

Clinical Documentation Improvement

CDI Online to Support Transition to ICD-10

Option to Certify as a Certified Medical Documentation Professional (CMDP)



An eLearn Training Program for Healthcare Professionals

Work online at your own pace with no scheduled classes to attend

Sponsored by



American Institute of Healthcare Compliance, Inc.

431 W. Liberty Street Medina, Ohio 44256

Toll Free: 866-571-5635 / Cleveland/Akron Area: 330-241-5635

Fax: 330-952-0716 / [Contact Us](#)

Visit our web site at www.aihc-assn.org

An Internationally Recognized Compliance Training & Certification Leader in Health Care
501(c)(3)Non-Profit Organization

Who should take this course?

This course is designed for Documentation Specialists, Nurses, Health Information Management (HIM) Professionals, Professional Auditors and others tasked with responsibility to improve documentation standards in Clinics, Outpatient Departments and Inpatient Facilities.

What is eLearn training?

eLearn Training courses are online instructor assisted programs. There are no scheduled classes to attend. You may work at your own pace and will have the ability to login to your information 24 hours per day. Your instructor will be available to communicate by phone and e-mail to assist you throughout your training program. Instructors provide online access, technical support and course instruction as needed to help in your educational efforts.

What will I learn from this course?

- Introduction to Clinical Documentation Improvement (CDI) and ICD-10
- Basics of Clinical Documentation Improvement:
 - Role of CDI Programs & Professionals
 - Authentication Rules for Records
 - Amendments, Corrections and Delayed Entries
 - Recordkeeping Principles
- Dangers of Cloned Documentation
 - OIG Compliance
 - Increasing Public Awareness and Concern
- Capturing “Who, What and Why” of the Encounter
 - Chief Complaint, HPI, ROS, PFSH, Present on Admission (POA) Guidelines
- Capturing the Examination or Objective Portion of the Visit
 - 1995 Documentation Guidelines
 - 1997 Documentation Guidelines
 - Hospital-Acquired Conditions (HACs)
- Key to Medical Necessity: Recording the Clinical Impression
 - Data to Prevent Future Harm to Patients
 - Hospital Readmissions Reduction Program
 - Hospital Quality
- Inpatient Hospital & Critical Access Admissions: 2 Mid-Night Rule
- Understanding ICD-10 Reporting Requirements
 - Comparing ICD-9-CM to ICD-10-CM
 - Inpatient Procedures – Root Operations
 - Span Dates
- Supporting Documentation for ICD-10-CM
 - Certain Infectious and Parasitic Diseases
 - Neoplasms
 - Endocrine
 - Nutritional & Metabolic Diseases
 - Mental & Behavioral Disorders
 - Nervous System
 - Sense Organs: Eye & Adnexa; Ear & Mastoid
 - Integumentary System
 - Musculoskeletal System
 - Genitourinary System
 - Pregnancy, Childbirth & Puerperium
 - Perinatal Congenital Conditions
 - Signs, Symptoms & Abnormal Findings
 - Injury, Poisoning & External Causes
 - 7th Character Chart for Reporting Fractures Classification
 - Index Poisoning
 - Under Dosing Maltreatment
 - Complications of Care
 - External Causes of Morbidity Factors Influencing Health Status

Can I earn Continuing Education Units (CEUs)?

Yes! **EARN 16 CONTINUING EDUCATION UNITS**



16 CEUs: This program has been approved for 16 continuing education units (CEUs) by the American Institute of Healthcare Compliance for AIHC Certified Professionals.



16 CEUs: This program has been approved for 16 continuing education units(s) for use in fulfilling the continuing education requirements of the American Health Information Management Association (AHIMA). Granting prior approval from AHIMA does not constitute endorsement of the program content or its program sponsor. A breakdown of the core content hours approved:

- Technology: 8 Hours
- Clinical Data Management: 8 Hours

What is included in this course?

- ✚ Start training after registration is processed. Course must be completed in 6 months to avoid extension fees and/or penalties
- ✚ Training book, homework and online quizzes are accessed through your Online Course Page
- ✚ Homework and online quizzes are accessed through your Online Course Page.
- ✚ Downloadable information can be used for future reference.
- ✚ Online Course Manager assigned to each professional enrolling in the program to provide professional guidance, technical web site support and assist in the learning experience.
- ✚ AIHC Membership for one year (*for non-members only*)

Experienced Documentation Specialists & HIM Professionals have the **option** to Certify as a Certified Medical Documentation Specialist (CMDP) after successful completion of the Clinical Documentation Improvement program. The online exam can be taken from the comfort of your home or office by appointment only and scheduled with a professional AIHC proctor. The certification exam is **OPTIONAL**, but the cost is **INCLUDED** in your course tuition. [Click Here](#) for more information regarding the **CMDP Exam**

How do I maintain my CMDP Credential?

Once you are certified, you need to maintain your credentials by earning six (6) continuing education units annually as described below.

[Click Here](#) to access the online CEU renewal chart.

AIHC OFFERS FREE AND LOW COST (\$35) CEU PROGRAMS TO OUR MEMBERS

Are there specific computer requirements needed for this course?

Computer
Requirements



Yes! You will need High-speed Internet access, Email, Microsoft Word, Excel & Adobe Reader

What is the cost?

