Care Manager Certification Examination



Candidate Handbook

2025

Application Deadline*	Testing Window
March 1, 2025	April 1 – April 30, 2025
September 1, 2025	October 1 – October 31, 2025

*Applications will not be accepted after 11:59pm Eastern on this date

Administered by:



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www.ptcny.com/contact

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This Handbook contains necessary information about the NACCM Care Manager Certification Examination. Please retain it for future reference. Candidates are responsible for reading these instructions carefully. This Handbook is subject to change.

Reviewed and approved by the NACCM Board of Directors 4/29/2022

CONTACT INFORMATION			
Professional Testing Corporation (PTC) www.ptcny.com (212) 356-0660	 Apply for examination Obtain application information Obtain information about testing policies Transfer to a new testing period Request Test Accommodations Request Hand Score/Duplicate Score Report Questions about score reports Miscellaneous inquiries 		
Prometric www.prometric.com/NACCM (800) 741-0934	 Schedule test appointment Reschedule test appointment (within a testing period) Find directions to test site Questions regarding testing sites and appointments 		
National Academy of Certified Care Managers (NACCM) <u>www.naccm.net</u> (520) 884-4240	 General information Code of Ethics and Standards of Practice Exam Prep Course Renewal Information CEU Resources 		

ATTENTION CANDIDATES

This handbook contains necessary information about the NACCM Care Manager Certification Examination. It is required reading for those applying and taking the examination. All individuals applying for the examination must comply with the policies, procedures, and deadlines in this Handbook and attest to this by signing the Candidate Attestation found on the application. Please retain this handbook for future reference. This handbook is subject to change. See <u>www.ptcny.com</u> for handbook updates.

ACCESSING CELL PHONES AND ELECTRONIC DEVICES AT ANY TIME WHILE YOU ARE TAKING THE EXAM IS PROHIBITED. YOU CAN ONLY REMOVE SNACKS, DRINKS, MEDICINE OR PERSONAL HEALTHCARE ITEMS FROM YOUR LOCKER- NO BACKPACKS, BAGS, POCKETBOOKS OR CLOTHING CAN BE REMOVED WHILE YOUR EXAM IS IN SESSION.

PURPOSES OF CERTIFICATION

NACCM endorses the voluntary certification by examination for all individuals practicing care management. Certification helps to protect consumers by ensuring the competence of an individual in a specialized area of practice. CMC certification is highly valued and provides formal recognition in the profession of care management

CMC certification promotes the delivery of safe and effective care management services in any practice setting, by:

- Establishing standards of experience and knowledge required for the competent, ethical practice of care management.
- Formally recognizing those individuals who meet the eligibility requirements of the National Academy of Certified Care Managers and pass the validated and standardized Care Manager Certification Examination.
- Encouraging ongoing professional education and training of individuals engaged in care management.
- Educating allied health professionals, employers, and consumers to help them make informed decisions when evaluating the skills and qualifications of a care manager.

NON-DISCRIMINATION STATEMENT

NACCM and the NACCM Board of Directors are committed to the principle of equal opportunity for all certification applicants, employees, and outside contractors. The National Academy of Certified Care Managers does not discriminate on the basis of race, ethnicity, gender, religion, sexual orientation, national origin, age, disability, socioeconomic status, or other characteristic or status protected by federal or state law in the administration of its policies, employment and other administered programs and activities.



ELIGIBILITY REQUIREMENTS

Candidates must meet ONE of the Eligibility Options below at the time of the application deadline. Applications are randomly audited and verified.

Candidates should be familiar with both Aging Life Care Association (ALCA) and NACCM standards.



*Or International Equivalents

** Full-time employment is defined as a minimum of 35 hours per week. Part-time employment can be used. Refer to the conversion table on page 6.

For all four Eligibility Options:

Fields related to care management may include: child and family studies, counseling, gerontology, human services, nursing, psychology, rehabilitation, public health, sociology, social work, marriage and family therapy, occupational therapy, physical therapy, recreational therapy, respiratory therapy, and speech and language therapy.

