



## Health Information Management Certificate

Program Code: **HIM2** Program Director: [Kathleen Kirk](#)

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Semester	Course#	Course Title	Credits
<b>1. Required</b>	<i>Students complete prerequisite requirements.</i>		
<b>2. Core</b>			
	<a href="#">BINF3000</a>	Intro to Health Care	1
	<a href="#">BINF3010</a>	Medical Terminology	3
	<a href="#">BINF3110</a>	Legal Aspects of Health Information	3
	<a href="#">BINF3126</a>	Health Data Management I	3
	<a href="#">BINF3127</a>	Health Data Management II	3
	<a href="#">BINF3301</a>	Classification & Reimbursement Systems	3
	<a href="#">BINF3311</a>	Introduction to Coding	3
	<a href="#">BINF4000</a>	Essentials of Informatics in Health Care	3
	<a href="#">BINF4200</a>	Financial Concepts for HIM	3
	<a href="#">BINF4220</a>	Research Concepts for HIM	3
	<a href="#">BINF4305</a>	H I Services Administration	3
	<a href="#">BINF4310</a>	Performance Improvement	3
	<a href="#">BINF4311</a>	Electronic Health Records	3
	<a href="#">BINF4619</a>	Management Affiliation (Capstone)	3
	<a href="#">BINF5145</a>	Disease Processes and Systems	3
	<a href="#">BINF5520</a>	Healthcare Analytics	3
	<a href="#">IDST4300</a>	Human Resources Management in Health Care	3
		<b>Curriculum Total :</b>	<b>49</b>

Consult School and program policy regarding specific requirements.

Student Name (printed): \_\_\_\_\_

Signature: \_\_\_\_\_  
*I agree to complete these courses for graduation.*

Please return signed copy to: **Office of Enrollment Services, 65 Bergen street, Room #149, Newark, NJ 07107-3001**

**Office use only : Term:** \_\_\_\_\_

**Student Disclaimer:**

*The database of course description is updated continuously throughout the year. It may be different than your "requirements for the graduation"(RG) form you signed at the time of admissions for which you are held accountable. Please use this site as a reference source and your RG as your official contract.*