Health Data and Information Management

The Metropolitan Community College Health Data and Information Management program leads to completion of an Associate in Applied Science degree. The program combines online instruction, online simulation activities and an in-person practicum experience to prepare students for employment in the health information management field. The instruction and simulation activities are online only. The practicum experience takes place at a healthcare organization.

Students must earn a C or better in each course in the HDIM program to complete the degree requirements. The program is organized in a prescribed sequence with HDIM courses offered twice during the academic year in the designated quarter only.

The Health Data and Information Management program is the only MCC program accredited by the Commission on the Accreditation for Health Informatics and Information Management Education (CAHIIM). CAHIIM is the accrediting body for degree-granting programs in health informatics and information management.

Graduates of the HDIM program are eligible to take the national examination required for certification as a registered health information technician (RHIT). The RHIT exam is given by the American Health Information Management Association (AHIMA). This credential is an important step for graduates to gain employment as a health information professional in a variety of settings.

Application process

Complete and submit the items listed below. All of the items must be submitted to be considered for the HDIM program. Applications that have missing items will not be reviewed and will be returned to the applicant. Use the attached application checklist to ensure everything is included.

Only students accepted into the HDIM program are permitted to register for HDIM courses with the exception of HDIM 1001: Medical Terminology. Course registration is completed by the HDIM program director; students cannot self-register for HDIM courses. Application process and requirements are subject to change without notice.

Submit:

- Signed application checklist
- Attached application (print or type)
- Essay of at least 300 words. The essay should be signed and address the following topics in sufficient detail and depth to support the application to the HDIM program:
  1. Description of your career goals. This can be answered by describing your dream job.
  2. Reasons for selecting the health information management field of study. How does completing the HDIM program fit with obtaining your dream job?
  3. What are your strengths that will benefit you and your future employers working in health information management? (describe at least two)
  4. Detail your experience applicable to the health information management profession. (Your experience does not need to be from paid employment. Volunteer and service activities provide valuable background.)
- Two signed letters of recommendation (references), that address some of the same topics as the essay. Letters should be from either two professional references or one professional and one personal (excluding family members). Letters may be scanned or copied and submitted with the application packet, attached in an email or mailed separately.
- Unofficial transcripts providing evidence of completion of the general education requirements. Official transcripts will be required from transfer students upon acceptance to the program. Applicants who are in process of completing their general education requirements must submit evidence of course enrollment.
- Evidence of current CPC or CCS certification, if applicable.
- Optional: Attach a résumé.

Send all of the above to:

- Metropolitan Community College
  Attn: Kelly Hajek, Health Data and Information Management Program
  Elkhorn Valley Campus, room 332
  P.O. Box 3777
  Omaha, NE 68103-0777

Application timeline

<table>
<thead>
<tr>
<th>Application deadline</th>
<th>July 1</th>
<th>Dec. 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicants notified</td>
<td>End of July</td>
<td>Early Jan.</td>
</tr>
<tr>
<td>Program begins</td>
<td>Fall quarter</td>
<td>Spring quarter</td>
</tr>
<tr>
<td>Format</td>
<td>Online</td>
<td></td>
</tr>
<tr>
<td>Accepted</td>
<td>Enrollment is limited per quarter</td>
<td></td>
</tr>
</tbody>
</table>

Program questions

Kelly Hajek, RHIA
HDIM program director
kahajek@mccneb.edu
HDIM program requirements

Prerequisites

Applicants must have earned a C or better in the general education requirements listed below. Applicants who have a bachelor’s degree have met the requirements.

- English Level I
- Humanities/Social Sciences (one course). *See guidelines
- Natural Science/Social Sciences (one course). *See guidelines
  *Students cannot select Social Sciences for both areas. One requirement must be a Humanities or Natural Science course. View MCC catalog pages to see which courses qualify.
- HMRL 1010 - Human Relations Skills, RDLS 1200 - College and Career Strategies, or
  INFO 1001 - Information Systems and Literacy

The following general education requirement is not a prerequisite for application to the program but are prerequisites to HDIM 2010 Healthcare Statistics and must be completed before enrollment in that course.

