

# Certification Council for Medical Audit Specialists



## Candidate Handbook

### Candidate Handbook

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Revised June 2007



# Certification Council for Medical Audit Specialist

P. O. Box 449  
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(517) 467-4675

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## Introduction

### **American Association of Medical Audit Specialists (AAMAS)**

The American Association of Medical Audit Specialists is the sole credentialing authority for Certified Medical Audit Specialists (CMAS). AAMAS is comprised of professionals from various medical care reimbursement backgrounds. The professional member disciplines represented within AAMAS include but are not limited to hospital bill auditors, compliance auditors, medical fraud and abuse auditors, independent review consultants, pre-certification, utilization review, case management, risk management, medical records review, quality assurance, and representation through various health plans. (Indemnity, HMO, PPO, POS, TPA, etc.). As such AAMAS is the parent organization of The Certification Council for Medical Audit Specialists.

### **Mission Statement**

AAMAS is an organization dedicated to the advancement of professional standards and ethical practices of the medical audit specialists. AAMAS is committed to providing leadership in education, certification and communication. AAMAS will provide membership awareness of legislative issues within the healthcare reimbursement environment.

### **Vision Statement**

AAMAS aspires to be the nationally recognized leader in the practice of medical audit and its impact on health care reimbursement.

### **Certification Council for Medical Audit Specialists**

The Certification Council for Medical Audit Specialists is responsible for all aspects of the certification process. The Council is dedicated to maintaining the standards set forth by AAMAS and National Organization for Competency Assurance (NOCA). The Certification Council officers, members and consultants maintain and update the testing context as laws and regulations change; screen candidates; conduct surveys for appropriateness of testing material; and maintain the registry of exam participants.

### **Nondiscrimination Policy**

The American Association of Medical Audit Specialists and the Certification Council for Medical Audit Specialists do not discriminate among candidates on the basis of age, gender, race, color, religion, national origin, disability, marital status, or sexual preference.

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## **Earning CMAS Credentials**

As you are preparing for your examination, it is important to understand the reasoning behind professional certification. Through professional certification, legitimacy is bestowed upon a body of work and a separate and unique entity becomes established. In addition, a profession is able to establish a code of conduct, standards, and expectations for behavior. Through our professional association, we are proud to promote excellence and visibility by providing you the ability to earn the designation of Certified Medical Audit Specialist (CMAS). Its designation demonstrates an acquired body of knowledge and expertise in the field of medical audit.

We believe that certification of medical auditors as specialists will provide a standard set of expectations for employers and provide a mechanism for the establishment of formal medical audit programs. Although medical auditors are found in multiple health care settings such as hospitals, physician practices, insurance companies, private and commercial audit companies, consulting firms, government contracted agencies, and the US government itself, they all share common skills.

Building upon the basic skill and history of hospital bill audit, the profession of medical audit has expanded to meet the growing role of the medical auditors. Medical auditors have become an invaluable member of the institutional finance team. Recognizing its role expansion and growing expectations, this examination touches upon multiple areas of health care reimbursement and finance issues, as well as the unique aspect of clinical medicine. Medical auditors are challenged by governmental compliance issues, managed care complexities, and contractual reimbursement arrangements, as well as by bridging the chasm between the health care financial world and the clinical operational setting.

By utilizing a fact based well-defined approach, the conduct of medical audit communication between entities will be enhanced. The ability of the auditors to move between different audit settings will be promoted through the use of standards, rules, guidelines, and expectations rather than opinion and self proclaimed policy.

An individual awarded the CMAS credential agrees to conduct himself/herself in an ethical and professional manner. This includes demonstrating a behavior that is indicative of professional integrity. By accepting the certification requirements, the candidate agrees to uphold the values and ethics of the AAMAS as an organization, and to follow the AAMAS standards and bylaws, including the guidelines outlined in the National Health Care Billing Audit Guidelines approved by the AAMAS general membership.

Carrying the credential of Certified Medical Audit Specialist (CMAS) grants the medical auditor the use of the CMAS credential in all professional communications such as on letterheads, stationary, business cards, official letters, directory listings and other areas where his/her professional signature is required.

## **Candidate Handbook**

This Candidate Handbook was developed to assist in preparing for the CMAS certification examination. It is the intention of this handbook to be just that – a candidate handbook. By virtue of your admittance to the CMAS certification examination, you are already expected to possess minimum knowledge to pass and to research areas of skill in which you feel you need to concentrate.

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## CMAS Certification

### Eligibility Requirements

To be eligible to take the CMAS certification examination, an applicant must be a current member of AAMAS, plus have two (2) years of authenticated health care audit experience (at least 20 hrs/week minimum but no less than 2 years); and two (2) years of health care related experience. Educational requirements are set for a minimum of 60 college semester units (associate degree equivalent). Diploma in nursing will meet the educational requirements.

Also required is one Council approved course in accounting, statistics **or** economics.

The AAMAS membership requirement is based on dues paid by January 31st of the year of the examination. The CMAS certification examination is given at the AAMAS national conference. Arrangements may be made for the examination to be administered at additional sites during the months of September through November. Details for on site testing are available from members of the Certification Council.