If you feel your degree is in a related field that is not listed here, please send your transcripts along with your application for review.

Supervised care management experience and direct client experience must not run concurrently (unless it is part-time work experience). Internship, preceptorship, practicum, and volunteer activities are NOT accepted employment/experience.

In determining eligibility:

- Applicant must be currently working in the field of care management in one or more of the following roles: direct care management practice, care manager consultation/supervision (as a leader or participant), administrator of a care management program or practice.
- Applicant must agree to adhere to the NACCM Code of Ethics and Standards of Practice and Aging Life Care Association (ALCA) Standards of Practice.
- Supervised care management work experience must begin after earning the degree applicant is using to qualify.
- Direct client contact experience can be obtained at any time during the past 10 years.
- NACCM will consider employment experiences within the last 10 years toward eligibility.

**Full-time employment is defined as a minimum of 35 hours per week. (Part-time employment can be used. Refer to the conversion table on page 6.)

Care management experience MUST include a person-centered, holistic approach to care that addresses a broad range of issues related to the well-being of the client, extensive knowledge about the costs, quality, and availability of resources in the community. The care management practice must include all FOUR Content Domains and Care Manager tasks (see page 20.) Care management practice settings are diverse and minimum qualifications for employment are not standardized. Simply working in a position related to care management is not sufficient

Domain I. Assess and identify client strengths, needs, concerns and preferences

Domain II. Establish goals and plan of care

Domain III. Initiate, manage and monitor ongoing execution and outcomes of care plan

Domain IV. Promote and maintain professional standards in care management and in business practices

Supervision/consultation is defined as individual, group or peer review of performance, use of clinical skills, and core care manager functions for the purpose of maintaining and improving the quality of one's care management practice. Supervision/consultation can be provided by professional colleagues, mentors, clinical supervisors, or program managers who are preferably (but not required to be) certified in care management.

Each year of required care management experience must include 50 hours of supervision/consultation.

Supervision may be formal and/or informal and is expected to include:

- The use of clinical skills and core care manager functions
- Record review
- Case examples
- Current practice issues
- Ethical dilemmas
- Care plan development
- Care management interventions, and
- Quality evaluation measures

Conversion Chart: Part Time Work Experience to Full Time Work Experience

Please use the following formula when calculating Part Time Work Experience (Full-time employment is defined as a minimum of 35 hours per week. Part-time employment can be used; refer to the conversion table below). An example has been provided for you for an individual who worked 15 hours/week from January 2014 – July 31, 2016. (The numbers in red will be your part time hours and calculations).



COMPLETION OF APPLICATION

Step 1 – Fill Out the Application

- Go to <u>www.ptcny.com/test-sponsors/NACCM</u>
 - View testing periods and application deadlines
 - Fill out online application completely and upload supporting documentation.
 - Use your first and last name exactly as it appears on your current driver's license, passport, state issued non-driver ID or military ID.
 - Applications are not complete until all information, documentation, and payment has been provided.
 - When you start a new application, you will be asked to create a PIN number. This
 PIN will be used if you need to come back to the application to finish it later. Keep
 the link to the application and your PIN number for later use.

Step 2 – Submit Exam Fee and Application for Review

PTC will send you an email that says that your payment and application have been received and are being reviewed. Please allow up 10 business days for review.

Step 3 – Receive Application Status Update

• After your application is reviewed PTC will update you with another email.

O REOPENED FOR MORE DOCUMENTS

- This means we are missing the required documentation. Follow the directions in the email.
- Applications that are incomplete as of 14 days before the start of the testing window will be refunded minus the administration fee (see fees page 11).

O **REJECTED**

- This means you are not eligible to take the exam. The reason will be explained in the email.
- Rejected applications will be refunded minus the administration fee (see fees page 11).

O APPROVED

• This means your application is approved. You will move on to Step 4.

