ST. CLOUD TECHNICAL & COMMUNITY COLLEGE

A member of Minnesota State

Health Information Technology AAS

and

Medical Coding Diploma

Student Handbook

St. Cloud Technical & Community College
1540 Northway Drive
St. Cloud MN 56303

A member of the Minnesota State Colleges and Universities System

Table of Contents

Introduction

Welcome to the Health Information Technology and Medical Coding programs at St. Cloud Technical & Community College (SCTCC). It is truly an exciting time to be at SCTCC as our college continues to grow and many changes are being put in place to benefit our students. It is our goal to provide you with the knowledge, aptitude, skills and tools that will ensure your success as a student.

By choosing Health Information Technology and/or Medical Coding, you are right where healthcare meets the cutting edge of technology. You are in the middle of the action whether you work in a hospital, clinic, nursing home, insurance company, or other health setting. Health information is one of the fastest growing industries in the U.S. and it is expected to continue growing for at least the next five to ten years.

As a student in this program, you will be working with an excellent and dedicated group of instructors. We welcome you to SCTCC and look forward to your growth as you complete your degree. If you have any questions or concerns regarding your program, feel free to contact the faculty program advisors listed below. Good luck in your academic pursuits.

Lynn Zormeier, RHIA email: lzormeier@sctcc.edu
Tracy Dilly, RHIT email: tdilly@sctcc.edu

We also have adjunct instructors that work in health care facilities and insurance companies who teach on an as-needed basis. Their working knowledge of the content they teach helps give you an exceptional education!

SCTCC Mission Statement:

We provide the education, training, and support necessary for equitable participation in our society, economy and democracy.

SCTCC Vision:

We are a community of learners rooted in meaningful relationships where everyone belongs and thrives.

SCTCC Shared Beliefs:

- Education empowers individuals and transforms generations.
- Every individual has intrinsic value and every voice deserves to be heard.

- Our differences enrich our community.
- An antiracist and antidiscrimination ethos is necessary for advancing social justice and equity.
- It is our responsibility to ensure equitable outcomes for our students. Each student can succeed.
- Innovation, flexibility, and life-long learning are critical for our community to thrive.
- Mutually accountable relationships built on trust are essential for our success.
- Community partnerships strengthen and sustain us.

SCTCC Outcomes for Students:

- Demonstrate personal and social accountability
- Think critically
- Communicate Effectively
- Understand social & global perspectives
- Apply knowledge

Introduction to the Health Information Field

A degree in Health Information Technology (HIT) or Medical Coding prepares you for work in which you are responsible for the quality, safety and efficiency of information within the healthcare system. The exchange of clear, accurate health information is essential as health records become digital. Our goal is to ensure every graduate is prepared to participate in the workforce upon graduation. We prepare students to serve others through patient registration, medical coding, billing, pre-authorization and referrals, and the sharing and analysis of patient information in a legally compliant manner.

Mission of Programs:

We provide equitable preparation to students for successful careers as health information professionals working in business, technology and healthcare through comprehensive industry supported education and training.

Health Information Technology Program Outcomes for Students

- Comply with health information content standards
- Adhere to HIPAA privacy and security guidelines for health information
- Manage data utilizing health information technologies
- Assess revenue cycle management processes
- Apply legal processes that impact health information management
- Demonstrate organizational management and leadership skills
- Analyze and transform medical data to evaluate and improve key performance indicators in healthcare settings

Medical Coding Program Outcomes for Students

- Comply with health information content standards
- Adhere to HIPAA privacy and security guidelines for health information
- Manage data utilizing health information technologies
- Assess revenue cycle management processes
- Apply legal processes that impact health information management

Health Information Professionals' Code of Ethics

All graduates from the HIT AAS degree program and Medical Coding program are HIT Professionals. Below is the American Health Information Management Association (AHIMA) Code of Ethics for all Health Information Professionals:

1. Advocate, uphold and defend the consumer's right to privacy and the doctrine of confidentiality in the use and disclosure of health 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 to 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 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.[1]

Preparing For Our Online Programs

A pre-requisite for our online programs is ensuring students have a PC (laptop or desktop) that functions correctly and has consistent access to high-speed internet. Assignment due dates are outlined at the beginning of the course to ensure students can plan alternative solutions if their internet goes out, or if their PC breaks down. Additionally, the college's computer lab is open during college hours, and there are several public locations that offer free Wi-Fi. A Windows-based system is necessary to ensure all program functionalities are consistent for all students. Students have found that Chromebooks or Apple computers do not have the functionality needed for the software programs used in our courses.

Students are required to complete the general orientation session for the college and take the Accuplacer tests, which will identify any courses that must be completed prior to registering for core and general education classes. A score of 250 is needed on the Accuplacer NG Reading test to enter the programs. For the HIT program, a Math QAS score of 260 is needed to take the Goal 4 Statistics course required for the AAS degree. Students who do not test at the levels needed for entry into the program or into Statistics may still qualify by successfully completing the required developmental Reading Comprehension and/or Math course(s).

It is important for students coming into the program to have a basic understanding of computers and the internet in order be successful in an online program. Students should also learn how SCTCC's system Desire To Learn (D2L Brightspace) works prior to starting classes. There are training courses available at the college or students can contact an advisor and receive a tutorial video.

Online Attendance: Attendance (participation in class) is the main key to success in any course. To be in attendance, students are to complete all assigned readings, watch assigned lectures and video recordings, and complete all activities and assignments. You should plan to be in the D2L course multiple times each week. In addition, being present means you check your school email account at least every other day. If you don't participate by handing in homework for 2 full weeks without communicating to your instructor to make a plan for progress, the instructor is required by SCTCC policy to withdraw the student from the course with a grade of FW (see implications for this below).

Course Time Expectations: For each credit a student takes, they should expect to spend 3 hours of time each week to read the textbook and review all learning content posted, watch the lectures, study, and complete homework. As an example, a 3-credit class will likely take approximately 9 hours per week to fully learn and understand the content. This time will vary depending on the student's

[1] American Health Information Management Association Code of Ethics, https://bok.ahima.org/topics/industry-resources/code-of-ethics/, retrieved on 1/21/2026.

previous knowledge, how fast they learn, and the practice they need to become proficient at new skills. Some instructors may not allow late work without a doctor's note, or may allow 1 or 2 late assignments, so it's important to manage your time well.

