

2022 Key to ICD-10-PCS Coding Skills

Online, On-Demand

A Continuing Education Training Program

Designed for Inpatient Coders, Medical Billers, Inpatient Coding Instructors, Auditors, Investigators and Providers.



Online, On-Demand Training 24/7

This course is Online, On-Demand with no scheduled classes to attend during your 3-month access to course materials.

Earn Continuing Education Units (CEUs)



5 CEUs: This program has been approved for 5 continuing education units by the American Institute of Healthcare Compliance for AIHC Certified Professionals. These continuing education units may be applied towards the Core, HIPAA, and Ethics Category CEU Renewal Requirements for the following AIHC credentials: ICDCT-PCS, CHA, CIFHA, CHBS.



5 CEUs: This program has been approved for 5 continuing education units 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. **Core Content Hours Approved:** Data Structure, Content and Information Governance, 5 Hours

What You Will Learn

Lessons include self-review exercises and online quizzes.

PCS in a Nutshell

- PCS Characters in Review [Review of Characters by Section, Body System & Root Operations]
- How the Root Operation Character is Key to accurate code assignment

2022 Guidelines – What’s New

- Comparison Between 2021 and 2022 Data
- FY 2022 Update Summary

The Root Operation is Key

- Review of PCS Coding Guidelines and the Root Operation

HIPAA & Ethics for Coders



Computer Requirements and Time Limits

To successfully complete this course, you will need high-speed internet access, email, and [Adobe Reader](#). If you do not have Adobe Reader, use the link provided above to download it for free from the Adobe website.

You will have access to the online AIHC Exams training page for 90 days starting on your enrollment date. Your course enrollment will begin within 2-3 business days of the date that the AIHC Office receives your course tuition payment. You will receive notification from our office when your course enrollment begins. Please check with your employer regarding date requirements for your completion of this training.

Course Tuition Includes:

- A technical support professional is assigned to each professional enrolling in the program to provide professional guidance, technical website support, and assistance throughout the learning experience.
- Training materials and quizzes to test your knowledge are provided for up to three (3) months.
- Temporary AIHC Membership is provided for three (3) months.
- A Certificate of Completion is awarded for passing the online quizzes with a minimum score of 80%.

Cost of this Training:

Non-Members Pay \$150

AIHC Members Pay: \$85 [Members Save \$65]

How to Register for this Course

Register Online – Return to the Course Page, Enroll and Pay!

We accept online registration payment via credit card.



Register Via Mail or Fax: Scroll down for a hard copy enrollment form. Mail or fax your completed form to the AIHC Office to submit your registration and payment information.

Refund Policy




View the Refund Policy Posted on the Home Page of our Website under Financial Policies www.aihc-assn.org



HARD COPY REGISTRATION FORM

Key to ICD-10-PCS Coding Skills – Online

Please submit one form per person

| | |
|--|--|
| Name & Credentials: | Enrollment Date: |
| Home Address: | Employer Name & Address: |
| Current Job Position: | |
| (For website administration and registration confirmation) Primary Email Address: | Work Phone Number: |
| Alternate Email Address: | Alternate or Cell Phone Number: |
| Credit Card Payment Information: <div style="display: flex; justify-content: center; align-items: center; gap: 20px; margin-top: 5px;">    </div> <div style="display: flex; justify-content: center; align-items: center; gap: 20px; margin-top: 5px;"> <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover </div> | |
| Amount Approved on this Credit Card: <input type="checkbox"/> \$150 Non-Member Price <input type="checkbox"/> \$85 AIHC Member Price Card Number: _____ Security Code: _____ Expiration Date: _____ Billing Address for this Card: _____ Name As It Appears on this Card: _____ Authorized Signature & Date: _____ | |
| <p>Please Make Checks Payable to: AIHC</p> <p><input type="checkbox"/> \$150 Non-Member Price <input type="checkbox"/> \$85 AIHC Member Price</p> <p>AIHC Mailing Address: 3637 Medina Road, Suite 15, Medina, Ohio 44256</p> <p>AIHC Fax Number: (330) 952-0716</p> <p>How did you hear about us?</p> <p><input type="checkbox"/> Mail <input type="checkbox"/> Email <input type="checkbox"/> Co-Worker <input type="checkbox"/> AIHC Website <input type="checkbox"/> Social Media <input type="checkbox"/> Other: _____</p> | |

