CERTIFIED MEDICAL OFFICE MANAGER

CANDIDATE PREPARATION HANDBOOK

About the Exam
Exam Tips
Exam Study List
Sample Exam Questions
Sample Exam Answer Key

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ABOUT THE EXAM:

The Certified Medical Office Manager examination is designed to test a well-defined body of knowledge representative of professional practice in the discipline of medical practice office management and administration. Successful completion of this certification examination verifies that the candidate has met competency standards set forth by the PMI Certification Board for this specific area.

FORMAT: True/False; Multiple Choice; Scenario; Matching; Word Bank

NUMBER OF QUESTIONS: 100

APPROXIMATE WEIGHT:

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practice Management</td>
<td>21%</td>
</tr>
<tr>
<td>Personnel Management</td>
<td>21%</td>
</tr>
<tr>
<td>Financial</td>
<td>20%</td>
</tr>
<tr>
<td>Compliance</td>
<td>20%</td>
</tr>
<tr>
<td>Managed Care</td>
<td>18%</td>
</tr>
</tbody>
</table>

TIME ALLOWED: 240 Minutes (4 Hours)

AVERAGE TIME PER QUESTION: 2.4 minutes

COMPETENCY: Candidates must compile an aggregate score of 70% in order to meet the minimal certification standards set forth by the PMI Certification Board.

SCORE: Scores are determined by totaling the number of incorrect answers selected in each section. This total is then multiplied by a predetermined point value and then subtracted from 100 to determine the overall percentage value. Each answer blank is of equal value.

RESULTS: Results are usually determined within a four-week period. Candidates are asked not to inquire about results until this period has expired. PMI exam results are provided in writing only and will not be obtained over the phone.
Exam candidates are encouraged to access the PMI Website, www.pmiMD.com, for questions regarding PMI Certification. This includes inquiries regarding appeals, re-testing and re-certification.

WHAT TO BRING ON THE DATE OF THE EXAM:

1. Picture Identification
2. Three #2 Pencils
3. Calculator (optional but recommended)

NOTE: NO MATERIALS MAY BE REFERENCED DURING THIS EXAMINATION.

EXAM TIPS:

1. Allot adequate time for nourishment, rest, and relaxation on the day before and day of the exam.
2. Arrive at the exam location at least 30 minutes prior to the start time.
3. Have all materials listed above available and ready for use upon arrival to exam (i.e., sharpened pencils, hand-held calculator).
4. No cellphones or other electronic devices such as: iPads, iPods, laptops, etc. are allowed during the exam.
5. Listen carefully to all exam instructions. Do not start the exam until instructed to do so.
6. Do not communicate with anyone during the exam.
7. Be sure to complete the contact information sections in the exam booklet. PMI will be unable to notify you if the information is incomplete or illegible.
8. Read each question / answer carefully. Pay close attention to detail. Notice the relationship of the question to the answer options. A statement may be correct, but not relevant to the question asked.
9. Evaluate all answers before you respond to the question. Eliminate obvious incorrect answers. Know there is only one correct answer per question.
10. Upon completion, review the exam to ensure all questions were answered.
11. Before turning in the exam, ensure that all personal contact information has been completed correctly.
12. Good Luck!
STUDY LIST:

MODULE 1
1. Define the “Fair Labor Standards Act”
2. Understand exempt vs. non-exempt classifications
3. Define “Sexual Harassment” and Applicable Laws
4. Define the “Americans with Disabilities Act” and “Reasonable Accommodation”
5. Define the “Family Medical Leave Act”
6. Define the “Equal Pay Act of 1963”
7. Define the “Pregnancy Discrimination Act”
8. Distinguish among types of patient consent
9. Understand NCQA’s Standards for Medical Record Review
10. Understand the principles of “Medical Record Documentation”
11. Understand Immigration Reform
12. Understand Wage and Overtime Laws
13. Define Section 1557 of the “Patient Protection & Affordable Care Act”
14. Define “Dual Capacity Doctrine”
15. Understand Department of Labor – Wage Records

MODULE 2
1. Define “Abraham Maslow’s Hierarchy of Needs” and Relation to Practice Administration and Personnel Management
2. Define Progressive Discipline and Various Discipline Methods
3. Understand Coping Strategies & Responding to Difficult Employees
4. Define the Hiring Process Including Tools and Materials Essential for Effective Hiring and Personnel Management (e.g., Job Descriptions, Evaluations)
5. Understand the concept of different types of listeners
6. Understand Factors for Determining Salary
7. Define Form I-9
8. Define At-Will Termination
9. Understand Organizational Charts
10. Understand the differences between Managing and Leading
11. Understand Department of Labor Laws: Compensation Time and Back Pay
MODULE 3
1. Financial Calculations
   i. Gross / Net Charges
   ii. Cost Per Patient
   iii. Collection Ratios / Percentages
   iv. Expense to Earnings Ration / Percentage
   v. Total Expenses (e.g., Fixed, Variable, Direct, Indirect)
   vi. Gross Monthly Collection Ratio
   vii. Current Average in AR
2. Understand Financial Terms
3. Define Budget and Budget Process / Requirements
4. Define Projected Revenue
5. Understand the questions for financial calculations
6. Define Formal Budget
7. Define Break-even Point
8. Understand Asking for Payment at Time of Service & Common Responses
9. Understand Forecasting Revenue
10. Understand Fee Schedule Analyzing

MODULE 4
1. Define “HITECH”
2. Define Key Components of the “OIG Compliance Program Guidance”
3. Define “Self-Disclosure”
4. Define “Administrative Simplification”
5. Understand the Key Components of “Privacy Rule”
6. Define “Protected Health Information” and “Individual Identifiable Health Information”
7. Define “Covered Entity”
8. Define “Business Associate”
9. Understand the HIPAA Security Standard and its safeguards
10. Understand the Key Components of “OSHA”
11. Understand Key Requirements of “HIPAA” Compliance
12. Understand the “American Recovery and Reimbursement Act of 2009” (ARRA)
13. Define “Fraud” and “Abuse”
14. Understand the “Stark Rule”
15. Define “Statutory Obligations”
16. Understand Medicare Contracting
17. Define MACRA, MIPS and APMs

MODULE 5
1. Define and Contrast Managed Care Models (e.g., HMO, PPO, Silent PPO, PHO, POS, Exclusive Managed Indemnity)
2. Understand Processes and Considerations in Evaluation of Managed Care Organizations
3. Define Credentialing and Privileging
4. Define Managed Care Contract Clauses
5. Understand Fee-for-Service
6. Understand Fee Schedule Negotiations
7. Understand Utilization Review / Quality Management
8. Define programs instituted under healthcare reforms
9. Define MCOs
10. Understand Accountable Care Organizations
11. Define SOAP
12. Define Patient Centered Medical Home (PCMH)
13. Understand the concept of the Evergreen Clause
14. Understand Point of Service Plans
15. Understand the CMS Documentation Guidelines and NCQA
16. Define Hold Harmless Clause
17. Define FQHC
18. Define Managed Care Accrediting Organizations