- MATH 1410 - Statistics

Additional Requirements

- Computer technology skills and internet access to take courses online
- Current MCC students must be in good academic standing with no business office holds
- High school diploma or GED

Requirements for the in-person practicum

In the practicum, students complete 80 contact hours at a healthcare organization. Students enroll in the practicum when they are near completion of the requirements for the associate degree in HDIM. Practicum hours occur during the workweek (Monday–Friday, 8 a.m.–5 p.m.).

Students must submit the following to be enrolled in the HDIM Practicum.

- Health clearance and evidence of current immunizations
- Social Security Number or an I-94
- Clearance on a criminal background check. Clearance that states a report was found may delay or deny practicum placement.
- Drug test (Required by some practicum sites.)

Selection criteria

Selection criteria are based on the following weighted factors:

1. The applicant’s GPA for the four required general education courses multiplied by 10 to determine the GPA value points. For example, a GPA of 2.9 multiplied by 10 equals 29. Maximum point value: 40. Courses completed through CLEP tests will receive a grade of C when computing the GPA.

2. Evaluation of the essay as meeting the following:
   - Required items are addressed in sufficient depth as to provide a rationale for selecting health information management as a career. Maximum point value: 30
   - Essay is written using correct grammar, spelling and punctuation. References are cited when applicable. Maximum point value: 10

3. Letters of recommendation support applicant’s essay. Maximum point value: 10

Applications are used for the current application period only. Applicants who are not accepted but wish to be considered in the future must submit a new application packet.

Acceptance into the HDIM program

As stated on the HDIM web page, applicants will be notified of whether they have been accepted into the HDIM program. The notification will be sent by email at the email address provided on the application. MCC email will be used for those indicating they have an MCC email address.
HEALTH DATA AND INFORMATION MANAGEMENT APPLICATION

Application deadline: July 1 for fall quarter start; Dec. 1 for spring quarter start

Personal (print or type)

Full legal name ____________________________________________________________
(last)    (first)    (full middle)    (maiden)

MCC student ID, Social Security or I-94 number ________________________________

Home or mailing address ____________________________________________________
(street)    (city)    (state)   (ZIP)

Employer _________________________________________________________________
(name)       (address)

Telephone ________________________________________________________________
(home)                                       (work)   (cell, circle one: iPhone or Android)

Email _________________________________________________________________
(personal email)                                                        (MCC email)

Gender:   □ male  □ female  Birth date ________________________________
(month)   (day)   (year)

Marital status:
□ single  □ married  □ widowed  □ divorced

U.S. citizen: □ yes  □ no
If no, type of visa: □ student  □ permanent  □ other _________________________

Have you previously enrolled at MCC?   □ no   □ yes  dates _______________________

Do you have a □ high school diploma or □ GED  year received _______________________

Name of granting institution _______________________________________________

Address of granting institution _____________________________________________
(street)  (city)              (state)  (ZIP)

Colleges previously attended other than MCC (if applicable):
(In order to complete the application process, all colleges/universities you have attended must send an official academic transcript to Metropolitan Community College, Records, P.O. Box 3777, Omaha, NE 68103-0777.)

College  Address  Dates attended

1. ________________________________________________________________

2. ________________________________________________________________

3. ________________________________________________________________

4. ________________________________________________________________
Employment history:
Provide your most recent employment work experience within the last two years. Your employment history is reviewed for information only and will not be considered in determining acceptance decisions.

1. Position ________________________________ Number of years in position ____________________________

Department or organization name ________________________________ Location (city and state) ____________________________

Current professional licenses, certifications or registrations
(e.g., certified professional coder) _____________________________________________________________

Please provide evidence of CPC, COC or CCS certification _____________________________________________

2. Position ________________________________ Number of years in position ____________________________

Department or organization name ________________________________ Location (city and state) ____________________________

Current professional licenses, certifications or registrations
(e.g., certified professional coder) _____________________________________________________________

Please provide evidence of CPC, COC or CCS certification _____________________________________________

3. Position ________________________________ Number of years in position ____________________________

Department or organization name ________________________________ Location (city and state) ____________________________

Current professional licenses, certifications or registrations
(e.g., certified professional coder) _____________________________________________________________

Please provide evidence of CPC, COC or CCS certification _____________________________________________

I certify that to the best of my knowledge, the information furnished on this application and its attachments is accurate. I agree that if any of the above information is found to be false, MCC has the right to deny my application for acceptance. I agree to abide by the rules and regulations of MCC in accordance with the current College catalog. I acknowledge that all official transcripts that are sent to MCC become the property of the College and will not be forwarded to another institution or returned to me.

