



ACADEMY
of MEDICAL PROFESSIONS

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MEDICAL OFFICE SPECIALIST WITH MEDICAL BILLING

NATIONALLY CERTIFIED AS A MEDICAL ADMINISTRATIVE ASSISTANT (CMAA) MEDICAL BILLING CERTIFICATE THROUGH AMP

A Medical Administrative Assistant is a versatile professional. The duties that are performed vary not only from office to office but even within the same office. Medical Administrative Assistants perform routine duties within the offices of many types of health professionals, including physicians, chiropractors, cardiologists and others. In addition, individuals can accomplish various jobs in the hospital environment, and some are employed by freestanding emergency centers and surgery centers.

Opportunities for Certified Medical Administrative Assistants are growing because of the constant change within the medical profession and the surge of cross-training, which means that one individual is trained to do a variety of duties.

Certified Medical Administrative Assistants greet patients as they arrive, obtain basic registration information, assemble patient's medical records, office accounting, filing, handle all correspondence and scheduling of outpatient procedures, consultations and appointments. In addition, they must have a basic knowledge of procedure and diagnostic coding, the ability to complete insurance forms and to determine insurance coverage and limitations for the patient.

This certification program will teach you the practical real-world skills essential for success in the healthcare field. This completely inclusive course consists of Medical Terminology, Medical Front Office Skills, Electronic Medical Records for the Medical Office and Medical Billing. In addition, upon completion of all courses, you will sit for your CMAA (Certified Medical Administrative Assistant) Examination through the National Healthcareer Association.

MYCAA, Aspire, Department of Labor, DHHS, vouchers are accepted for payments.

CERTIFIED MEDICAL OFFICE SPECIALIST WITH MEDICAL BILLING COURSE DESCRIPTION

● **CMAA WITH MEDICAL BILLING- (16 weeks)** This course will teach you everything you need to successfully pass the CMAA exam through the National Healthcareer Association and includes a Certificate for Medical Billing through AMP. Classes are held once a week for 3 hours. You will learn health information in the medical office, billing and coding procedures, financial and practice management and administrative duties. In addition, we take you through the “virtual medical office” to help you develop critical thinking and decision-making skills that you will need on the job. This program gives you the opportunity to practice “real” medical assisting skills before you start working in the real world. You will perform actual administrative duties like managing patient scheduling in a multi-doctor practice, complete actual medical office forms, practice taking phone messages, and transcribing doctor’s notes. You will learn HIPAA compliance and hands-on practical use of this program from both the administrative and clinical perspective. This course is designed for those already in medical office administration or those looking to enter the medical front office field as a Certified Medical Administrative Assistant, Transcriptionist or Medical Coder.

● **MEDICAL PROFESSIONAL (36 weeks) - This course includes Medical Office Specialist course (Certified Medical Administrative Assistant) as well as all of the Medical Billing & Coding with CPC, leaving you with 2 national certifications.** It also includes our program at a discounted rate. The program begins with Terminology/A&P and CMAA and then you begin the Coding program at week 17. The discounted program can be found on the enrollment form labeled Medical Professional and would include the books provided below as well as for the coding course: **BOOKS INCLUDED ARE:**

- Medical Terminology and Anatomy for ICD10 Coding
- Medical Office Administration
- Insurance Handbook for the Medical Office

ENTRANCE REQUIREMENTS

All applicants must be 18 years of age, have a high school diploma or GED equivalent before obtaining employment, but it is not required for starting these programs, but must be completed prior to sitting for any national certification.

ATTENDANCE POLICY

Due to the intensity of this course, the attendance policy set forth by the Academy of Medical Professions is strongly enforced. If you are taking live local classes, you will be required to watch all missed lectures online before graduating. There are **no financial penalties** for going longer, and this is encouraged. **OUR GOAL: NO STUDENT LEFT BEHIND.**

STANDARDS OF PROGRESS

Students whose academic average drops below 70% will be placed on academic probation. We will work with the student to develop an action plan for success, to include specific goals and target dates. If the student is unsuccessful in meeting the goals and target dates of the action plan for success, the student will be subject to academic dismissal. If a student misses more than 3 live classes and does not watch the recorded lectures, or if an online student fails to provide weekly contact with the instructor via email for more than 3 weeks, the student will be subject to academic dismissal with no refund.