Diploma or AAS Degree… What's the Difference?

The Medical Coding Diploma is "nested" into the HIT AAS Degree. This means that all credits earned in the Diploma are transferable directly into to the AAS degree. Many students start with the Diploma and immediately go on to finish their AAS degree. With the Medical Coding Diploma, you may be hired in the business office of a facility doing coding or billing, or at a health insurance company analyzing health care claims. While the diploma is not an accredited program, you will have the minimum requirements completed to sit for the AHIMA national CCA (Certified Coding Associate) exam. Additional studying on your own for the exam or on-the-job experience as a coder is recommended. Upon passing the CCA, you will have the credential CCA after your name. Some facilities hire coders and billers with or without the CCA credential. Others require the RHIT credential, which requires completion of the HIT AAS degree and successful completion of the RHIT examination. After the 2nd semester of the Coding Diploma program, you will want to decide if you want to continue and earn your AAS degree. You can complete both!

The HIT AAS Program is an accredited program, accredited by CAHIIM (The Commission on Accreditation for Health Informatics & Information Management Education. CAHIIM sets forth the required curriculum competencies that students must learn in the program. This means that upon graduation you are eligible to sit for the AHIMA national RHIT (Registered Health Information Technician) exam. Upon passing the RHIT exam, you will have the credentials RHIT after your name. Some facilities require an RHIT to work in certain positions in their Health Information Department. The credential is becoming more sought after by hiring managers, and they are having a hard time finding candidates with this credential. This means it's valuable to have! Many entry-level positions do not require the RHIT credential, so you can start working while you're still in school, before you get credentialed, to gain experience in the office setting. HIT AAS graduates are also qualified to sit for other HIM credentials, such as Certified Coding Associate (CCA), Certified Coding Specialist (CCS) and Certified Coding Specialist-Physician based (CCS-P).

Career Choices

Graduates from our HIT program work at a variety of organizations including hospitals, clinics, insurance companies, state agencies, law firms, nursing homes, dental clinics, cancer registries, chiropractors, and even technical colleges.

There is a wide variety of career choices in the Health Information industry. They include Chart Analysts, Release of Information Specialists, Scanning & Filing Clerks, Abstractors, Claims Adjudication Specialists, Auditors, Data Analysts, Privacy Officers, Compliance Specialists, Coders, HIM Managers, HIM instructors, and many more!

Textbooks and Required Materials

Students will need to have their textbooks, access codes, computers and internet access on the first day of class each semester. We begin many classes by registering for the software used in the class. You will need to have Microsoft Office (available free to SCTCC students) and you will want to have anti-virus software. Other software used in the program may be purchased with the required books in the SCTCC bookstore.

Textbooks: The SCTCC bookstore stocks all required textbooks for classes. The cost per class for textbooks varies; however, an estimate would be approximately $200 per course (more for coding classes). Textbooks can be purchased online by the book vendor at a lower cost if the student does not depend on Financial Aid to pay for the books, but students must ensure they have the correct ISBN, and, if access codes are necessary, the books must be purchased NEW WITH ACCESS CODE.

Some textbooks, code books and software are used in multiple classes so it's important to keep all books purchased for courses or ask your advisor prior to selling them.

Software Used in The Program

Because graduates will be heavily utilizing different software systems found in Electronic Health Records (EHRs) upon graduation, the program has integrated two software simulations into the curriculum to give students hands-on experience. Many courses also utilize textbooks with software access codes for a more applied experience, so students will be required to purchase NEW books that include an unused access code, learn how the software is used, and contact the software's vendor if they have technical issues in getting the software to work. This provides excellent experience for our students, as they will be required to work through software issues on the job after they graduate.

Registration

Once you have been accepted to the program, you will meet with an advisor from the Advising Center to give you information about financial aid, the bookstore, and other important things to prepare you for registration. They will assist with registering for 1st-semester classes. Then you will receive an email from the program director with a copy of the Program Handbook and a link to view the program orientation video. These resources will explain program policies and expectations. It is important to take the HITM courses in the order they are listed on the program planner to ensure success in the courses.

The Medical Coding Diploma includes 44 credits and takes approximately 3 full-time semesters (not including Summer) to complete if all listed courses are taken each semester (13-18 credits per semester).

The Health Information Technology (HIT) Associate of Applied Science (A.A.S.) degree includes 64 credits and takes approximately 4 full-time semesters (not including Summer) to complete if all listed courses are taken each semester (15-18 credits per semester).

Part Time Students

If the full-time credit load is not feasible, it may take longer than the projected time noted above, and you may need to attend college during the summer to complete General Education courses or Internship.

It is important to note that the courses used in both programs follow the accreditation requirements for the AAS Degree, and the curriculum requirements we are required to teach may change every four years. Because of this, students must commit to going to college at least half time, by taking at least 2-3 courses each semester in order to finish within 4 years. Contact your Program Advisor to create a plan to complete the program in a timely manner.

If curriculum offerings change, advisors will notify students during advising sessions to ensure students take the courses before the end-date. It is the student's responsibility to sign up for the advising sessions every semester.

Academic Standards

To successfully complete the HITM technical courses in the programs, overall academic grades for each course must be 80% or better, and Competency-Based Assessments must be completed with a C or higher for all students who begin the program with 1st semester courses in the Fall of 2026 or later. Required assessments are aligned with the 2026 CAHIIM Competencies as outlined in Appendix C. The HITM Course Syllabus (or corresponding Course Calendar/Assignment Due Date List) will identify which assessments within each course will be tracked for successful completion.

Course Grade Requirement: In Health Science Department programs such as Health Information Technology and Medical Coding, the grading scale is a little higher than general education courses. 80% is equivalent to earning a C. Students must compete the course with a C (80%) in order for the course to count for the programs. The BUSM 1290 course within the Medical Coding Diploma must be passed with a C (70%). The grading scale for all HITM courses is as follows:

A = 100% - 94%
B = 93% - 87%
C = 86% - 80%
D = 79% - 73%
F = 72% and below

Repetition of Courses

A student in the HIT or Medical Coding program who earns a "W", "D", "FW" or "F" in any course is considered to be making unsatisfactory progress in the program. If a student earns a grade of "W," "D," "FW" or "F" in a course, they may attempt the course a second time. If a grade of "W," "D," "FW" or "F" is earned on the second attempt, the student will be dismissed from the program. It is possible for a student to drop a course and not receive a "W" if they drop on or before the set drop date (usually the first week of class).

