to health information management and health information management ethics.

9.3. 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.

9.4. 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.

9.5. Report evaluation and research findings accurately and take steps to correct any errors later found in published data using standard publication methods.

9.6. Design or conduct evaluation or research that is in conformance with applicable federal or state laws.

9.7. 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.

10. ***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***:

10.1. 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.
10.2. Uphold the decisions made by the association.
10.3. 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.
10.4. Disclose any real or perceived conflicts of interest.
10.5. Relinquish association information upon ending appointed or elected responsibilities.
10.6. Resign from an association position if unable to perform the assigned responsibilities with competence.
10.7. 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.

11. ***State truthfully and accurately one's credentials, professional education, and experiences.***

*A health information management professional **shall***:

11.1. 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.
11.2. Claim and ensure that representation to consumers, 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.
11.3. Claim only those relevant professional credentials actually possessed and correct any inaccuracies occurring regarding credentials.
11.4. Report only those continuing education units actually earned for the recertification cycle and correct any inaccuracies occurring regarding CEUs.

12. Facilitate interdisciplinary collaboration in situations supporting ethical health information principles.

*A health information management professional **shall***:

12.1. Participate in and contribute to decisions that affect the well-being of consumers by drawing on the perspectives, values, and experiences of those involved in decisions related to consumers.
12.2. Establish clearly professional and ethical obligations of the interdisciplinary team as a whole and of its individual members.
12.3. Foster trust among group members and adjust behavior in order to establish relationships with teams.

13. Respect the inherent dignity and worth of every person.

*A health information management professional **shall***:

13.1. Treat each person in a respectful fashion, being mindful of individual differences and cultural and ethnic diversity.
13.2. Promote the value of self-determination for each individual.
13.3. Value all kinds and classes of people equitably, and deal effectively with all races, cultures, disabilities, ages, and genders.
13.4. Ensure all voices are listened to and respected.

Non-Academic Technical Standards for Entry-Level Students
Certain physical and health requirements are necessary for the student to meet the standards of their program, and these standards are requirements of our accrediting agencies and clinical affiliates. In the HIMT/MBC program, we read patient information and medical charts in the medium given to us, mostly electronic, requiring the use of computers. Additionally, we communicate with other health professionals, third-party payers, and patients to gain information, provide information, and deliver solutions and often in fast-paced stressful environments, thus the following standards to be met include but are not limited to: the ability to read computer screens, ability to respond to verbal requests from supervisors, facility staff, and medical professionals, language skills to enable communication with patients, co-workers, and supervisors, emotional maturity and stability to function under physical and mental stress, be present and punctual in attendance, and freedom from infectious diseases.

Should you have any concerns regarding your ability to perform these standards, please get in touch with the HIMT/MBC program department to receive additional information.

Essential Functions and Graduate-Level Competencies of the Entry-Level Employee

Intellectual/*Conceptual*

Students must be able to exercise independent judgment. This includes, but is not limited to, the following abilities:
- Measure, calculate, assess, analyze, interpret, and apply problem-solving techniques to HIM scenarios (patients, people, statistical data, classification data, and regulatory requirements).
- Troubleshoot computer issues and appropriately seek assistance for computer problems when they occur.
- Read and comprehend technical and legal documents such as HIPAA, confidentiality, release of information, and course subject matter.
- Follow directions
- Apply learned skills and knowledge to new situations

Behavioral and Social

The student must be able to exhibit appropriate professional conduct that includes, but is not limited to, the following abilities:
- HIMT professionals/students are expected to fulfill commitments and meet deadlines, and submit work by posted due dates
- Deal with stress and maintain composure under pressure and time constraints in a professional decorum.
- HIMT/MBC students are required to become members of the American Health Information Management Association (AHIMA) and maintain an active membership through completion of the program.
- Make decisions, prioritize tasks, and work on multiple tasks simultaneously
- Work both independently and in cooperation with others

Student Academic Improvement Notice

Student academic improvement notices will be sent out each semester, letting the student know where they currently stand at that moment in time. The purpose is to have the students evaluate if they need to put more time into their studies, change study habits, or if they are progressing as desired. It is advised that the student reach out to the professor of their course and work with them to be successful. It is strongly advised that the student meet with the academic adviser if they receive an academic improvement notice with a grade below "C".

Appealing a Grade

Students may appeal a grade at any time. The steps for the appeal include the following are the same as in the WSCO student handbook. Please refer to the WSCO Student Handbook.

Attendance Requirements

Attendance is recorded, and missing classes can have a negative effect on Financial Aid. A student is counted as present for the course if they have logged into the Canvas course for the week. Attendance is taken and reported to the registrar's office twice per semester. Be sure to pay attention to late policies in the course syllabi, as late submissions may receive zero credit, and one can quickly find themselves receiving an academic warning, which may also negatively impact Financial Aid.

Program Completion

Program completion has occurred once a student has successfully completed all course requirements for the certificate or degree with a final grade of "C" or higher for the course. Students have a three-year shelf-life on their HIMT courses, or they will need to be retaken. It is the student's responsibility to meet with their academic advisor to create a program completion plan and adhere to it by registering their classes on the timeline. Should a course be missed or taken out of sequence, it could delay program completion.

Returning After Medical Absence

Students must be in communication with their academic advisor about their planned return to the program or their time off needed due to medical absence. It is important that the student create a plan to complete the current semester before leaving on medical absence if the medical absence is known in advance. If the medical absence is not known in advance, the student or someone on the student's behalf should reach out to inform the academic advisor of the student's situation and planned return date. Pending the situation, a recommendation of completion or withdrawal may be given. A return plan will be created with the student once the student has contacted the program to return with a return date.

