



Application for Prior CEU Approval—Business Page

Mark all that apply and those that are indicated by "*" are required fields:

- New Vendor
- Existing Vendor
- Renewal Application

*Select the type of application you are applying under:

- Regular—Application with payment. See application fee schedule below.
- In-service—Fee free application for employee-employee training. Monies not to be exchanged on any level of participation.
- Instructor—Fee free application for face-to-face teaching for the "instructor only" at a post secondary school CEUs awarded are for the instructor only.
- Marketing Contract
- PMCC—Current license **owned** by the sponsoring organization

1. *First event date: _____ *Number of CEUs requested: _____

Company Tax ID# _____ For Profit Non Profit

*Sponsoring organization: _____

*Website: _____ *Email: _____

*Address: _____

*City: _____ State: _____ Zip code: _____

*Work phone: _____ Fax: _____

2. Contact person at your organization for this program/product:

*Name and title: _____

*Work phone: _____ Fax: _____ *Email: _____

NOTE: Person's name listed as the contact will appear on AAPC's web page and could be contacted by AAPC representatives.

3. *An approved title cannot be changed: Title of program/product as it will appear in all marketing materials: _____

4. *Presenter/Instructor name and title including credentials: _____

Presenters without a credential, (eg, CPC®, CPG-H®, CPG-P®, RN, MD, CCS-P, JD) or professional license relevant to the subject matter must provide a resume for consideration of CEUs. Credentials with an apprentice status will not be approved as a presenter/instructor.

Vendor Registration Fee (VRF)

If you are submitting a regular application and your company is a For Profit company, a Vendor Registration Fee (VRF) of \$360 is due with the first paid application of the new year, The VRF covers the calendar year, January–December. This includes the first application fee of \$150 for up to 8 CEUs. Each subsequent application will have an application fee dependant on the number of approved CEUs. Please refer to the fee schedule below.

Application Fee for all Regular applications, "For Profit" and "Non Profit" (Per individual application)

\$150 1–8 CEUs	\$50 *Reevaluation fee when a request, with additional information is made within 30 days of a denial or approval
\$300 9–16 CEUs	\$50 **Nonrefundable fee for applications that are denied by AAPC or withdrawn by the vendor
\$450 17–24 CEUs	\$50 ***Late fee for applications received less than 21-30 days prior to marketing deadlines or first event date
\$600 25–32 CEUs	\$50 ****Fast Track fee for a requested rush approval
\$750 33–40 CEUs	

****All Applicants please note the asterisks above: late fees, fast track fees, reevaluation fees, and the nonrefundable fee may apply to all types of application submissions.

- Company check or money order enclosed payable to AAPC (no cash)
- MasterCard Discover American Express Visa

Credit card number: _____ Expiration date: ___/___/____ (mm/yyyy) Amount: \$ _____

Authorized signature: (Check the blue box below or sign) _____

Print card holder's name **exactly** as it appears on the card: _____

Print **exact** credit card billing address: _____

I certify these statements are true, realizing any false statements may cause denial/revocation of CEU credit or probation of vendor status. I certify that I will provide CPC® credentialed holders with quality programs in which they can receive CEUs. I will provide qualified personnel to facilitate and present each event. I certify that content and instructional methods are appropriate in meeting the timely need of the sponsoring organization.

Signature and title: _____ Date: _____

(Check the blue box above or sign)

Instructions for submitting your completed application is on the last page of the application form.



Live or Recorded Live — Application and Guidelines for Prior CEU Approval

Education is the fundamental element of CEUs

[click here to link to the current year's guidelines](#)

Section 1: Mark all that apply in each section. Then complete the rest of the form.

- *1. Seminar Workshop Conference Course Bootcamp (exam portions are not included)
 In-service Handouts PowerPoint
- *Upon completion, is there an exam to earn a credential? Yes No Credential acronym: _____
 Recording of the live event selected above. On Demand CD/DVD
2. Webinar, a Live Web-based training with Live instructor/facilitator Streaming audio/voice over In-service
Web address _____ Username: _____ Password: _____
Handouts/PDF: Yes No
Teleconferencing: Yes No If yes, dial in number: _____ Access code: _____
Is the presenter available for real-time Q&A during the training? Yes No
 Recording of the Live Web-based training for Self Study Web-based training
3. Live Audio/Teleconference Dial in number: _____ Access code: _____
Handouts/PDF: Yes No
4. A post-test without rationale is required with the recording and must be submitted with the application. (10 questions per CEU)
Has information-rich-rationale been included for supplemental CEUs? Yes No
How is the test accessed? Online Hardcopy/PDF
Where is test information conveyed? _____
5. Post Secondary School Course (live course, face-to-face with students.)
A copy of the course syllabus must be submitted with the application. The course syllabus must verify that this is a live face-to-face training, specify the name of the instructor, and show the beginning and end dates of the course. Up to 16 CEUs will be awarded per instructor, per core credential, per two year renewal period, for teaching a face to face course specific to the credential. The approval is for the requesting instructor only and will not appear on the pre-approved vendor list.
Title(s) of workbook/textbooks (1.) _____ (2.) _____
Does my training include ICD-10 curriculum? Yes No
I will be teaching CPC Certified Students Non Certified Students
Upon completion, is there an exam to earn a credential? Yes No Credential acronym: _____

