

CANDIDATE PREPARATION HANDBOOK

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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; Word Bank

NUMBER OF

QUESTIONS: 108

APPROXIMATE

WEIGHT: Practice Management 17.6%

Personnel Management 20.4% Financial 27.8% Compliance 17.6% Managed Care 16.6%

TIME ALLOWED: 240 Minutes (4 Hours)

AVERAGE TIME

PER QUESTION: 2.22 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.

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BYLAWS: 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 other candidates 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!

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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 "Pregnancy Discrimination Act"
- 7. Define "Age 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
- Understand Coping Strategies & Tips for Difficult Employees
- 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
- Understand Factors for Determining Salary
- 7. Define "Form I-9"
- 8. Define "At-Will" Termination
- Understand Organizational Charts
- 10. Understand the differences between Managing and Leading
- 11. Understand Department of Labor Laws: Compensation Time and Back Pay

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MODULE 3

- 1. Financial Calculations
 - i. Gross / Net Revenue
 - 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 "Degree of Flexibility"
- Understand "Asking for Payment" at Time of Service and "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 Key Components of "OSHA"
- 10. Understand Key Requirements of "HIPAA" Compliance
- 11. Understand the "American Recovery and Reimbursement Act of 2009" (ARRA)
- 12. Understand concept of Value-Based Modifiers
- 13. Define "Fraud" and "Abuse"
- 14. Understand the "Stark Rule"

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- 15. Define "Statutory Obligations"
- 16. Understand Medicare Contracting
- 17. Define "MACRA"

MODULE 5

- 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 Managed Care Contract Clauses
- 4. Understand Fee-for-Service
- 5. Understand Fee Schedule Negotiations
- 6. Understand Utilization / Quality Management in Managed Care Setting
- 7. Understand programs instituted under healthcare reforms
- 8. Define "MCOs"
- 9. Define "Accountable care Organizations"
- 10. Define "SOAP" notes
- 11. Define Patient Centered Medical Home (PCMH)
- 12. Understand the concept of the "Evergreen Clause"
- 13. Understand "Point of Service Plans"
- 14. Understand the "CMS Documentation Guidelines" and "NCQA"
- 15. Define "Hold Harmless Clause"
- 16. Define "IPA"
- 17. Define "Managed Care Accrediting Organizations"