A student who earns a grade of "W", "D", "FW" or "F" in 3 different courses throughout the program will be dismissed from the program.

Because of this, it is important to plan a course load that is not going to be too much to complete each week, and to communicate with your instructor before you fall behind. We are here to help you stay on track and be successful in the program.

If there are extenuating circumstances surrounding your situation, you may file a petition for review for possible reinstatement into the program. Contact the Program Director for information.

Professional Conduct

Professional conduct and communication are key factors when working with providers, insurance companies, coworkers, and patients in the health information industry. Students enrolled in the Health Information Technology or Medical Coding program are expected to practice professional conduct according to the Health Information Professionals Code of Ethics (see pages 4-5), and SCTCC's Student Code of Conduct:
https://www.sctcc.edu/sites/default/files/policies/S3.26%20Student%20Code%20of%20Conduct.pdf

- It is the policy of the Health Information Technology and Medical Coding programs to prohibit any and all participants from posting any medical or personally identifiable information, images or negative comments regarding an instructor, clinical site, patients, or anything that could be considered a threat or harassing statement on any social networking site or message board.
- Students are prohibited from posting assignments or using answers on internet sites such as Course Hero, as well as using programs such as AI and ChatGPT to complete assignments.
- Communications and interactions with faculty, classmates, and individuals, including at professional practice sites and on social media are expected to be professional and courteous.

Students who do not display professional conduct as outlined above will be given one warning and may be dismissed from the program.

Student Advising

Each student in the program is assigned a full-time instructor as an advisor. It is the student's responsibility to contact their advisor(s) prior to Advising Day each semester to set up a meeting to

discuss their program plan and obtain their access code for registration for the next semester. Advisors discuss progress in classes, academic barriers, and give guidance on appropriate class load as well as class sequencing for progression through the program.

Professional Practice Experiences (P.P.E.)

The PPE course is a 2-credit Internship course consisting of 40-80 hours working under a HIM Industry Professional. Students who have completed the Job Seeking/Keeping Skills course may take the PPE course for 1 credit. The student must have at least 24 HITM credits completed before beginning their PPE, although it is recommended to take in the last semester. Students must have passed all HITM core courses with a "C" or better before beginning their PPE. Tuition must be paid before the PPE begins.

Internship sites: Students are required to use their job seeking skills to find an internship site in their local area with the guidance of the PPE Coordinator, although some locations prefer to set up internships through the PPE Coordinator. Every effort will be made to place the student in their local area, however for reasons beyond the control of the college, the student may have to drive outside of their local area to complete their internship. If a student is not actively pursuing an internship, or actively communicating with the instructor for placement, they will receive an FW in the course before the drop date. If a student is unable to find an internship location and refuses to complete hours at the site that the PPE Coordinator has found for the student, they will receive an F in the course.

Background Check: The HIT program requires all students to have a clean criminal background prior to being placed at an internship site. If you have any concern in this matter, please meet with the PPE Coordinator as soon as possible. The background check is an additional fee of approximately $44 in MN plus fingerprinting ($10-$15) if required; this may vary by state. Students seeking internships in states other than Minnesota will be required to complete a background check for the state in which the internship site is located. Some facilities require the student to complete a national background study in addition to the college's state background check.

In addition to a background check, PPE sites have various requirements prior to interning. Most require vaccination records, a flu shot and a recent 2-stage Mantoux. If you are a student without access to your vaccine records, you may need to have a titer done at your medical doctor to check immunity. Some sites require drug testing, which is also an additional cost (usually around $50-$55), and most of them have the student complete HIPAA Privacy orientation. It is important to look for an internship site well before the semester begins, because a contract between the site and SCTCC must be in place before the student can begin internship hours. These may take up to three months or more to complete. Some sites have lengthy "onboarding" processes that can take several weeks. PPE hours may be extended into the following semester if the facility is unable to schedule all hours during the semester in which the student is registered for the internship. The student will receive an "IP" (In Progress) grade and will be expected to complete the hours the following semester. If the hours and activities are not completed before the last day of the following semester, the student will receive an F and will need to retake the class.

During the internship hours, the student will be under the guidance of the PPE site supervisor

learning about the many facets of the healthcare facility. Students will participate in authentic learning experiences during the internship and complete a journal/packet/project to outline their authentic learning experience. Prior to completion of the experience, the student, site supervisor, and internship instructor meet to discuss the experience. As an alternative to the site visit, the site supervisor and the internship instructor may hold a phone interview. A formal evaluation is completed and reviewed with the student. The days and times that students are at their PPE site vary depending on the site's requirements and the student's classes. All hours must be under the direct supervision of the PPE supervisor. This means PPE hours are not usually available on weekends or evenings. PPE hours are unpaid and are looked upon as a learning experience.

Students will be required to follow the PPE site's rules and regulations, as well as AHIMA's Code of Ethics for all Health Information Professionals during their internship. If a site supervisor feels that progress is unsatisfactory and requests dismissal from their facility, the student will earn an F in the course.

Academic review

The instructors review each individual student's progress at least weekly. Should areas of concern arise, they will be discussed with the student, and if needed, with the Program Director. The following elements are reviewed: academic progress, skills acquisition and development, attendance issues, personal issues that may be interfering with progress in the program, and/or legal and ethical issues as identified during the PPE. In the event that there is concern about a student regarding any of these areas, an instructor or the program director will meet with the student to discuss necessary steps to take toward improvement and success in the program.

Application for graduation

It is the student's responsibility to apply for graduation upon registering for their last semester of classes. The application form is available on the SCTCC website. Upon completion of this form and submission to Registration, the student's coursework is matched to the HIT or Coding program criteria. Any deficiencies will be communicated to the student via letter. It is the student's responsibility to check with Registration or with their Advisor to be sure all criteria have been met.

Contact information after graduation

As each graduate has lifetime placement services available at SCTCC Career Services, it is crucial that contact information such as phone numbers and addresses are kept current. It is also wise for the student to contact HIT instructors if they are looking for a position after graduation. Often HIT instructors become aware of positions even before they are placed on the college website. If the graduate would like a reference from an instructor, it is the graduate's responsibility to convey this to the instructor and sign a release of information form prior to any contact from a potential employer.