**The AAMAS membership requirement is based on dues paid by January 31<sup>st</sup> of the year of the examination.** Loss of privilege to take the exam will be enforced. Membership applications can be downloaded from the AAMAS website <http://www.aamas.org> under the certification section, or submit the application form located at the end of this handbook.

### Documentation of Eligibility

The certification examination application form must be postmarked by February 28th of the current year to be accepted. **No exceptions will be made.** To be considered a fully qualified candidate, the application packet must contain the official CMAS application form, an up-to-date resume, proof of having taken an approved accounting, statistics or economics course or enrolled in the course offered by AAMAS and the examination fee. If taking the course offered by AAMAS before the seminar you must successfully pass the course exit exam.

### Confirmation of Eligibility

A confirmation of eligibility will be sent to an applicant after qualifications and background review have been completed.

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## Application Process

### Application Form

The CMAS certification application form can be found at the AAMAS website <http://www.aamas.org> under the certification application section. A copy of the application form is located at the end of the candidate handbook.

### Examination Fee

Application Fee: \$250.00.  
Fee is payable to: AAMAS  
AAMAS Tax ID 650573775

Mailing address  
AAMAS Certification Council  
P.O. Box 449  
Onsted, MI 49265-0449

Credit card payments are accepted. Space for credit card information is located at the bottom of the CMAS certification application form.

## Examination Procedures

### Reporting for the Examination

Candidates are required to report ON TIME for the scheduled examination. Late arrivals after doors have been closed will not be allowed in the examination room. The AAMAS certification examination will be administered in a 4-hour continuous block. Examination candidates will not be allowed to leave a proctor's presence during the testing period. If a candidate has special needs and feels that he/she cannot participate in this type of format please contact the Certification Council through the web site.

### Identification Verification

Candidates arriving at the examination *must present* to the proctor:

- The original Confirmation of Eligibility letter;
- Two (2) separate forms of valid ID, one of which MUST be a photo and signature-bearing identification card (e.g., valid driver's license) with name that appears on their confirmation letter.

Candidates who appear without identification will NOT be permitted to take the examination and will be required to reapply. These candidates will receive a refund of their application fee *minus* a \$25.00 administration fee.

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### **Security**

The Certification Council ensures that the certification examination follows strict security standards designed to assure all candidates are provided the same opportunity to demonstrate their knowledge, skill, and abilities in the medical audit community. Council members will strictly monitor the testing environment.

### **Use of Calculators**

A quiet non-programmable, solar powered or battery operated calculator without printing capabilities may be used during the examination. Proctors will inspect ALL calculators. Calculators not conforming to this requirement will not be permitted.

### **Writing Instruments**

Candidates are required to bring a black non-smearing ink pen for use on the answer sheet.

### **Other Examination Rules**

- No electronic devices are allowed in the examination room. This includes cell phones, beepers and other signaling devices that could create a distraction to examination candidates.
- No eating, drinking or smoking is permitted in the examination room. Water will be provided.
- Reference books, notes or other study materials may not be brought into the examination room.
- One scratch paper will be provided. Proctors will ensure this is returned at the end of the exam.
- Proctors will be available to answer questions candidates may have during the examination. Please raise your hand to obtain this assistance.

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### **Post Examination Procedures**

#### **Scoring**

To achieve certification, candidates must obtain a passing score of 70 % (percent).

#### **Pass and Fail Notification**

The notification and certificates will be sent out within eight (8) weeks. Candidates who do not pass are eligible to repeat the examination at the next test session.

#### **Appeals**

Candidates, who feel their examination score was in error, may appeal their score. The appeal must be in writing detailing the error. The appeal must be submitted to the Certification Council within 30 calendar days of receiving their score.

#### **Denials**

If the applicant is deemed ineligible for certification, or if the documentation submitted does not meet the requirements listed, the candidate will be notified in writing listing the specific reason(s) for the denial. Candidates may appeal in writing to the Certification Council within 30 calendar days of receiving their letter. Denials may be based on:

- Failure to fulfill membership requirements
- Failure to fulfill experience and education requirements
- Obtaining or attempting to obtain certification or recertification by fraud or deception

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## Examination Outline

The CMAS certification examination is comprised of 200 multiple choice questions divided into four (4) parts with 50 questions in each part.

### **Part I: Professional Standards and Audit Behavior**

- Professional standards and conduct
- Ethics in the business environment
- Individual auditor standards in independence and objectivity
- Independence of the audit department or agency
- Problem Resolution
- International audit standards

### **Part II: Medical Audit Process and Methodology**

- The medical audit process and its methodology
- The scope of medical audit
- Internal audit (defense) - controls, perspectives, and risks
- External payer audits - controls, perspectives, and risks
- Analytic review and integration
- Risk management in the medical audit practice
- Compliance with standards, regulations, and laws

### **Part III: Audit Skill**

- Proficiency in the medical audit process
- Communication skills
- Audit planning, preparation, and its findings
- Audit reports
- Conflict resolution
- Financial analysis and basic accounting applications
- Statistics and mathematics