ONLINE RECORDED CLASSES

Students wishing to take the online courses by watching the recorded classes may start at **any time**. Local class schedule is listed below.

Live Zoom Start Dates:

March 1, 2023, Wednesdays 5:30-8:00 PM

October 11, 2023, Wednesdays 5:30-8:00 PM

REFUND POLICY

1. You may terminate the Enrollment Agreement or training at any time. If you do so, you must inform the school, **not the instructor**, in writing. Termination will become effective upon receipt of the written notice. Refund will be based on notification week corresponding with your course assignments/week associated with **start date** of the program.
2. If you terminate before you commence training, you will receive a refund of the money paid to the school, minus \$450 for the course books and reference books, unless they are returned unused, unopened. **The \$300.00 application fee is nonrefundable.** If no unused books are returned, the total subtracted from the refund will be \$750.00.
3. If you terminate within the first 3 weeks, you will receive a prorated refund equal to the unused portion of monies received from your last day of attendance, or week corresponding with your course assignment, less the application fee of \$300.00, the book fee of \$450.00 for course books. **If you terminate any time after week 3, there will be no refund. If you are paying a payment plan, the balance will be effective as of drop date, 30 days to pay in full or sent to collections.**



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CMAA COURSE ENROLLMENT AGREEMENT

(PLEASE PRINT AND MAIL OR EMAIL OR FAX REGISTRATION FORM TO ABOVE ADDRESS)
SS#

NAME: _____ DATE OF BIRTH: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____ Gender Assigned at Birth
 (choose from dropdown)
 PHONE NUMBER: _____ (H) _____ (C)
 E-MAIL: _____

I have earned a High School Diploma or Equivalent (GED, HiSET, etc.) (Initial here) _____

LIVE (Zoom, see start dates on calendar) START DATE: _____

ONLINE (watching prerecorded classes) START DATE: _____

SINGLE PAYMENT METHOD

****Please make checks payable to the Academy of Medical Professions****

- \$500 Deposit is required for Payment Plan Options
- \$300.00 Non-refundable enrollment fee is already included in the price
- Voucher Payments: (I.E. Goodwill, Dept Of Labor, VA, Mycaa, Etc.)

ONE TIME FULL PAYMENT

Self-Pay

Voucher

\$3,200 Medical Office Specialist (CMAA & Billing Certificate)

\$6,300 Medical Professional (CMAA, CPC-A, Billing Certificate)

Voucher Payments:

Name Of Organization Paying: _____

Point of Contact: _____

Where Did You Hear About Our Courses? _____

If From An Adult Education Or College Brochure Please List Which One:

CONTRACT AGREEMENT

I, _____ hereby agree to the above-mentioned terms of the program. I have read and understand the REFUND POLICY and STANDARDS OF PROGRESS for this course and agree to its terms.

SIGNATURE: _____ DATE: _____

PAYMENTS MADE BY CREDIT CARDS

CREDIT CARD # _____

EXPIRATION DATE: _____ SECURITY CODE: _____

NAME AS IT APPEARS ON CARD: _____

BILLING ADDRESS IF DIFFERENT FROM REGISTRATION FORM:

FULL PAYMENT \$ _____ Date you wish to have payment taken: _____

PAYMENT PLAN DOWN PAYMENT Amount \$500.00 Date to take out deposit from credit card: _____

PAYMENT PLANS

All payment plans do require a \$500 down payment which is deducted from the cost of tuition

Payment Plan

Choose One program

_____ \$3,425 (CMAA) \$500 Down Payment/ \$325/month for 9 months.

_____ \$6,500 (Office Professional) Contact school for payment options

_____ (initial) I agree to the payment plan chosen above

_____ (initial) I agree that if I have a payment plan, that I will keep it in good standing, and that if my account is sent to collections, I am responsible for the legal fees, late fees, and payment plan I have agreed to