Articulation Agreement

An articulation agreement between SCTCC and The College of St. Scholastica exists, which allows all credits from our Health Information Technology program to transfer into their Health Information Management B.S. degree. For information on how to determine which programs within Minnesota State Colleges and Universities have articulation agreements, consult the website: http://www.mntransfer.org/students/plan/s_agreements.php

The College of St. Scholastica has a fully accredited, online Health Information Management Bachelor's Program, which affords SCTCC students an opportunity to continue their studies. As The College of St. Scholastica's Bachelor's Program is fully accredited, students completing that program would be eligible to sit for the RHIA examination.

Professional Organizations

American Health Information Management Association (AHIMA) and Minnesota Health Information Management Association (MHIMA): Professional organizations off-campus include the AHIMA, and the state chapter MNHIMA. Applicable web sites are www.mnhima.org and www.ahima.org. MHIMA has an annual state meeting, as well as other educational offerings throughout the year, and students are encouraged to attend these meetings. AHIMA offers student memberships at a reduced rate. Student membership is required at the beginning of the program and highly encouraged through the duration of the program, as member-only resources are used during courses. The cost to students is approximately $50 per year. This membership is valuable to students as AHIMA also publishes a variety of the textbooks used in the program and facilitate the RHIT Exam. Student members receive a reduced rate on AHIMA products purchases.

American Academy of Professional Coders (AAPC): Another networking and educational forum for students is the American Academy of Professional Coders (AAPC). AAPC members are part of a growing organization meeting regularly in over 400 local chapters, annual national and regional conferences and online member forums. This community is a great asset to the AAPC members, who gain benefits from the combined knowledge, experience and power of the organization for everything from coding help to securing employment. AAPC has a network of more than 500 local chapters across the United States, all within the umbrella of a non-profit organization, the AAPC Chapter Association. All AAPC members belong to a local chapter and are entitled to attend local chapter meetings to obtain low-cost or free CEUs, network with peers, learn of jobs or advertise job openings, and promote the health care industry locally. AAPC local chapters also provide facilities and proctors for AAPC exams, enabling exams to be taken almost anywhere in the country. The website for AAPC is www.aapc.com

Academic Integrity

Because the programs are offered online only, it is important for students to understand the importance of being honest when it comes to their homework and test submissions. Students are in this program to learn the content well enough to perform in an entry-level health information job, and to sit for a credential exam at the end of the program to earn a credential, not just to get the degree. Students will have to prove their understanding of the concepts taught in this program when taking the CCA, CPC, or RHIT exam, and when they secure a job in the industry. Therefore, it is in the student's best interest to take the time to understand content, practice coding, and research concepts to ensure that they are fully prepared for the credentialling exams and employment. Students are expected to do their own homework and take tests without using books or other resources when required.

Academic integrity is highly valued at St. Cloud Technical & Community College and throughout higher education. Maintaining academic integrity is the responsibility of every member of the college community: faculty, staff, administrators and students. Academic integrity requires students to refrain from engaging in or tolerating acts including, but not limited to, submitting false academic records, cheating, plagiarizing, using Artificial Intelligence (AI) program responses as your own responses, altering, forging, or misusing a college academic record; acquiring or using test materials without faculty permission; acting alone or in cooperation with another to falsify records or to obtain dishonest grades, honors, or awards.

Any violation of the St. Cloud Technical & Community College's Academic Integrity Policy S3.28 is considered a disciplinary offense and will be subject to the policies of this instructor, entrance into the Academic Integrity Database, and possible disciplinary action as outlined in the Academic Integrity Procedure S3.28.1. Students accused of academic dishonesty may appeal the decision. Students may review the Academic Integrity process and access the Academic Integrity Appeal Form at www.sctcc.edu/academic-integrity.

Use of Artificial Intelligence

AI tools are increasingly used in healthcare systems, including EHRs, computer-assisted coding (CAC), CDI software, auditing platforms, and data analytics. As future Medical Coding and Health Information Management professionals, students must understand how AI supports real-world workflows while still developing the independent knowledge, judgment, and competency required for accurate coding, documentation analysis, compliance, and data integrity.

In our programs, AI may be used as a learning aid (e.g., clarifying terminology, reviewing grammar, generating study tools, or understanding how AI functions in healthcare). AI may **not** be used to complete coding assignments, analyze documentation, generate case study or discussion answers, or perform any task requiring the student's own reasoning. Students must never enter patient information, clinical documentation, or any protected health information into AI tools. In both coursework and practice, the coder or HIM professional is always responsible for the final work.

Citations are required for written and presentation assignments. If AI is used to explain or summarize content, students must verify accuracy with reliable, authoritative sources and rewrite the information in their own words. References must cite the authoritative source used for verification (e.g., ICD-10-CM Official Guidelines, CPT® codebook, AHIMA materials, textbooks, or credible websites), not the AI tool itself.

Health Information Technology & Medical Coding Equity Statement

In addition to intentional recruitment of students from underrepresented groups done at the college level, our program has worked toward removing barriers to students in a variety of ways, such as offering asynchronous online courses, so students can take our class from anywhere they may be in the world, and so our adult students with families can complete the program while still participating in the work force. We have chosen textbooks that offer less expensive software packages for those who don't get financial aid but still have to adhere to a strict budget, and we included textbooks bundled with the certification exams so students can use financial aid to pay for this expensive exam. We monitor the success of students by systematically reviewing our teaching and assessing methods related to program outcomes, disaggregating the data by race, and making changes as needed. The Program Handbook was revised to include more inclusive language, and instructors have been working towards reviewing and updating course policies to make them more inclusive.

Statement of Accommodations

St. Cloud Technical & Community College is committed to supporting students with disabilities in obtaining, understanding, and advocating for equitable and inclusive access in all aspects of their education and campus life. It is the role of Accessibility Services to provide and/or arrange reasonable accommodations to qualified students who have a disability (or have acquired a disability) during any point of their tenure at SCTCC. Accommodations are established through collaboration between students, Accessibility Services, faculty, and staff to empower students to pursue their academic goals free from barriers while upholding the integrity of the academic experience.

Disabilities take on several forms including but not limited to mental health, cognitive, learning, behavioral, chronic health/systemic, and physical.

If you have a disability (or think you may have a disability) contact Accessibility Services at 320-308-5064 or acc@sctcc.edu to establish an accommodation plan.