Applicant’s signature ____________________________________________ Date ____________

Printed name ____________________________________________________________
Nondiscrimination and Equal Opportunity Statement
Metropolitan Community College does not discriminate on the basis of race, color, national origin, genetic information, religion, sex, sexual orientation, gender identity, transgender status, marital status, age, pregnancy, disability, current or prior military service, protected veteran status or membership in any other class that is protected under local, state or federal law or regulation in admission or access to its programs and activities or in its treatment or hiring of employees. The College complies with Title VI of the Civil Rights Act of 1964, the Civil Rights Act of 1990, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act of 1990, the Age Discrimination Act of 1975 and related Executive Orders 11246 and 11375, and all amendments to the above.

Contacts:
Concerning Title VI (race), Title IX (gender equity), Section 504 (disability), Americans with Disabilities Act/Program and Services Accessibility and age, contact:

Julie Langholdt – Dean of Student Advocacy and Accountability: 531-622-2202, jlangholdt@mccneb.edu (students);
Missy Beber – Associate Vice President of Human Resources: 531-622-2236, mlbeber@mccneb.edu (employees);
Bernie Sedlacek – Director of Facilities Management, Planning, and Construction: 531-622-2529, bsedlacek@mccneb.edu (accessibility); or
United States Department of Education Assistant Secretary for Civil Rights – Office for Civil Rights (OCR): 1-800-421-3481, ocr@ed.gov.

Concerning hiring and employment-related complaints of discrimination or harassment based on race, color, national origin, genetic information, religion, sex, sexual orientation, gender identity, transgender status, marital status, age, pregnancy, disability, current or prior military service, protected veteran status or membership in any other class that is protected under local, state or federal law or regulation, or affirmative action or diversity issues, contact:

Associate Vice President for Equity and Inclusion: 531-622-2649, cgooch@mccneb.edu

The address for all of the above individuals is as follows:

Metropolitan Community College
30th and Fort streets
P.O. Box 3777
Omaha, NE 68103-0777
Applicant must attach this checklist to the other application documents or the application packet will be rejected.

Student name ____________________________________________

MCC student ID # _________________________________________

Attached items

☐ Completed and signed application forms (Page 3-4)

☐ Copy of transcript (unofficial copy) that shows completion of the following courses with a C or better in each or evidence of current enrollment. Students with bachelor’s degrees are exempt from these course requirements.

☐ English Level I  ☐ Humanities/Social Sciences (one course) *see guidelines

☐ Natural Science/Social Sciences (one course) *see guidelines

☐ HMRL 1010 - Human Relations Skills, RDSL 1200 - College and Career Strategies, or INFO 1001 - Information Systems and Literacy (one course)

*Students cannot select Social Sciences for both areas. One requirement must be a Humanities or Natural Science course. View MCC catalog pages to see which courses qualify.

☐ Completed and signed 300-word essay

☐ Two signed letters of recommendation (references):
  ☐ Two professional   OR   ☐ One professional and one personal (excluding family members)

By placing a check mark or X in the boxes below, you are stating yes or affirming the statement.

☐ As a current MCC student, I am in good academic standing with no business office holds. (Applies only to current MCC students)

☐ I understand that the HDIM courses are presented in an online format only.

☐ I understand that the HDIM curriculum is organized in a prescribed sequence with courses offered twice during the academic year in the designated quarter only. This means if I do not follow the prescribed sequence, I may have to wait for the next class offering, to catch up.

☐ I understand the additional requirements of the in-person practicum.

☐ I understand that I must earn a C in each course in the HDIM program to complete the degree requirements. This includes all courses: general education and optional requirements.

☐ I understand that if not accepted at this time, I will need to resubmit the entire application for the next program application period.

Applicant’s signature ______________________________________ Date ____________

Printed name ____________________________________________