Step 4 – Receive Scheduling Authorization and Schedule Testing Appointment

- Approved candidates will receive an email with their Scheduling Authorization, within 11 weeks before the start of the testing window. Scheduling Authorization emails come from notices@ptcny.com. Do not lose this email.
- If you don't receive your Scheduling Authorization email 3 weeks before the start of your testing window, contact PTC.

The Scheduling Authorization includes important information including:

- Your PTC Candidate ID number
- Instructions on how to make your Exam appointment with Prometric.

Applicants who are not approved to sit for the examination or whose applications are incomplete 14 days prior to the first day of the testing window will receive a refund of their application fee minus the \$75 administrative fee. Refunds will be processed approximately 30 days after the end of the testing period.

Application Checklist

Candidates applying for the Care Manager Certification Examination must upload the following documents into the online application system:

Option A

- A copy of your PhD or Master's degree in a field related to care management
- A completed copy of the Verification Form for Supervised Care Management Experience and Direct Client Experience
 - Option A requires one year of paid, full-time care management experience during which the CM received at least 50 hours of supervision

Option B

- A copy of your Bachelor's degree in a field related to Care Management OR a copy of your Bachelor's, Master's or PhD degree in an unrelated field along with a copy of your certificate from a university based Care Management program
- A completed copy of the Verification Form for Supervised Care Management Experience and Direct Client Experience
 - Option B requires two years of paid, full-time Care Management experience during which time the CM received at least 50 hours of supervision

Option C

- A copy of your Associate's degree in a field related to Care Management, OR an RN diploma
- A completed copy of the Verification Form for Supervised Care Management Experience and Direct Client Experience
 - Option C requires two years of paid, full-time Care Management experience during which the CM received at least 50 hours of supervision each year PLUS:
 - One year of paid, full-time direct client experience in fields such as social services, nursing, mental health/counseling, or care management

Option D

- A copy of your degree in an unrelated field (Associate's, Bachelor's, Master's or PhD)
- A completed copy of the Verification Form for Supervised Care Management Experience and Direct Client Experience
 - Option D requires three years of paid, full-time Care Management Experience during which the CM received at least 50 hours of supervision each year PLUS:
 - One year of paid, full-time direct client experience in fields such as social services, nursing, mental health/counseling or care management

EXAMINATION ADMINISTRATION AND SCHEDULING

The Care Manager Certification Examination is administered during an established one-month testing window on a daily basis, excluding holidays, at computer-based testing facilities managed by Prometric.

Scheduling Examination Appointments

Follow the steps on your Scheduling Authorization to schedule your examination appointment with Prometric.



- Appointment times are first-come, first-served, so schedule your appointment as soon as you receive your Scheduling Authorization.
- Candidates who wait until the last minute run the risk of missing out on their preferred date, time, and/or testing center. Candidates unable to schedule an appointment will forfeit their fees.

After you make your test appointment, Prometric will send you a confirmation email with the date, time, and location of your exam. Check this confirmation carefully and contact Prometric at (800) 741-0934 if you do not receive this email confirmation or if there is a mistake with your appointment.

Note: International candidates may also schedule, reschedule, or cancel an appointment online at <u>www.prometric.com/NACCM</u>.

IMPORTANT!

You **MUST** present your current driver's license, passport, or U.S. military ID at the test center. Expired, temporary, or paper driver's licenses will **NOT** be accepted.

The first and last name on your Scheduling Authorization **MUST** exactly match the first and last name on your photo ID. Fees will not be refunded for exams missed because of invalid ID.

Rescheduling Examination Appointments within a Testing Period

Candidates are able to reschedule their examination appointments within the same testing period as long as the request is submitted within the timeframe described in the chart on the next page. Reschedule within the permitted time frame by calling or going to the Prometric website: <u>www.prometric.com/NACCM.</u>

Time Frame	Reschedule Permitted?	Stipulations
Requests submitted 30 days or more before the original appointment	Yes	None
Requests submitted 29 to 5 days before the original appointment	Yes	Candidate must pay Prometric a rescheduling fee of \$50.
Requests submitted less than 5 days before the original appointment	No	Candidates who do not arrive to test for their appointment will be considered a no-show and all their examinations fees will be forfeited. Candidates will need to follow the transfer policy to test during a later testing window.

