

# Certification Council for Medical Audit Specialists



# Recertification Handbook

## Recertification Handbook

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Revised October 2009



# Certification Council for Medical Audit Specialists

P.O. Box 47609  
San Antonio, TX 78265-8609  
(210) 792-2251

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### Recertification

The Certification Council for Medical Audit Specialists, also known as the Certification Council, provides a recertification process for the purpose of demonstrating professional competence in the practice of medical audit and commitment to continued improvement in the skills and knowledge of Certified Medical Audit Specialists.

The CMAS recertification process covers three (3) basic principles:

- Evidence of cognitive expertise - This has already been fulfilled by successfully passing the certification examination.
- Evidence of professional standing – demonstrate active participation as a member in good standing of the AAMAS.
- Commitment to lifelong learning and involvement in periodic self assessment – this includes completion of CMAS approved educational activities and earning the required continuing education units within the recertification cycle period. The content of the education programs should meet the CMAS Core Curriculum Domains. Refer to the Domains as described in this handbook beginning on page 8.

The CMAS certification expires **three years** after successful completion of the certification examination or recertification.

### Requirements for Recertification

To recertify, Certified Medical Audit Specialists must:

1. Maintain continuous active membership in AAMAS, **and**
2. Complete **thirty-six (36) hours** of Continuing Education (CE) credits during the certification period.  
The specific number of total continuing education hours must include:
  - 2.1 Eighteen (18) hours or 50 percent of the required CE credits covering Core Curriculum Domain 02: Medical Audit Process and Methodology **and**
  - 2.2 Eighteen (18) hours or 50 percent of the required CE credits for all other domains. The application deadline is May 31<sup>st</sup> or September 30<sup>th</sup> of the renewal year, depending on the month in which you took the certification examination.

### Determination of Continuing Education Credit

The Certification Council applies the following continuing education credit formula.

- One (1) contact hour = One (1) CMAS Continuing Education (CE) credit or 0.1 CEU or 60 minutes
- One (1) contact hour = One (1) CMAS Continuing Education (CE) credit = One (1) CME credit for Physicians
- 1 CEU = 10 contact hours

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### Completion of CMAS Approved Continuing Educational Programs

Continuing *educational program objectives*<sup>1</sup> required for CMAS recertification must meet the CMAS Core Curriculum Domains. Refer to pages 8 through 10 of this handbook for the complete list of CMAS Core Curriculum Domains.

Continuing Education credits may be obtained through one or a combination of the following educational activities:

1. AAMAS sponsored national conference
2. AAMAS approved state conference
3. Attendance and completion of educational programs from any of the following government, professional and national trade organizations, provided that the *program objectives* meet the CMAS Core Curriculum Domain:
  - 3.1. AAPC – American Academy of Professional Coders
  - 3.2. ACHE – American College of Health Care Executives
  - 3.3. AHIA - Association of Healthcare Internal Auditors
  - 3.4. AHIMA – American Health Information Management Association
  - 3.5. AHLA - American Healthcare Lawyers Association
  - 3.6. ANCC - American Nurses Credentialing Commission
  - 3.7. CMS - Centers for Medicare and Medicaid sponsored educational activities to include e-learning activities administered by the Medicare Learning Network, conferences and workshops administered by CMS contractors, i.e., Quality Improvement Organization, Carrier, Fiscal Intermediaries, Medicare Administrative Contractors and other CMS business partners
  - 3.8. HCCA - Healthcare Compliance Association
  - 3.9. HFMA – Healthcare Financial Management Association
  - 3.10. HIMSS - Healthcare Information and Management Systems Society
  - 3.11. NAHQ - National Association for Healthcare Quality
  - 3.12. NHCAA - National Health Care Anti-Fraud Association
4. Attendance and completion of educational programs offered by other educational institutions, organizations and agencies not listed above. Continuing *educational program objectives* offered must meet the CMAS Core Curriculum Domains.
  - 4.1. To ensure approval of courses *not* offered by organizations outlined above, you may request a *pre-approval* of the course by sending a description of the educational program objectives and content outline to the Certification Council Chairperson.
5. Completion of an e-learning educational or home study course with documented educational program objectives that meet the CMAS Core Curriculum Domains
  - 5.1. To ensure approval of courses obtained through e-learning or home study, you may request a *pre-approval* of the course by sending a description of the educational program objectives and content outline to the Certification Council Chairperson.