Tuition: \$675.00

AIHC Members pay only \$575 with Coupon Code located in the AIHC Member Store

Non-Member: [Click Here](#) to register online

AIHC Member: [Click Here](#), locate Course in the **AIHC Members Store**



Copy the Coupon Code & click “**Register Now**”

Login; Registration form auto-populates – enter coupon code at checkout



OR scroll down for hard copy registration form

Do You Offer Multiple Student Discounts For Organizations?

Yes! Please [Contact Us](#) for more information!

Do You Have Payment Options Available For This Course?

Yes! We offer in-house payment plans – please [Contact Us](#) for more information *OR* we offer the option to use PayPal Credit when paying online through PayPal.

	No Payments + No Interest if paid in full in 6 months on purchases of \$99+ Check out with PayPal and choose PayPal Credit <small>Subject to credit approval. See terms. US customers only.</small>	
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[Scholarship Assistance](#) is available to our *current* members employed with a company that does not offer tuition reimbursement.

Do you have a Refund Policy?

Yes! [Click Here](#) to view our Refund and Transfer Policy



**Clinical Documentation Improvement
eLearn Program
ENROLLMENT FORM**

Office Use Only Date Received: Online Manager: Web site Access: Payment Plan: [] Yes [] No

Enrollment Date: _____ Print Name & Credentials (one form per person) 	<p align="center">TUITION (CHECK APPROPRIATE BOX)</p> Clinical Documentation Improvement (CDI): <input type="checkbox"/> Tuition: \$675.00 <input type="checkbox"/> Optional Certification Exam <input type="checkbox"/> Coupon Code: _____ (if applicable) AIHC Member? Use coupon Code and register for less! <input type="checkbox"/> Tuition: _____ <input type="checkbox"/> Optional Certification Exam <input type="checkbox"/> Coupon Code: _____ <input type="checkbox"/> Member ID#: _____
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Employer Name, Position & Check Highest Level of Education: 	<input type="checkbox"/> High School <input type="checkbox"/> Associate Degree <input type="checkbox"/> Diploma Program <input type="checkbox"/> Bachelor Degree <input type="checkbox"/> Masters or Higher
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Employer Address: <input type="checkbox"/> Ship text(s) here <i>Is Employer paying for this course? <input type="checkbox"/> Yes <input type="checkbox"/> No</i>	Home Address: <input type="checkbox"/> Ship text(s) here
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Clearly Print Your Email Address(es) (For Website Administration & Confirmation of Registration) Primary: Alternate:	Work Phone (Ext.):	Alternate phone/Cell:
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Charge My Credit Card: [] VISA [] MasterCard [] Discover Fax to: 330-952-0716		
Card #:	Sec Code	Exp. Date
Billing address for credit card: _____		
Name as it appears on the card: _____		
Authorized Signature & Date: _____		

Paying by Corporate Check? Amount Due: _____

Please make checks payable to: AIHC
Mail to: American Institute of Healthcare Compliance 431 W. Liberty Street Medina, OH 44256
PHONE: 330-241-5635 / FAX: 330-952-0716

Please visit our website at www.aihc-assn.org for more information about our company.
Inquiries should be made to [Contact Us](#)

How did you hear about us?
 Mailing Email Co-worker AIHC web site AHIMA web site Facebook Other _____

American Institute of Healthcare Compliance, Inc.

Membership Application/Required for non-members enrolling in this program (Membership included in price of tuition for NEW MEMBERS ONLY)

Job/Position (title & brief description):

Are you certified by any organization? Please indicate certification and company name:

Are you a licensed clinical professional? Please check all appropriate boxes:

- | | |
|---|---|
| <input type="checkbox"/> MD/DO | <input type="checkbox"/> Physician Assistant |
| <input type="checkbox"/> Chiropractor | <input type="checkbox"/> Nurse Practitioner/Midwife |
| <input type="checkbox"/> Doctor of Podiatric Medicine | <input type="checkbox"/> Registered Nurse |
| <input type="checkbox"/> Physical Therapist | <input type="checkbox"/> Licensed Practical Nurse |
| <input type="checkbox"/> Occupational Therapist | <input type="checkbox"/> Medical Assistant |
| <input type="checkbox"/> Speech-Language Pathologist | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Kinesiotherapist | |

OIG exclusion

Have you ever been:

- 1) Notified that you were under investigation for; investigated for; charged with; or convicted of any offense relating to Medicaid or Medicare fraud?
- 2) Placed on the OIG exclusion list?

Membership Requirement (Restriction)

AIHC membership is open to the public, health care workers and administrators as well as certified healthcare auditors, collectors and compliance officers. To uphold a high standard, AIHC follows the guidelines recommended by the Office of the Inspector General (OIG) regarding retention of excluded individuals. For many years the Congress of the United States has worked diligently to protect the health and welfare of the nation's elderly and poor by implementing legislation to prevent certain individuals and businesses from participating in Federally-funded health care programs. The OIG, under this Congressional mandate, established a program to exclude individuals and entities affected by these various legal authorities, contained in sections [1128](#) and [1156](#) of the [Social Security Act](#), and maintains a list of all currently excluded parties called the List of Excluded Individuals/Entities. (See OIG website at <http://exclusions.oig.hhs.gov/>)

No individual whose name appears on the OIG Excluded Individuals Entities List may hold membership in AIHC; and any member whose name is added to this list will have his/her membership status revoked without refund.

“My signature below indicates I have read this restriction for membership and attest that I am not currently on the OIG exclusion list at the date this application has been submitted for membership to the American Institute of Healthcare Compliance.”

Signature

Date