It is the responsibility of the student requesting accommodations to provide their instructor with their accommodation plan via email. It is encouraged that students with approved accommodations connect with their instructor as soon as they are able, in order to proactively discuss how reasonable accommodation will be implemented in class and/or to address any concerns regarding emergency procedures. Students may submit their plan to faculty at any time during the semester, but accommodations cannot be retroactively applied.

More information and guidelines are available at www.sctcc.edu/accessibility.

This handbook is available in alternate formats upon request by contacting Accessibility Services at 320-308-5757 or 1-800-222-1009 or acc@sctcc.edu. TTY users may call MN Relay Service at 711 to contact the college. Discrimination against individuals on the grounds of disability is prohibited.

Handbook Acknowledgement- sign and return to Program Director

St. Cloud Technical & Community College
HIT and Medical Coding Program

Handbook Acknowledgement

This page will be collected in your first semester during your HITM 1210 Health Information Foundations course.

I, _____(print name), have received and have read the contents of St. Cloud Technical & Community College Health Information Technician & Medical Coding Handbook.

I understand/agree to all of the following:

I understand the time commitment for courses and the grading scale.

I understand the requirements and fees regarding PPE Placement.

I understand the requirements of Competency-Based assessments.

I understand the policies under Repetition of Courses.

I understand the policy regarding Professional Conduct.

I understand the importance of communication with my instructors and advisors.

I agree to maintain a student membership to AHIMA while enrolled in the program.

I understand I must complete the program in the timeframe outlined under Part Time Students.

Student Signature _____ Date _____

Appendix A: Health Information Technology AAS Program Planner (64 credits)

Semester 1: 16 credits

Course	Pre/Co Requisites	Credits	Semesters
HITM 1210 Health Information Foundations	Must be taken semester 1	2	F, S
HITM 1228 Administrative Medical Terminology		3	F, S
HITM 1230 Pathophysiology & Pharmacology	Pre/Co-Req: HITM 1228	4	F, S
HITM 1244 Anatomy & Physiology for Health Information	Pre/Co-Req: HITM 1228	4	F, S
MNnTC Goal Area 1 Written Communications (Recommend Engl 1303)		3	F, S, SS

Semester 2: 16 credits

HITM 1220 Legal Aspects of Health Information	HITM 1210	3	F, S
HITM 1227 ICD-CM Coding	HITM 1230	3	F, S
HITM 1226 CPT Coding	HITM 1244 and HITM 1230	3	F, S
HITM 1240 Computerized Health Information	HITM 1210	3	F, S
Math 1351 Statistics	Accuplacer QAS 260	4	F, S, SS

Semester 3: 17 credits

HITM 2200 Quality Management of Health Information	HITM 1210	3	F, S
HITM 2210 Medical Billing & Reimbursement	HITM 1210	3	F, S
HITM 1236 ICD-PCS Coding	HITM 1244	3	F, S
HITM 2215 HIT Management and Supervision	HITM 1210	3	F
HITM 2231 Healthcare Statistics	HITM 1210	2	F
MnTC Goal Area 1 Oral Communications		3	F, S, SS

Semester 4: 15 credits

HITM 2224 Advanced Medical Coding	Pre-Reqs: HITM 1226, 1227 Co-Reqs: HITM 2210, 1236	3	F, S
HITM 2240 Health Data Analysis	HITM 1240	3	S
HITM 2244 HIT Capstone	Last Semester	1	F, S
HITM 2209 HIT Professional Practice Experience (PPE)	Instructor Approval	2	F, S, SS
MnTC Goal Area 2 or 6: Critical Thinking or Humanities. Rec CRTK 1300 or PHIL 1320		3	F, S, SS
MnTC Goal Area 5 or 7: Diversity or Social Sciences. Rec DVRS 1304 or PSYC 1304		3	F, S, SS

Appendix B: Medical Coding Diploma Program Planner (44 credits)

Semester 1: 13 credits

Course	Pre/Co Requisites	Credits	Semesters
Semester 1:			
HITM 1210 Health Information Foundations	Must be taken semester 1	2	F, S
HITM 1228 Administrative Medical Terminology		3	F, S
HITM 1230 Pathophysiology & Pharmacology	Pre/Co-Req: HITM 1228	4	F, S
HITM 1244 Anatomy & Physiology for Health Information	Pre/Co-Req: HITM 1228	4	F, S

Semester 2: 16 credits

HITM 1220 Legal Aspects of Health Information	HITM 1210	3	F, S
HITM 1227 ICD-CM Coding	HITM 1230	3	F, S
HITM 1226 CPT Coding	HITM 1244 and HITM 1230	3	F, S
HITM 1240 Computerized Health Information	HITM 1210	3	F, S
MNnTC Goal Area 1 Written Communications (Recommend Engl 1303)		3	F, S, SS
MnTC Goal Area 5 or 7: Diversity or Social Sciences. Rec DVRS 1304 or PSYC 1304		3	F, S, SS

Semester 3: 13 credits

HITM 2200 Quality Management of Health Information	HITM 1210	3	F, S
HITM 2210 Medical Billing & Reimbursement	HITM 1210	3	F, S
HITM 1236 ICD-PCS Coding	HITM 1244	3	F, S
HITM 2224 Advanced Medical Coding	Pre-Reqs: HITM 1226, 1227 Co-Reqs: HITM 2210, 1236	3	F, S
BUSM 1290 Job Seeking/Keeping Skills		1	F, S
	Total Semester Credits:	**13**	