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<sup>1</sup> Educational program objectives, also referred to as “Learning Objectives,” describe what the learner should achieve, accomplish or complete at the end of a learning or educational activity.

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6. This category is offered to CMAS who share their expertise by providing educational instruction at national AAMAS conferences through educational workshops, presentations and other speaking engagements. Four (4) continuing education hours are awarded for each one (1) hour of presentation. Repeat presentations of the same subject matter cannot be counted as additional CE hours for this purpose.
7. Educational presentations, abstracts, course materials developed and presented by CMAS who are willing to share their expertise in medical audit at other educational sessions, conferences and workshops can be applied for recertification. Educational program objectives must meet the CMAS Core Curriculum Domains.
  - 7.1. Educational presentations/instructions and lectures given as part of your job or work responsibilities are not accepted for recertification.
8. Acceptable college courses which demonstrate meeting the CMAS Core Curriculum Domain. Examples: Accounting/Finance, Statistics, Project Management (meets Core Curriculum Domain 03: Audit Skill Section B)
  - 8.1. Each academic semester credit hour is equivalent to fifteen (15) CE credits taken within the recertification renewal cycle
  - 8.2. A maximum of eighteen (18) hours can be applied for CMAS recertification
  - 8.3. General education or clinical content are NOT accepted for this purpose

### **Additional Opportunities to Earn CMAS CE Credits**

1. Participation as a seated member on the AAMAS board or committee meetings when topics covered are related to the improvement of the national organization and provide a benefit to the entire membership. A one-hour meeting is equivalent to one (1) continuing education credit up to a maximum of five (5) hours per day.
2. Contribute CMAS questions or items for the CMAS examination. Each item accepted earns 1.0 continuing education credit. A maximum of five (5) CE credits per recertification cycle may be earned this way. To participate as an item writer, contact Marilyn Balcita, RN CMAS at Mbalcitacmas@aol.com.

### **Recertification Procedure**

The Certification Council will send recertification reminders to all CMAS recertification candidates before the recertification due date. Included in this reminder is the **permanent CMAS number** needed to track all members certified through the CMAS Council. This number is required on all correspondence. Candidates must complete the CMAS recertification application and CEU tracking forms and send them to the address below with the accompanying fee of \$100.00. All applications must be postmarked by May 31st or September 30th, depending on the month in which the certification examination was taken. The CMAS recertification handbook, application, and CE tracking forms are available online through the AAMAS website.

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Recertification Fee: \$100.00  
Fee is payable to: AAMAS  
AAMAS Tax ID 650573775

### **Mailing information:**

Certification Council for Medical Audit Specialists  
P. O. Box 47609 San Antonio, TX 78265-8609  
(210)-590-2666

Credit card payments are accepted. Complete the credit card information at the bottom of the CMAS recertification application form.

Candidates with insufficient contact hours to recertify will receive a refund of their application fee *minus* a \$25.00 administrative fee.

### **Tracking your CMAS Continuing Education Activities**

This CMAS CE Tracking form (page 12) was developed to assist the CMAS and Certification Council in tracking the continuing educational activities during the recertification period. It **MUST** accompany the application form and the required **recertification fee**. **The CMAS must retain a copy of this form along with the original supporting documentation for each of the educational activities attended until the next recertification period. Submission of copies of CE activities attended is NOT required for inclusion with the application form and the appropriate fee. *It is the responsibility of the CMAS to complete and validate the accuracy of the information submitted for recertification.* Random samples of CE documents are audited annually. If you are selected for audit, you will receive a letter from the Certification Council explaining the processes and procedures to follow.**

### **Denials and Appeals**

If the applicant is deemed ineligible for continued 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:

1. Failure to fulfill membership requirements
2. Failure to fulfill continuing education requirements
3. Obtaining or attempting to obtain certification or recertification by fraud or deception

The Certification Council will mail a response to an applicant's appeal within 30 days of receipt of the original appeal.

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### **Requirements for Recertification**

A Recertification late fee of \$100 has been added for failing to meet the recertification deadline. The late charge will be assessed in addition to the recertification fee if the recertification application is one to thirty days late. All the requirements for recertification must be met in addition to payment.