Section 2: All applicants please complete

1. Are you requesting live or recorded events requesting 2 or more CEUs? Yes No
These requests require submission of handouts and Power Point presentations at the time of application submission. Please include a time-line with detailed agenda statements or bulleted objectives for each segment of time. Session titles are not sufficient. A marketing brochure or flyer may suffice.
NOTE: If you are requesting 1.5 CEUs or less a time-lined agenda is not required. The detailed program goal statement in number 1 above is sufficient.
2. Are you submitting as an instructor at a post secondary school? Yes No
Please submit a detailed course syllabus in lieu of a time lined agenda.
3. Applying for regularly scheduled recurring in-service? AAPC will give a "block" of approved index numbers with a single application. Do you wish AAPC to provide you with a block approval? Yes No (for Block approval information please refer to the guidelines covering this topic at the following link.) Please specify the dates of the trainings you would like CEU credit for. Please provide a list of all possible presenters and their credentials.
 Class Workshop Course Web based training
 Weekly Twice monthly Monthly Every other month Quarterly



4. *Please provide a 50 word minimum goal for this educational product.

Section 3: For those submitting a Regular application with payment, PMCC, or Marketing Contract application, please complete the remaining portion of the application.

AAPC will soon provide a simple-to-use search screen for members seeking specific CEUs. This will benefit members and vendors. Members will be able to search for events based on their specialty, geographic location, level of expertise, and media type. Approvals for In-service trainings and Instructor's at post secondary schools will not be advertised on the member search screen.

AAPC can approve your program for specialty CEUs at no extra charge. To do so, we need to know what area of study is emphasized in this curriculum. Select your main specialty.

The CEU Analyst will make a final decision based on the content of your agenda.

Established Credentialed Specialties

- | | |
|---|--|
| <input type="checkbox"/> Ambulatory Surgery Center — CASC™ | <input type="checkbox"/> General Surgery — CGSC™ |
| <input type="checkbox"/> Anesthesia/Pain Management — CANPC™ | <input type="checkbox"/> Hematology and Oncology — CHOC™ |
| <input type="checkbox"/> Cardiology — CCC™ | <input type="checkbox"/> Internal Medicine — CIMC™ |
| <input type="checkbox"/> Cardiovascular/Thoracic Surgery — CCVTC™ | <input type="checkbox"/> Obstetrics/Gynecology — COBGC™ |
| <input type="checkbox"/> Certified Interventional Radiology/Cardiovascular CIRCC® | <input type="checkbox"/> Orthopaedic — COSC™ |
| <input type="checkbox"/> Certified Professional Medical Auditor — CPMA™ | <input type="checkbox"/> Otolaryngology — CENTC™ |
| <input type="checkbox"/> Chiropractic — CCPC™ | <input type="checkbox"/> Outpatient Hospital Based Coding — CPC-H® |
| <input type="checkbox"/> Compliance/Fraud & Abuse — CPCO™ | <input type="checkbox"/> Payer— CPC-P® |
| <input type="checkbox"/> Dermatology — CPCD™ | <input type="checkbox"/> Pediatrics — CPEDC™ |
| <input type="checkbox"/> Emergency Department — CEDC™ | <input type="checkbox"/> Physician Based Coding — CPC® |
| <input type="checkbox"/> Evaluation and Management — CEMC™ | <input type="checkbox"/> Plastic/Reconstructive Surgery — CPRC™ |
| <input type="checkbox"/> Family Practice — CFPC™ | <input type="checkbox"/> Rheumatology — CRHC™ |
| <input type="checkbox"/> Gastroenterology — CGIC™ | <input type="checkbox"/> Urology — CUC™ |

Currently Non-Credentialed Specialties *

- | | |
|------------------------------|---------------------------------|
| Interventional Radiology | Oromaxillofacial Surgery |
| Medical Record Documentation | Pathology/Laboratory |
| Medical Record Reimbursement | Physical Therapy |
| Medicare/Medicaid/CMS | Podiatry |
| Neurology | Radiology |
| Behavioral Health | Spinal Surgery |
| Ophthalmology | Inpatient Hospital Based Coding |

*These specialties will not receive CEU's specific to the specialty, however they will be awarded Core A CEU's.

Multi-geographic location: List the dates and zip codes of your scheduled live events. Start with the date and zip code of your first offering.

Date of first event: _____ Zip code of first event: _____

Additional zip codes and dates:

Date: _____ Zip code: _____ Date: _____ Zip code: _____

Date: _____ Zip code: _____ Date: _____ Zip code: _____

*What level of expertise/difficulty is your course? Select one:

- | | | |
|--|---|--|
| <input type="checkbox"/> Apprentice Coder (certified with no experience) | <input type="checkbox"/> Intermediate Coder | <input type="checkbox"/> All experience levels |
| <input type="checkbox"/> Beginner Coder | <input type="checkbox"/> Expert Coder | |

Optional information: What is the price of the product you offer? _____



Thank you for taking the time to complete this Application for Prior CEU Approval. AAPC Vendor Relations Team and CEU Analysts look forward to reviewing and approving your products. Please submit all 4 pages of your completed application and all required documents to AAPC in any of the below methods.

Click to Email: vendor@aapc.com

Attach your required documentation to the email for use during review of this pending application.

Mail to: AAPC, CEU Vendor Department
2480 South 3850 West, Suite B, Salt Lake City, UT 84120

Fax: 801-236-2258