Transferring to a New Testing Period

Candidates unable to take the examination during their scheduled testing period may request a **ONE-TIME** transfer to a future testing period. **There is a transfer fee of \$208.00.** After you have transferred once by paying the \$208.00 fee, you will need to pay the full examination fee in order to transfer a second time; so, *please plan carefully*.

Please note: requests to transfer to a new testing period must be received within 30 days of your originally scheduled testing period.

Candidates wishing to transfer to a new testing period need to follow the steps below.

- 1. Go to apply.ptcny.com.
- 2. Click "Transfer Existing Application."
- 3. Choose NACCM in the first drop-down menu; then choose the new examination period in the second drop down menu and fill out the rest of the information on the page.
- 4. Fill out the application making sure you answer yes to the question asking if you are transferring.
- 5. When you have finished the application, click "Submit Transfer Request."

6. PTC Support will send you an email letting you know your transfer application was approved and that you can log back into your application and pay the one-time \$208.00 transfer fee.

Call 212-356-0660 if you have any questions regarding the transfer process.

If candidates are unable to attend the examination on the date for which they registered and elect not to transfer to another testing period, the application will be closed and all fees will be forfeited. There will be no refund of fees.

The transfer fee is based on costs and is not punitive in nature. The transfer fee must be paid at the time the request is approved.

Note: Transferring your Examination only refers to instances when a candidate is unable to take their exam during a testing period for which they have already applied. Candidates who did not pass their examination and are retaking the examination need to pay the full Examination Fee.

Failing to Report for an Examination

If you fail to report for an examination, you will forfeit all fees paid to take the examination. A completed application form and examination fee are required to reapply for the examination.

Fee Type	Amount	Details
Application Fee	US \$285.00	 Non-refundable Non-transferable Includes testing center fees Includes non-refundable \$75 administrative fee
Transfer Fee (Moving to a new testing window; see page 10	US \$208.00	 Applies to candidates who need to move to a new testing period Must submit new application & fee to PTC
Rescheduling Fee (29-5 days prior to scheduled appointment; see page 10)	US \$50.00	 Applies to candidates who need to move their appointment within their current testing period Payable directly to Prometric Reschedule with Prometric online or over the phone

EXAMINATION FEES

There will be no refund of fees unless applicants are ineligible for the examination.



Ineligible candidates will be refunded their fees minus an administrative fee.

No refunds will be issued for applying for the incorrect examination or testing period, for failing to make an examination appointment, or for failing to appear at your scheduled appointment.

Be advised: Prometric does not have the authority to grant transfers to another testing period or refunds.

TEST ACCOMMODATIONS

NACCM and PTC support the intent of and comply with the Americans with Disabilities Act (ADA) and will take steps reasonably necessary to make testing accessible to persons with disabilities covered under the ADA. According to the ADA, an individual with a disability is a person who has a physical or mental impairment that substantially limits a major life activity (such as seeing, hearing, learning, reading, concentrating, or walking) or a major bodily function (such as neurological, endocrine, or digestive system).

The information you provide and any documentation regarding your disability and test accommodations is confidential and is not included in scoring or reporting.

All approved testing accommodations must maintain the psychometric nature and security of the examination. Accommodations that fundamentally alter the nature or security of the exam will not be granted. Note that accommodations for an examination (test accommodations) may not be the same as accommodations provided by your employer for your job. You can find more information about testing accommodations under the Americans with Disabilities Act (www.ada.gov).

Requests for Test Accommodations must be uploaded with the candidate's application and fees at least 8 weeks before the start of your testing period. You must complete and upload both Part 1 and Part 2 of this Form at the same time. Missing information or incomplete Forms will result in a delay in processing. If your Form is incomplete and/or not received at least 8 weeks before the start of the testing period, we cannot guarantee that we can make these test accommodations in time for you to test and you may need to transfer to another testing period and pay the transfer fee.