Appendix C: Competencies / Curriculum Alignment

Competency	Performance Indicator	Courses
Unit 1: Applied Sciences		
1.1 Written and Oral Communication (does) Assessed in HITM 1210 and HITM 2231	Demonstrate clear and concise written and oral communication to ensure accurate interpretation of information	
	PI 1.1.1 Use proper grammar and spelling in written communications. (does)	HITM 1210 HITM 2224
	PI 1.1.2 Ensure thorough and logical explanations founded on evidence-based information (does)	HITM 1210 HITM 1240
	PI 1.1.3 Include proper scholarly or professional literature citations in written reports (does)	HITM 1210 HITM 1240
	PI 1.1.4 Select or develop graphical representations and images to enhance communication and demonstrate appropriate understanding (does)	HITM 2231 HITM 2240
1.2 Technology Competence (does) Assessed in HITM 2231 and HITM 2240	Use technology to attain and communicate information	
	PI 1.2.1 Use digital technology, networks, and communication tools to find, evaluate, and communicate information. (does)	HITM 2231 HITM 2240
	PI 1.2.2 Use software packages that allow for the analysis and presentation of the data. (does)	HITM 2231 HITM 2240
1.3 Anatomy and Physiology (knows) Assessed in HITM 1244	Apply knowledge of anatomy and physiology to support information literacy	
	PI 1.3.1 Identify musculoskeletal and physiological body systems and functions. (knows)	HITM 1244
	PI 1.3.2 Integrate knowledge of body systems and functions in decision-making. (shows)	HITM 1244
1.4 Medical Terminology (does) Assessed in HITM 1228	Apply knowledge of medical terminology to support information literacy	
	PI 1.4.1 Integrate prefixes, suffixes, word roots, and combining forms of medical terms. (knows)	HITM 1228
	PI 1.4.2 Interpret proper phrases and terms of diseases, pathological conditions, and systems of the body. (knows)	HITM 1228
	PI 1.4.3 Use medical terminology and abbreviations within the correct context. (does)	HITM 1228
1.5 Pathophysiology and Pharmacology (knows) Assessed in HITM 1230	Apply knowledge of pathophysiology and pharmacology to ensure accurate communications and clinical coding	
	PI 1.5.1 Recognize the physical and functional changes that occur with disease, injury and throughout the human life cycle. (knows)	HITM 1230
	PI 1.5.2 Describe diagnostic and therapeutic tests and procedures in disease processes and interventions. (knows)	HITM 1230

	PI 1.5.3 Identify generic and brand name pharmaceuticals and the indications for commonly prescribed drugs and agents. (knows)	HITM 1230
	PI 1.5.4 Identify contraindications and side effects associated with drug therapies. (knows)	HITM 1230
1.6 Healthcare Services Delivery (knows) Assessed in HITM 1210	Recognize the evolution and trends in the delivery of healthcare services in various settings	
	1.6.1 Identify types of healthcare organizations and systems (knows)	HITM 1210
	1.6.2 Differentiate the scope of health professionals and healthcare services in various settings (knows)	HITM 1210
1.7 Fundamental Statistical Concepts (shows) Assessed in HITM 2231	Understand fundamental statistical concepts and basic applications	
	1.7.1 Demonstrate understanding of statistical terminology (knows)	HITM 2231
	1.7.2 Calculate descriptive statistics and solve fundamental statistical problems (shows)	HITM 2231
1.8 Determinants of Health (knows) Assessed in HITM 1240 and HITM 2200	Identify how determinants of health influence population health and the well-being of individuals	
	1.8.1 Recognize how the determinants of health impact individual, community and population disease and health (knows)	HITM 1240 HITM 2200
	1.8.2 Identify the social determinants of health in clinical documentation (knows)	HITM 1240 HITM 2200
Unit 2: Professionalism		
2.1 Patient and Professional Advocacy Efforts (shows) Assessed in HITM 1240 and HITM 1210	Engage in advocacy efforts to promote positive patient outcomes	
	2.1.1 Support patients in navigating the health care system, including reimbursement and access to services (shows)	HITM 1210 HITM 1240
	2.1.2 Advocate for health information services and resources that benefit patients, the organization and the population (shows)	HITM 1210 HITM 1240
	2.1.3 Educate others on the scope of practice and role of health information management professions (does)	HITM 1210 HITM 2240
	2.1.4 Mentor others to support competence in the profession (shows)	HITM 2210 HITM 1240
2.2 Self-reflection (does) Assessed in HITM 2231 and HITM 2215	Engage in self-reflection and cultural humility to improve practice	
	2.2.1 Self-reflect on experiences, personal opinions, learn from others and identify growth areas (does)	HITM 1240 HITM 2231
	2.2.2 Recognize when services are beyond personal competence and consult or refer services to others (does)	HITM 1240 HITM 2231
	2.2.3 Consider the relationship between the health information management role and the responsibilities of other team members (knows)	HITM 1210

	2.2.4 Engage in continuing education and professional development (does)	HITM 1240 HITM 2215
2.3 Ethical Behaviors (knows) Assessed in HITM 1220	Demonstrate ethical behaviors and manage ethical issues	
	2.3.1 Recognize ethical issues and identify potential actions that support a positive outcome (knows)	HITM 1210 HITM 1220
	2.3.2 Identify and manage potential and actual conflicts of interest (knows)	HITM 1220 HITM 2215
	2.3.3 Evaluate and apply ethical frameworks to provide professional guidance (knows)	HITM 1210 HITM 1220
Unit 3: Health Law and Policy		
3.1 Health Information Legislation, Regulations, Licensure and Accreditation (shows) Assessed in HITM 2200 and HITM 1220	Recognize the impact of legislation, regulations, licensure, and accreditation on health information management policies and procedures	
	3.1.1 Apply knowledge of the US legal system and the legislative processes (knows)	HITM 1220
	3.1.2 Identify legislation, regulations, regulatory standards, and judicial processes impacting health information management (knows)	HITM 1220 HITM 2200
	3.1.3 Identify the alignment of policy to legislation and regulations (shows)	HITM 1220 HITM 2200
	3.1.4 Recognize the impact of licensure and accreditation standards on health information management policies and procedures (shows)	HITM 1210 HITM 1220
	3.1.5 Properly cite and reference legislation and regulations (does)	HITM 1220 HITM 2215
3.2 Privacy, Security and Confidentiality (shows) Assessed in HITM 1220	Apply privacy, security and confidentiality legislation and regulation when collecting, retaining, using, releasing or destroying personal and health information	
	3.2.1 Obtain authorization for the collection, use and release of personal health information (shows)	HITM 1210 HITM 1220
	3.2.2 Identify potential and actual privacy and security risks and define steps to mitigate vulnerabilities and the risk of unauthorized access (shows)	HITM 1220 HITM 1240
	3.2.3 Follow legal requirements when releasing information to patients and authorized individuals and organizations (shows)	HITM 1210 HITM 1220
	3.2.4 Use physical, technical, and administrative controls to ensure safeguards are in place to protect assets (shows)	HITM 1220 HITM 1240
	3.2.5 Identify the vulnerabilities and the risk of unauthorized access (knows)	HITM 1220 HITM 1240
	3.2.6 Identify potential and real cyber security risks and define steps to mitigate risks (knows)	HITM 1220 HITM 1240
	3.2.7 Validate legal documents to protect patients and the organization (shows)	HITM 1220 HITM 1240
	3.2.8 Participate in reviewing a health information compliance plan to asses the level of compliance within the health system (shows)	HITM 1220 HITM 1240