### **Part IV: Medical Audit Environment**

- Hospital audit finance principles
- External reimbursement principles
- Economic theory
- Health care fraud
- Contract interpretation and managed care
- Regulatory compliance auditing
- Legal environment issues and trends
- Medical records documentation and public record access
- Consents
- General business practice and trade as applicable to medical audit

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## Sample Questions

1. National Hospital Billing Audit Guidelines require that:
  - A. Auditors must be certified.
  - B. Hospitals must charge audit fees in excess of \$75.
  - C. Auditors must conduct themselves in an acceptable professional manner, adhere to ethical standards, keep confidentiality requirements, and be objective
  - D. Audits must always be conducted on-site
  
2. Which statement constitutes the *vision* of AAMAS:
  - A. AAMAS is an organization dedicated to the advancement of the professional standard and ethical practices of the Certified Medical Audit Specialist.
  - B. AAMAS aspires to be the nationally recognized leader in all matters related to the practice of medical audit and its impact on the health delivery
  - C. The AAMAS promotes a unifying influence in the field of medical audit, and operates on a for profit basis
  - D. AAMAS believes that all persons and entities involved with health care have an ethical responsibility to contain cost without sacrificing access to quality affordable health care
  
3. Principal inpatient diagnosis is defined as:
  - A. The diagnoses that the utilization nurses write in their concurrent review sheet.
  - B. The diagnosis that has been optimized by the DRG grouper
  - C. The condition which utilized the most resources while inpatient.
  - D. The condition established after study to occasion the admission of the patient to the hospital
  
4. In accounting terminology, the term “credit” means:
  - A. A positive cash balance
  - B. A positive financial position
  - C. The left side of the ledger
  - D. The right side of the ledger
  
5. Statistics are important in medical audit primarily because:
  - A. They identify trends/problem areas in hospital operations, and help identify contract opportunities for both payers and providers
  - B. They always make the audit report appear credible
  - C. They demonstrate the use of a statistician in the final medical audit analysis.
  - D. The use of statistical process control in the performance of an audit provides an opportunity to increase the audit fee

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6. In a final medical audit report, the purpose of the executive summary is:
- A. To serve as a synopsis on the important points of the audit
  - B. To pinpoint areas of vulnerability and identify personnel responsible for such
  - C. To demonstrate how good an auditor you are
  - D. To attract the attention of top level and senior staff for an additional Compensation
7. The part of Medicare that covers hospice care, home health care, skilled nursing facilities, and inpatient hospital stays is known as:
- A. Medicare Part A
  - B. Medicare Part B
  - C. Medicaid
  - D. Medicare Part D
8. A regulation to guarantee patients new rights and protections against the misuse or disclosure of their health records is called:
- A. Emergency Medical Treatment and Active Labor Act
  - B. Advisory Council on Social Security
  - C. Health Insurance Portability & Accountability Act of 1996
  - D. Electronic Healthcare Network Accreditation Commission
9. G.A.A.S. is the acronym for:
- A. Generally accepted accounting standards
  - B. Generally accepted auditing standards
  - C. Generalized audit analysis statistics
  - D. Gifted audit analytic students
10. Revenue codes are codes that identify the specific type of service being billed by line item (e.g., room and board, IV therapy/supplies, ancillary service). Revenue codes are billed using which form:
- A. UB-04
  - B. Advanced Beneficiary Notice (ABN)
  - C. CMS-1500
  - D. Certificate of Medical Necessity (CMN)

### Answer Key

- 1. c      6.a
- 2. b      7.a
- 3. d      8.c
- 4. d      9.b
- 5. a      10.a

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### CMAS Certification Application Form *Submission Deadline: Postmarked by February 28th*

Name \_\_\_\_\_ Phone (H) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Zip \_\_\_\_\_ Email Address \_\_\_\_\_  
Employer \_\_\_\_\_  
Phone (W) \_\_\_\_\_ Job Title: \_\_\_\_\_  
# of years employed as a Medical Auditor: \_\_\_\_\_ Highest Education Level: \_\_\_\_\_  
School(s) Attended: \_\_\_\_\_ Degree(s) Awarded: \_\_\_\_\_  
Professional Licensure #: \_\_\_\_\_ Type: \_\_\_\_\_  
State of Issue: \_\_\_\_\_ Expiration: \_\_\_\_\_

AAMAS Membership History:  
\_\_\_\_\_

\*\*\* Indicate Supplemental Required College or CCMAS approved course taken & enclose proof of completion\*\*\*

Accounting \_\_\_\_\_ Statistics \_\_\_\_\_ Economics \_\_\_\_\_

\*\*Enclose a current resume and business card (if available)\*\*

**\*\*Name on Certificate will appear as Printed Name on Application\*\***

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Application Fee: \$250.00

Fee is payable to: AAMAS (AAMAS Tax ID: 650573775)

Mailing Address: AAMAS-Certification Council  
P.O. Box 449  
Onsted, MI 49265-0449

#### To Pay By Credit Card:

Name as it appears on Credit Card: \_\_\_\_\_

Type of Card: \_\_\_\_\_ Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Billing Address (if different from above) \_\_\_\_\_

Signature of Card Holder \_\_\_\_\_

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