To request test accommodations, follow these 3 steps:

Download the Request for Test Accommodations Form, available from www.ptcny.com or by calling PTC at (212) 356-0660.

Complete Test Accommodations Form with your doctor/healthcare professional.

Upload the completed and signed Request for Test Accommodations Form with the online exam application. Submit your application at least 8 weeks prior to the start of your chosen testing period.

NOTES:

- Only those requests made and received on the official Request for Test Accommodations Form will be reviewed.
- All requests must be made at the time of application. Accommodations cannot be added to an existing exam appointment.
- Do not go to www.prometric.com or contact Prometric to request test accommodations as they are not authorized to approve accommodations. All requests for test accommodations must be submitted on the PTC Request Form.
- If you need to use your cell phone or another electronic device to monitor a medical condition, such as diabetes, be sure to include this on Part 1 of the Request for Test Accommodations Form so that we can notify Prometric in advance.
- If you are a nursing parent and will need to use a breast pump during your exam, complete Part 1 of the Request for Test Accommodations Form and submit it at least 8 weeks before your testing period to allow time to make suitable arrangements at the test center.
- Only pre-approved test accommodations will be permitted on the day of the examination. Test center personnel are not authorized to make any changes to the test accommodations on the day of the testing session and any such change may result in your examination score being canceled.

PREPARING FOR THE EXAMINATION

- Check your driver's license, passport, non-driver state issued ID or U.S. Military ID.
 - Is it expired?
 - Does the first and last name on your ID match the first and last name on your Scheduling Authorization email?
 - Proctors at the Prometric testing center will refuse admission to candidates with expired ID, IDs with names that do not match their records, and temporary paper IDs.
 Candidates will be marked as no-shows and will forfeit their exam fees.
- Check your PTC Scheduling Authorization email and Prometric Appointment Confirmation email to make sure everything is accurate (i.e., your first and last name, exam name, appointment date, time and location).
- Make yourself familiar with the location of your test center and parking options and check the weather and traffic conditions before you leave for the test center. Allow plenty of time as late arrival may prevent you from testing.
- In the event of inclement weather, check the Prometric website for site closures: <u>https://www.prometric.com/closures</u>
- Prometric's website provides information on what you can expect on your test day, including a
 walkthrough of check in and security procedures: <u>https://www.prometric.com/test-center-security</u>.

- This Handbook provides the Content Outline for the Examination (see appendix). Use this to help you start studying for the examination.
- Review What to Expect at the Test Center and Rules for the Examination on the next pages before your appointment.
- Review the Prometric exam software tutorial here: <u>https://ptcny.com/pdf/prometricsoftwaretutorial.pdf</u>

WHAT TO EXPECT AT THE TESTING CENTER

- Candidate Check-In
 - Candidates will be asked to:
 - present their IDs.
 - empty and turn out their pockets.
 - walk through a metal detector or get "wanded".
 - Eyeglasses, jewelry, and other accessories will be inspected.
 - Jewelry other than wedding and engagement rings is prohibited.
 - Leave these at home or place them in your locker.
 - Religious headwear may be worn into the testing room; however, it is subject to inspection by test center staff.
 - Prometric provides lockers to store purses, backpacks, mobile phones, jackets, food, drinks and medical supplies.
 - Water in a clear plastic containers (no labels) may be brought into the testing room.
- During the Exam
 - No breaks are scheduled during the exam.
 - Candidates are only permitted to leave the testing room to use the restroom or access food, drink, or medicine from their assigned locker. The exam timer will NOT be paused.
 - Smoking is prohibited at the testing center.
 - All examinations are monitored and may be recorded in both audio and video format.
- Keep in mind:
 - o Other exams will be administered at the same time as your examination.
 - You may hear ambient noises such as typing, coughing, or people entering and exiting the testing room that cannot be avoided.
 - Prometric is unable to provide a completely noise-free environment.
 - Headphones may be requested to minimize the impact of ambient noise.