3.3 Healthcare Fraud and Abuse (shows) Assessed in HITM 2244	Monitor and report on healthcare fraud and abuse	
	3.3.1 Differentiate between healthcare fraud and abuse as defined in legislation (knows)	HITM 1210 HITM 1220
	3.3.2 Identify the reporting requirements associated with healthcare fraud and abuse (knows)	HITM 1210 HITM 1220
	3.3.3 Analyze data and reports to identify trends and patterns of fraud or abuse (shows)	HITM 2210 HITM 2244
	3.3.4 Monitor clinical documentation integrity metrics and compare results to identify data trends (shows)	HITM 2210 HITM 2244
3.4 State and Federal Reporting (shows) Assessed in HITM 1220 and HITM 2240	Recognize the importance of state and federal reporting requirements	
	3.4.1 Identify required elements for reporting vital statistics and notifiable diseases, abuse, and deaths (knows)	HITM 1210
	3.4.2 Apply exceptions to the privacy legislation to release information for required reporting purposes (shows)	HITM 1220
	3.4.3 Conduct data queries to identify physician and practitioner compliance with regulatory, credentialing, and licensure requirements (shows)	HITM 2240
Unit 4: Data Management		
4.1 Health Record Life Cycle (does) Assessed in HITM 1210 and HITM 1240	Manage health record life cycle	
	4.1.1 Identify the content of the health record and documentation for various types and sizes of health organizations, including virtual environments (knows)	HITM 1210 HITM 1240
	4.1.2 Apply understanding of the health record life cycle (shows)	HITM 1210 HITM 1240
	4.1.3 Accurately enter, export, and sort health records data (does)	HITM 1210 HITM 1240
	4.1.4 Analyze workflow within an electronic health record (does)	HITM 1210 HITM 1240
	4.1.5 Identify components and interactions of software applications in the electronic health record (does)	HITM 1210 HITM 1240
	4.1.6 Implement, maintain and sunset an information system or application (knows)	HITM 1240
4.2 Data Configuration (does) Assessed in HITM 1240 and HITm 2240	Collect and configure data to ensure the meaning, relevance, and quality of data elements are the same for all users	
	4.2.1 Follow interoperability standards to ensure data sharing across systems (knows)	HITM 1240 HITM 2240
	4.2.2 Work with data dictionaries, templates, flow sheets, and forms align with requirements and parameters (does)	HITM 1240 HITM 2240

	4.2.3 Use data collection templates, flow sheets and forms, and identify purposes for collecting data and the required data elements (does)	HITM 1240 HITM 2240
4.3 Advanced Digital Applications (shows) Assessed in HITM 1210 and HITM 2244	Explore and use advanced digital applications	
	4.3.1 Examine the trends, applications, benefits, and risks of AI and matching learning (knows)	HITM 1210 HITM 1240
	4.3.2 Identify various artificial intelligence applications and other advanced technologies used in healthcare operations (knows)	HITM 1210 HITM 1240
	4.3.3 Examine data generated from advanced digital applications to review the security, authenticity or reliability of the data generated (shows)	HITM 1240 HITM 2244
Unit 5: Informatics and Data Analytics		
5.1 Data Collection and Databases (does) Assessed in HITM 2240	Acquire and manage clinical, financial or administration data from electronic systems, portals, mobile applications, and artificial intelligence	
	5.1.1 Determine appropriate data collection methods considering end-user perspectives and needs (knows)	HITM 1240 HITM 2240
	5.1.2 Access data in databases using analytic software (does)	HITM 2240
	5.1.3 Apply knowledge of database structures to search for, compile and modify data sets (does)	HITM 2240
5.2 Data Interpretation (does) Assessed in HITM 2231 and HITM 2240	Interpret data using spreadsheets and various statistical software	
	5.2.1 Identify data type and appropriate statistical application for the analysis (knows)	HITM 2231 HITM 2240
	5.2.2 Use spreadsheets and Excel to perform a variety of data analyses (does)	HITM 2231 HITM 2240
	5.2.3 Accurately interpret, calculate, summarize, and visualize data using statistical software (does)	HITM 2231 HITM 2240
5.3 Data Visualization (does) Assessed in HITM 2231 and HITM 2240	Generate visuals to support data interpretation	
	5.3.1 Choose the type of visualization based on the audience and data set (does)	HITM 2231
	5.3.2 Ensure correct data presentation to support accurate conclusions (does)	HITM 2231 HITM 2240
	5.3.3 Use various data analytic tools to create a visual display of data (does)	HITM 2231 HITM 2240
Unit 6: Clinical Coding		
6.1 Classification Systems, Nomenclature and Terminology (does) Assessed in HITM 1226 and HITM 2224	Use classification systems, nomenclature, and terminology for optimal code capture	

	6.1.1 Navigate various classification systems (does)	HITM 1227 HITM 1226 HITM 1236 HITM 2224
	6.1.2 Apply coding rules and guidelines (does)	HITM 1227 HITM 1226 HITM 1236 HITM 2224
	6.1.3 Apply classification systems, methodologies and approaches to assess data to identify patterns, trends, or differences (does)	HITM 1226 HITM 2224
6.2 Payor Transmittals, Coding and Payment Procedures and Documentation (shows) Assessed in HITM 1226 and HITM 2224	Apply regulatory and payer transmittals coding and payment procedures and documentation	
	6.2.1 Identify and report required changes to the revenue cycle based on payor requirements (knows)	HITM 2210 HITM 2224
	6.2.2 Apply diagnostic and procedural coding knowledge to support reimbursement methodologies and payment systems (shows)	HITM 1226 HITM 2210 HITM 2224
	6.2.3 Locate and navigate the CMS transmittal and other payor portals (knows)	HITM 1226 HITM 2210
6.3 Coding Validation (does) Assessed in HITM 2224 and HITM 2244	Utilize coding technological resources (encoder and computerized-assisted coding) to validate accurate code selection	
	6.3.1 Validate accurate code selections using coding technological resources (e.g., encoder and computer-assisted coding) (shows)	HITM 2224 HITM 2244
	6.3.2 Conduct audits to detect any performance issues and flaws in the applications (does)	HITM 1226 HITM 2224
	6.3.3 Recommend corrective actions to mitigate discrepancies and prevent future coding errors (does)	HITM 2224 HITM 2244
	6.3.4 Identify and correct problems with billing, coding and documentation to improve accepted claims (shows)	HITM 1226 HITM 2224
Unit 7: Financial and Revenue Cycle Management		
7.1 Revenue Cycle Management (shows) Assessed in HITM 1227 and HITM 2224	Participate in the revenue cycle management process to support reimbursement for patient services	
	7.1.1 Apply reimbursement methodologies and payment systems for the continuum of care (shows)	HITM 2210 HITM 2224
	7.1.2 Apply regulatory requirements for patient billing data collection, claim generation, and adjudication for reimbursement and compliance (shows)	HITM 2210 HITM 2224
	7.1.3 Define revenue life-cycle management from the initial patient contact through billing, payment adjudication, and cash posting (knows)	HITM 2210 HITM 2210

