



American Institute Of Healthcare Compliance

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www.aihc-assn.org

MEDICAL BILLING CERTIFICATION

The American Institute of Healthcare Compliance, Inc., a national 501(c)(3) non-profit organization and is recognized for providing compliance training and certifications to administrators in the health care industry. Two certifications are now available in medical billing:

1. Certified Outpatient Billing Specialist (**COBS**)
2. Certified Inpatient Billing Specialist (**CIBS**)

We Offer Certification Options!

All options described below include first year AIHC membership fee, online mock exam and proctored online certification exam. No travel necessary!



1. ***On-line Exam Prep - a Short Course!*** Those interested in certification but have the need for a review course - we offer an online exam prep program! This online six (6) week program provides reading, exercises and training in all billing domains to prepare you for certification. Tuition of **\$750** includes online program, text/study guide, mock exam and certification online exam. 80% required to pass - you have 3 attempts to pass for \$750.
2. ***Study Guide & Certification Exam!*** Many medical billers may want to review the information used as the basis for the certification exam! Exam fee of \$450 includes the text/study guide, mock exam and certification online exam. 80% required to pass - you have 3 attempts to pass for **\$450**.
3. ***Certification Exam Only!*** **\$250** is the cost to take the certification exam only - which includes access to the online mock exam and three attempts to pass the certification exam. Experienced billers with recent classroom training or graduates from a medical billing course qualify to take the certification exam. 80% required to pass.

COBS: Certified Outpatient Billing Specialist

Examination Objective- To test core competencies of experienced outpatient & physician office medical billers or graduated students from community college adult education programs in outpatient medical billing.

The COBS 6-week course covers the following topics as well:

Examination Content

- Patient privacy under HIPAA (Health Insurance Portability & Accountability Act);
- Legal & ethical standards of the medical billing profession;
- Responsibilities as a biller under the Civil False Claims Act;
- Basic understanding of the differences between Government insurance programs, Managed Care Organizations and indemnity plan insurances;
- Coordination of benefits, Medicare secondary payer, payer of last resort guidelines for compliance;
- CMS 1500 Claim form – filing requirements, NPI, group and individual provider number compliance;
- Basic knowledge of assigning CPT (Current Procedural Terminology), HCPCS level II, modifiers and ICD-9-CM coding to create accurate claims;
- Performing pre-billing audits;
- Interpreting Remittance Advice/Explanation of Benefits from insurance;
- Consumer protection laws & billing patients;
- Appealing denied claims and the Medicare appeals process.



CIBS: Certified Inpatient Billing Specialist

Examination Objective- To test core competencies of graduated students from community college adult education programs and/or county career centers in *inpatient/hospital* medical billing.

The CIBS 6-week course covers the following topics as well:

Examination Content

- Hospitals and the regulatory environment;
- Chargemaster;
- Hospital billing processes;
- Accounts Receivable Management;
- Responsibilities as a biller under the Civil False Claims Act;
- Basic understanding of the differences between Government insurance programs, Managed Care Organizations and indemnity plan insurances;
- Coordination of benefits, Medicare secondary payer, payer of last resort guidelines for compliance;
- Hospital UB04 and 1500 claims forms
- Hospital Coding: hospital outpatient CPT, modifiers, ICD-9-CM volumes I, II and III.
- Interpreting Remittance Advice/Explanation of Benefits from insurance;
- Consumer protection laws & billing patients;
- Appealing denied claims and the Medicare appeals process.



Minimum Competency – Required Score to Pass Certification Exam

Pass/Fail $\geq 80\%$ is required to obtain certification. If your score is less than 80% on the first exam, it may be retaken two additional times within 45 days for no additional charge.

Various versions of the exam are available to avoid duplication of the same exam among students. Exams are 100 questions total taken as an open book, timed on-line exam with a remote proctor.

We offer the online course and certification exam to those located in other countries (our *global connectivity* option). Please indicate clearly if you are located in a country other than the United States on your registration form.

Examination Registration

Students register directly with The American Institute of Healthcare Compliance.



Advance Registration is Required: a minimum of 4 weeks prior registration is required.

Testing is offered Monday-Friday 8am – 6pm and Saturdays from 9am – 12 pm. Other times may be arranged upon mutual agreement with the examinee. We strive to accommodate special testing needs as well.