- Proctors will periodically walk through the testing room as part of their monitoring process.
- See <u>Prometric's website</u> for more information about what to expect on testing day.

RULES FOR THE EXAMINATION

Read the information below carefully. You are responsible for adhering to the examination rules while at the testing center.

⇒ DO NOT BRING

These items are strictly prohibited at the testing center. Leave these items in your car or your assigned locker.

- Cell phones and all other electronic devices
- o Watches
- Jackets/coats/bulky clothing such as sweatshirts
- Hats (except hats worn for religious reasons)
- Jewelry, including watches and wearable technology.



- ⇒ You may NOT access the following at any time during your exam or breaks: papers, books, any reference materials; electronic devices including your cell phone. Candidates may access the following items from their locker: snacks, drinks, medicine, or other personal healthcare items.
- ⇒ No questions concerning content of the examination may be asked during the examination session. Read carefully the directions that are provided on screen at the beginning of the examination session.
- ⇒ You are prohibited from leaving the testing room while your examination is in session, except for going to the restroom. Candidates who do go to their lockers or the restroom will need to repeat the security screening before being permitted to reenter the testing room. Candidates who leave the center will have their examinations terminated.
- ⇒ See <u>Prometric's statement on Test Center Security</u> for more information.

Contact PTC at (212) 356-0660 or <u>www.ptcny.com/contact</u> with any questions about the Examination Rules.

Irregular or improper behavior that is observed, made apparent by statistical analysis, or uncovered by other means before, during or after the examination will be considered a violation of these rules and may constitute grounds for invalidation of a candidate's examination. NACCM will initiate an investigation and request suitable analyses and appropriate documentation.

TESTING CONDITIONS OR EXAMINATION FEEDBACK

Any candidate who feels that the examination effort was negatively impacted by the test center conditions should notify the proctor immediately. The situation should also be reported to PTC at <u>www.ptcny.com/contact</u> within 15 days of the test appointment. Any comments about the test itself should also be reported to PTC at <u>www.ptcny.com/contact</u> within 15 days of the test appointment.

REPORT OF RESULTS

Candidates will be notified via email by Professional Testing Corporation approximately four weeks after the close of the testing window whether they have passed or failed the examination. Scores on the major areas of the examination and on the total examination will be reported. Examination scores cannot be provided verbally over the phone. Score Reports will be available online only for 90 days. Be sure to save a copy of your score report in your permanent files.

Scoring Procedure

The passing score for the CMC Examination is determined using the modified Angoff technique. This technique is a criterion referenced methodology where a panel of subject matter experts carefully evaluate each item on the examination and estimate the probability that each individual question will be answered correctly by a minimally competent/just qualified candidate. The recommended passing score is then reviewed and approved by NACCM. Once the passing score is set, this standard is upheld for all future forms of the examination. To ensure fairness and consistency across examination forms, a statistical process called equating is used to account for any slight variations in difficulty level across forms. Scores on the CMC Examination are reported using scaled scoring, which converts the candidates' raw score (i.e., total number of correct questions) onto a consistent and standardized scale. Scaled scores allow candidate scores to be comparable from one exam form to the next. The scale range for the examination is 200 to 800 with a passing point of 500.

Confidentiality: Protection of Candidate and Certificant Information

Candidate and certificant information shall be kept confidential and not publicly disclosed without the expressed consent of the candidate/certificant unless required by law or court order. By applying for or maintaining certification, candidates consent to the following disclosures of their personal information:

- 1. For inclusion in a published directory of certified care managers maintained by the NACCM;
- 2. For confirmation of employment status, certification status, and dates of testing from employers or prospective employers;
- 3. For sharing with vendors involved in the development and administration of tests;
- 4. To NACCM volunteers, staff, and consultants as needed for NACCM business.

PTC, on behalf of NACCM, will release the individual test scores ONLY to the individual candidate.