A fee of \$250 in addition to the late charge fee and recertification fee will be assessed for a CMAS who allows their certification to lapse for up to twelve months. The fee will be assessed to allow recertification without retesting. All requirements for recertification must be met in addition to payment.

CMAS who have allowed their certification to lapse longer than twelve months and wish to recertify must meet all current requirements for certification, submit an application along with the applicable fee and retake the certification examination. Refer to the current Candidate Handbook for all requirements.

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### CMAS Core Curriculum Domain

#### **I. Core Domain 01: Professional Standards and Audit Behavior (8%)**

- Participate in goal setting, strategic planning, and mission/vision development activities
- Integrate code/standards of conduct policies in performance of medical audit activity
- Establish/monitor appropriate patient access and confidential policies
- Establish/participate in enforcing expectations and systems of accountability
- Apply principles of objectivity in performance of medical audit activity
- Develop/monitor effectiveness of internal control policies
- Apply principles of independence in performance of medical audit activity

#### **II. Core Domain 02: Medical Audit Process and Methodology (58%)**

##### ***A. Investigate and Verify Charges Against Medical Record Documentation***

- Inpatient Hospital
- Outpatient Hospital
- Physician
- Ambulatory Centers
- SNF/LTC/Rehab

##### ***B. Audit Process, Work Flow, and Audit Findings***

- Plan/discuss pre-audit process
- Line by line bill audit
- Validate eligibility/benefits
- Apply third party payment rules
- Review/audit accuracy of UB-04
- Assign/validate ICD-9-CM codes
- Assign/validate MS DRG codes
- Assign/validate E and M codes
- Apply official coding rules
- Assign/validate revenue codes
- Audit billing/claims systems for accuracy and timeliness
- Conduct focused and target audits
- Write audit report using standard format
- Develop pre-audit procedures and tools
- Use statistically generated audit samples
- Post audit conference and discussion
- Conduct exit interview
- Review/audit accuracy of CMS 1500
- Assign/validate CPT codes
- Assign/validate APC codes
- Apply Correct Coding Initiative rules
- Assign/validate Physician Fee Schedule
- Assign/validate HCPCS II

##### ***C. Other Relevant Medical Audit Responsibilities***

- Update/review/maintain charge description master (CDM)
- Provide clinical interpretation and guidance to fellow auditors and staff
- Recommend/approve/monitor use of external auditors or subcontractors
- Apply medical necessity rules in audit activity
- Apply utilization review criteria and protocols in medical audit activity
- Apply coding rules in medical audit activity
- Apply regulatory and legislative policies in medical audit activity
- Report identified and potential quality and risk management issues
- Participate/conduct interrater reliability (IRR) and validation exercises
- Develop/update data base for tracking and trending medical audit findings
- Prepare/submit cost benefit and financial impact analysis reports

##### ***D. Quality Improvement Activities, Education and Training***

- Develop/update/maintain/disseminate training manuals and educational materials
- Participate in education and training of staff
- Develop Quality Assurance/Improvement policies and procedures
- Monitor productivity levels of staff
- Recommend process improvement solutions

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### *E. Compliance and Special Investigations*

- Develop risk assessment surveys
- Conduct due diligence and compliance audits using set rules, policies and procedures
- Prepare audit workpapers and report findings
- Develop compliance programs
- Investigate compliance reports and issues
- Recommend/monitor disciplinary and corrective action plans
- Collaborate/cooperate with external and regulatory auditors
- Monitor/apply Office of Inspector General and General Services Administration sanction list
- Interpret/apply/disseminate laws, accreditation, licensure and certification mandates

### *F. Contracts and Negotiations*

- Review/write contracts
- Negotiate with external auditors
- Negotiate with payors

### *G. Denial and Appeals Management*

- Track and review denied claims
- Write appeal letters
- Participate in denial and appeal discussion and follow-ups
- Conduct adjustments and payments
- Recommend business process rules

### *H. Health Information Management (Medical Records)*

- Abstract/collect records for department indices/databases/registries
- Collect data for internal/external use (Quality Assurance, Utilization Management, Risk Management and other related studies)
- Perform quantitative and qualitative analysis
- Calculate and interpret healthcare statistics
- Monitor and enforce JCAHO standards on Health Information Management
- Evaluate software and coding systems
- Maintain record storage and filing systems
- Monitor credentialing programs