Maintaining Certification



To maintain certification credentials, annual renewal of certification requiring twelve (12) continuing education units (CEUs) will be required along with an annual fee to be paid by each student as follows:

- 4 CEUs annually in coding or auditing
- 4 CEUs annually in patient collections
- 4 CEUs annually in medical billing compliance
- 12** [CEUs and annual renew fee each year](#)

CEUs may be earned through classes offered at your local career center or college, the American Institute of Healthcare Compliance (*free CEUs to members through our web site*), the American Academy of Professional Coders, American Health Information Management Association, The American College of Medical Coding Specialists or other organizations - contact us for more information.



Exam Software, Student Access & Security

Students logon to our web site first, then logon to the exam through various security measures.

Each of the exams has various versions. Even within a version, the answers are scrambled to ensure security of sharing answers between students. This feature enables us to test numerous people at the same organization simultaneously.

International/Global Testing Options!

AIHC provides testing options for those in foreign countries. We have graduates currently serving in the United States Military, government contractors as well as American medical billing companies stationed abroad. Specialty proctors are available to meet your needs if you are testing from outside of the United States.



Exam Security Features

Controls to manage security are hosted at the AIHC main office with oversight by the Exam Board and Board of Directors.

Students registered to take the exam will be scheduled for a specific date and time. An AIHC proctor will release the logon and password to the AIHC web site for testing use.

A portal has been created to connect to the secure *Articulate* site with additional login and password for the specific exam for that student. Login and passwords are not released until the date of the exam.

**Questions?
Need Career Counseling?**



**Call us toll free
866-571-5635**





CIBS/COBS

REGISTRATION FORM - PLEASE PRINT CLEARLY

Name		Registration Date
Home Address	(work) (home) (cell)	Phone Contact
Employer Name, Address		
Email Address		
Exam Date Preferences List 3 dates and times in order of preference		
1) _____ am / pm <input type="checkbox"/> East Coast <input type="checkbox"/> Central <input type="checkbox"/> Mountain <input type="checkbox"/> Pacific		
2) _____ am / pm <input type="checkbox"/> East Coast <input type="checkbox"/> Central <input type="checkbox"/> Mountain <input type="checkbox"/> Pacific		
3) _____ am / pm <input type="checkbox"/> East Coast <input type="checkbox"/> Central <input type="checkbox"/> Mountain <input type="checkbox"/> Pacific		
MARK APPROPRIATE BOX (CHECK ONE BOX)		
Online Course & Exam COMBO \$1,150 <i>(includes: BOTH online courses, texts, mock and certification exams & first year AIHC membership)</i> <input type="checkbox"/> Certified Inpatient & Outpatient Billing Specialist Exams (CIBS & COBS credentials)		
Online Course & Exam \$750 <i>(includes: online course, text, mock and certification exam & first year AIHC membership)</i> <input type="checkbox"/> Certified Inpatient Billing Specialist Exam (CIBS credentials) <input type="checkbox"/> Certified Outpatient Billing Specialist Exam (COBS credentials)		
Study Package & Exam \$450 <i>(includes text, mock exam, certification exam and first year AIHC membership)</i> <input type="checkbox"/> Certified Inpatient Billing Study Package (CIBS) <input type="checkbox"/> Certified Outpatient Billing Study Package (COBS)		
Certification Exam Only \$250 <i>(includes first year AIHC membership)</i> <input type="checkbox"/> Certified Inpatient Billing Specialist Exam (CIBS credentials) <input type="checkbox"/> Certified Outpatient Billing Specialist Exam (COBS credentials)		
Background Information (required)		
Highest Level of Education: <input type="checkbox"/> High School <input type="checkbox"/> Associates <input type="checkbox"/> Diploma Program <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters or Higher Billing Experience: <input type="checkbox"/> On the job – provide number of years experience: _____ years <input type="checkbox"/> Career Center Program <input type="checkbox"/> Vocational School or Community College		
Charge My Credit Card [] Visa [] MasterCard [] Discover [] American Express Card #: _____ (Sec. Code) _____ Expiration Date: _____ Name as it appears on the card: _____ Billing address of card: _____ Authorized Signature & Date: _____		
Please fill out the AIHC membership application below. Fax both the registration form and membership application to AIHC 330-952-0716 or mail to AIHC 445 W. Liberty Street, Suite 100, Medina Ohio 44256		

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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) Have you ever been 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 to a higher 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 www.hhs.gov/oig)

No individual whose name appears on the OIG Excluded Individuals Entities List may hold membership in AHIC; 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 to 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