	7.1.4 Evaluate code assignment for accurate reimbursement from payer sources (shows)	HITM 1227 HITM 1226 HITM 2224
	7.1.5 Explain the remittance advice and payment process for revenue cycle management. (shows)	HITM 2210 HITM 2224
7.2 Patient Encounters and Payers Responsibilities (knows) Assessed in HITM 2210 and HITM 2224	Management processes to collect accurate, complete, and current information and verify responsible payers	
	7.2.1 Facilitate prior authorization and insurance eligibility activities (knows)	HITM 2210 HITM 2224
	7.2.2 Document patient encounters and data collection, including charge capture, coding, and charge entry (knows)	HITM 2210 HITM 2224
	7.2.3 Follow an established pricing estimate protocol to generate a transparent and compliant patient estimate of proposed services (knows)	HITM 1210
	7.2.4 Identify underpayments by payors or failure to capture revenue (knows)	HITM 1210
	7.2.5 Process denials and appeals for claims (knows)	HITM 1210
Unit 8: Quality, Risk Management and Safety		
8.1 Quality Assessment and Improvement (shows) Assessed in HITM 1240 and HITM 2200	Recognize quality assessment and improvement processes	
	PI 8.1.1 Audit the quality of patient records and report on issues and trends (shows)	HITM 1240 HITM 2200
	PI 8.1.2 Recognize the role of health information management in tracking and reporting on performance indicators (shows)	HITM 1240 HITM 2200
	PI 8.1.3 Collect data at the level of detail needed to monitor and analyze performance (shows)	HITM 1240 HITM 2200
	PI 8.1.4 Review quality reports to identify trends and areas of improvement for continuous quality improvement (shows)	HITM 1240 HITM 2200
8.2 Compliance Audits and Risk Management (does) Assessed in HITM 2200 and HITM 2240	Conduct audits to identify compliance and performance issues and risks	
	PI 8.2.1 Conduct an audit of health record data requirements and report on findings to promote workforce compliance with legal, regulatory, or accreditation requirements (does)	HITM 2200 HITM 2240
	PI 8.2.2 Compile and generate an audit report aligned to accreditation standards and communicate results (does)	HITM 1240 HITM 2240
	PI 8.2.3 Test new features and functions of new applications or templates to confirm data accuracy and use (shows)	HITM 1240 HITM 2240
	PI 8.2.4 Monitor data to identify risks, adverse events, and safety issues (shows)	HITM 1240 HITM 2240

Unit 9: Operational Management		
9.1 Virtual Business Administration (does) Assessed in HITM 2231 and HITM 1240	Conduct business and provide services in a virtual environment	
	PI 9.1.1 Interact with people virtually in their communities and other regions, states, or nations (does)	HITM 1240 HITM 2215 HITM 2231
	PI 9.1.2 Take steps to ensure authorized access to the session and the privacy and confidentiality of communication (shows)	HITM 1240 HITM 2231
	PI 9.1.3 Apply advanced communication skills to support transparent and engaging interactions (does)	HITM 1240 HITM 2215 HITM 2231
	PI 9.1.4 Apply time management skills and productivity principles to ensure a conducive virtual environment (does)	HITM 1240 HITM 2215 HITM 2231
9.2 Financial Management (shows) Assessed in HITM 2215 and HITM 2231	Understand basic financial management terms and structure	
	PI 9.2.1 Identify the broad financial imperatives facing the health systems and the basics of good financial stewardship (knows)	HITM 2215 HITM 2231
	PI 9.2.2 Review a cost-effectiveness and cost-benefit analysis of budget priorities (shows)	HITM 2215 HITM 2231
Unit 10: Leadership		
10.1 Leadership Principles (does) Assessed in HITM 2200 and HITM 2215	Apply leadership principles to guide services and lead others	
	PI 10.1.1 Practice shared decision-making with internal and external partners (does)	HITM 2200 HITM 2215
	PI 10.1.2 Practice ethical and transparent communications (does)	HITM 2200 HITM 2215
	PI 10.1.3 Provide coaching and mentoring to foster the professional development of others (does)	HITM 2200 HITM 2215
	PI 10.1.4 Apply evidence-based information and research to inform decisions and justify actions (does)	HITM 2200 HITM 2215
10.2 Interprofessional Collaboration Activities and Initiatives (does) Assessed in HITM 1220 and HITM 2215	Participate in interprofessional collaboration activities and initiatives	
	PI 10.2.1 Identify professionals with legal authority to access electronic health records and their professional obligations to document patient care services (knows)	HITM 1210 HITM 1240
	PI 10.2.2 Develop training materials for various individuals, groups, and populations in collaboration with interprofessional team members (does)	HITM 1220 HITM 2215

	PI 10.2.3 Recognize the various roles and scope of the interprofessional team (knows)	HITM 1210 HITM 2215
10.3 Critical Thinking (does) Assessed in HITM 1240 and HITM 2215	Use critical thinking to address challenges and opportunities	
	PI 10.3.1 Apply conflict resolution practices during difficult situations or conversations (shows)	HITM 1240 HITM 2215
	PI 10.3.2 Analyze problems, promote solutions, and encourage decision-making (does)	HITM 1240 HITM 2215
	PI 10.3.3 Apply evidence-based information and research to practice (does)	HITM 1240 HITM 2215