### *I. Informatics and Technology*

- Email, word processing, spreadsheets and databases
- Graphics, flow chart, and presentation tools
- Statistical applications
- Project Management tools
- Other commercial billing and auditing systems, homegrown systems, coding systems and antifraud software

## **III. Core Domain 03: Audit Skill (21%)**

### *A. Interaction and Communication*

- Physicians
- Nurses and other clinical practitioners
- Senior management team
- Legal Counsel/Attorneys
- External auditors
- Regulatory auditors

### *B. Specific Knowledge and Skill Set*

- Accounting/Finance
- Problem Solving
- Statistics
- Quantitative and Qualitative Analysis
- Nursing Process
- Clinical Judgment
- Project Management
- Programming and Configuration
- Health Information Mgt. Principles
- Proposal Writing
- Research
- Negotiating

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### *C. Leadership and Management*

- Prepare/submit budget
- Hire/recommend/terminate staff
- Develop productivity, quality control, and process improvement measures
- Conduct performance appraisals
- Develop departmental policies and procedures
- Develop strategic plans, goals and objectives for unit/dept assigned
- Participate in internal/external work groups/committees
- Supervise billers/patient accounting or claims personnel
- Supervise coding, Medical Transcription or Health Information Management personnel
- Supervise nursing or clinical staff

### **IV. Core Domain 04: Medical Audit Environment (13%)**

#### *Application of Laws, Guidance, Standards, Guidelines and Other Accrediting Body Requirements*

- National Healthcare Billing Audit Guidelines
- Federal and State mandated laws
- Office of Inspector General Compliance Guidance
- General Accepted Accounting Principles
- Medicare/Medicaid Policies
- National and Local Coverage Determination
- National Committee for Quality Assurance
- Health Insurance Portability And Accountability Act of 1996
- Medicare Integrity Program
- US Sentencing Rules
- Joint Commission on the Accreditation of Healthcare Organizations (JCAHO)
- Interpretative Guidelines, UM criteria, standards and protocols
- HEDIS and Quality Measures
- Sarbanes-Oxley Act
- General Health Insurance reimbursement methodologies
- Employee Retirement Income Security Act (ERISA)

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**CMAS Recertification Application Form**

**Certified Medical Audit Specialist**

**Submission Deadline: Must be Postmarked by May 31st or September 30th, depending on the month in which the certification examination was taken.**

--	--

**Name**

**CMAS Number**

--	--

**Address**

**City**

--	--	--	--

**State**

**Zip Code**

**Phone (Home)**

**Phone (Work)**

**Email Address**

--	--

**Home**

**Work/Business**

--	--

**Employer**

**Position/Title**

\*\*\*\*\*PAYMENT\*\*\*\*\*

**Enclose \$100 recertification fee.**

**To pay by Credit Card:**

<b>Type of Card:</b> (VISA, M/C, AMEX, DISC)	<b>Credit Card #:</b>	<b>Exp Date:</b> (Month/Year)
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**Please complete the following if billing information is different than the contact information above:**

<b>Name on card:</b>		
<b>Billing Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>

<b>Signature:</b>
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**To pay by check: Make your check payable to AAMAS (if needed, our Tax ID is 65-0573775)**

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**IV CMAS Continuing Education Tracking Form**

<b>NAME (PRINT)</b>	<b>CMAS Number</b>	<b>Original CMAS Certification Year</b>

**Signature:** \_\_\_\_\_

This signature attests to accuracy of the information submitted below.

Date of Educational Activity	Mark CMAS Core Curriculum Domain Met				Program Title/Location	Onsite	E-learning	Others* Complete Blank Form	Sponsor	CMAS CEU Hours Earned
	1	2	3	4						
April 24-25, 2008	x	x	x	x	SAMPLE ONLY Program Title: The Wonderful World of Medical Auditing Location: Anaheim, California	x			American Association of Medical Audit Specialists	12.0
<b>Total</b>										

**CMAS Continuing Education Tracking Form**  
Additional Documentation Sheet

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Use this page for any additional educational activities you have completed.

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