Dismissal

Dismissal of the program may occur due to plagiarism or conduct. Should dismissal from the program occur, the student will not be eligible for re-entry into the department's programs.

Readmission to Program

Once a student has not enrolled in classes for three semesters, the student is considered withdrawn. The student will need to reapply for readmission into the program and will come in and be reassigned to the new cohort for their cohort entry semester.

Program Assessment

To ensure continual improvement of the courses and program, various assessments are performed as below:

Student Opinion of Course/Instruction

Between the middle and towards the end of the semester, students can complete an evaluation of the course and instruction for each course they are taking. These evaluations are only used to help improve instruction and course content. Students provide faculty and course designers with valuable feedback from a different perspective that is greatly appreciated and utilized.

Student Evaluation of Program

Students can fill out an evaluation of the program in the HIMT 2900 course to help identify what they liked about it and things to consider changing or omitting from their perspective of the HIMT program. Student feedback from a different perspective is greatly appreciated and utilized.

WSCO Annual Program Assessment

The college assessment committee performs annual reviews of programs and courses to ensure we are meeting the college's and the community's needs. The assessment committee reviews course and instruction opinions, looks at Professional Practice experience, partnerships created within the community, and more. The program director meets with the assessment committee to answer the assessment committee's questions, and the assessment committee shares what they would like to see changed and implemented. Implementations are done by the given due date, and the assessment committee reviews the implementations and outcomes with the goal that the implementations are properly made to approve the program assessment as meeting expectations. If implementations are not successful made, the program director will work closely with the Dean of Health, and once approval is received from the Dean of Health, the changes go back to the assessment committee for review.

Annual Progress Assessment Report

The Commission on Accreditation for Health Informatics and Information Management requires accredited programs to annually submit a program assessment for review to maintain accreditation.

Course/Program Assessment

Faculty teaching HIMT courses will assess the courses they have taught for the year, taking into consideration student suggestions throughout the course. The goal is to constantly improve the course to make it learner-friendly and ensure the courses are meeting the required CAHIIM competencies and TAG (Transfer Assurance Guidance) competencies for TAG-approved courses.

Professionalism

Professionalism will be evaluated throughout the program and in professional practice experience. A rubric will be scored and shared during the program and at times, as a grade in coursework or professional practice experience. Professionalism is evaluated by program faculty and also by professional external reviewers within the health information management or medical billing and coding specialization.

Students are expected to conduct themselves professionally at all times. This includes:

- Respecting faculty, staff, and peers.
- Dressing appropriately for classes and professional practice assignments.
- Demonstrating accountability and responsibility in all actions.
- Communicating effectively and respectfully.

Disrespecting faculty and peers, gossiping, and creating a negative environment will not be tolerated. One warning will be given and an official report will be filed, and a grade of zero will be assigned if it occurs within the discussion forum or group assignment. In the second occurrence, the student will be removed from the program for a semester and receive zeros for the remainder of the course. In the third occurrence, the student will be removed from the program without reapplication. Students are to treat the classroom, each other, and the program with respect and professionalism as they would an employer.

Professional Practice Experience Requirements

Medical Physical

Professional Practice Experience (PPE) is required for the Health Information Management Technology program (2-year degree) and the Medical Billing and Coding (MBC) program. Before being placed and going to an external PPE site, medical physical requirements must be completed three months prior to the start of the PPE, at the latest. Background checks, drug checks, and medical physical requirements will be uploaded into Castle Branch, where students will have lifetime access through Castle Branch. Failure to complete the medical physical requirements within three months prior may delay or cancel the PPE practicum experience and set the student back one year. Medical physical requirements are discussed in orientation in the second year of the HIMT program.

The physical and medical requirements include:

- Rubella Titer
- Mumps Titer
- Varicella Titer
- RPR or equivalent,
- Urinalysis
- CBC
- Annual TB test
- Current tetanus/diphtheria booster

- Hepatitis B Immunization Series (At least 2 injections are required before going to the PPE site).

All records submitted to the HIMT program department are maintained by the HIMT program department via Castle Branch. Once items are uploaded, they may be downloaded by the students for future use, such as proof of medical physical for future job requests. The HIMT program will not release this information to the student and may only produce this as evidence to the clinical site the student uses for PPE, upon request by the PPE site for verification of completion. Castle Branch is located on the MBC and HIMT program websites. Again, students will have lifetime access to the copies of the medical physical requirements you submit through CastleBranch. Employers will often ask for these records, so this will be a convenience for you as you apply for jobs during the program and after you have completed the program.

Forms can be found and submitted within the HIMT Admission packet on the program web page on the college website.

Professional Practice Experience Sites

Professional practice experience sites are the students' responsibility to obtain. The college will attempt to gain PPE sites for students within 50 miles, but students must be able to drive to Marietta or the site obtained. Otherwise, the student is responsible for working with the Professional Practice Experience Coordinator and the HIMT Director to make sure we get a contract out to your PPE site three months prior to the student working towards their PPE hours.

Students will obtain a minimum of 160 PPE hours: 80 within their first year and 80 hours within their second year for HIMT students and 40 hours total for MBC students within the duration of their time working towards completion of their MBC Certificate.

Confidentiality Agreement
Students enrolled in the MBC/HIMT program may come across confidential information. Students are to keep all information confidential, and violation of confidentiality will result in disciplinary action, which may include dismissal from the program and professional practice experience, and may result in a failing grade.

This can be found and submitted within the HIMT Admission packet on the program web page on the college website.