Requesting a Handscore

Candidates who fail the examination may request a hand scoring of their data file. Hand scoring is a manual check of the data file by the testing service to determine if there have been any errors in scoring. Although the probability of such an error is extremely remote, this service is available. Requests for hand scoring must be received by PTC no later than 90 days after the date of the examination by completing and returning the <u>Request of Handscore</u> form on <u>www.ptcny.com</u> with payment of \$25.

Candidates who fail the examination will not be permitted to see the examination questions. For reasons of test security, no candidate is allowed to review the examination or any of its items.

To ensure correct reporting of results, PTC automatically performs handscores of examinations of candidates who score within 3 points of passing as a quality control measure. Thus, it is extremely doubtful that any examination results will change from "fail" to "pass" through handscoring.

Reexamination

As the primary purpose of the Care Manager Certification Examination is to assess minimum levels of knowledge and competency, it may be taken as often as desired, upon filing of a new Application and fee. This policy allows for the candidate to retest in the next window after failing the exam. There is no limit to the number of times an examination may be repeated.

EXAMINATION SECURITY

Candidates seeking admission to take the examination do so for the purpose of pursuing registration, and for no other purpose. Because of the confidential nature of the examination, candidates may not make or keep copies, excerpts, or notes of examination materials, and to not use or divulge information learned from the examination. The examination is the exclusive property of NACCM and candidates may not use examination information in any way without the express prior written consent of NACCM.

The Care Manager Certification Examination is confidential. Candidates are required to sign a confidentiality agreement prior to the start of the examination.

Candidates agree to abide by the testing rules in effect at the time of their test appointment. NACCM, PTC, and/or Prometric staff may refuse a candidate admission to the examination if they do not have the proper identification as detailed in the Candidate Handbook. Candidates who do not abide by the testing rules may have their exam terminated during the exam administration in order to maintain a secure and proper exam administration and/or exam scores invalidated.

ATTAINMENT OF CERTIFICATION AND RECERTIFICATION

Candidates who pass the Care Manager Certification Examination will be certified and acknowledged by NACCM as Care Manager Certified, are eligible to use the designation CMC after their names and will receive a certificate of certification from NACCM. A registry of CMCs will be maintained by NACCM and may be reported in its publications.

Certification as a Care Manager Certified is recognized for a period of three years at which time the candidate must meet the recertification requirements that are in effect. Candidates not meeting the recertification requirements must retake and pass the current Care Manager Certification Examination. Go to <u>http://www.naccm.net</u> for further information regarding recertification.

REVOCATION OF CERTIFICATION

Misconduct leading to revocation of the CMC consists of, but is not limited to, the following:

- 1. Falsification of any information in the certification application or recertification process;
- 2. Any irregularities in relationship to the testing process;
- 3. Failure to maintain any eligibility requirements;
- 4. Misrepresentation or misuse of certification status;
- 5. Failure to pay initial or recertification fees;
- 6. Revocation of a license in a primary profession;
- 7. Actions that lead to limitations or sanctions imposed by another professional organization/association;
- 8. Any illegal practices;
- 9. Gross negligence or willful misconduct in the performance of professional services based on demonstrable, substantive violations of the Ethical Principles and Standards of Practice resulting in material harm

NACCM reserves the right to revoke the certification of any individual who is found and determined by its internal processes to violate any of the above and to publish certification revocations.

COMPLAINTS AND DISCIPLINE

Complaints regarding possible misconduct by a CMC, including violations of the Ethical Principles or Standards of Practice, must be submitted in writing to the NACCM CEO. Complaints must identify the specific items(s) listed in the NACCM disciplinary policy.

- 1. Complaints will undergo an administrative review by the NACCM CEO, President, and legal counsel within 30 days of receipt to determine if the alleged misconduct falls within the scope of disciplinary policy and warrants investigation.
- 2. If it is determined that the complaint properly alleges one or more grounds for disciplinary action and warrants investigation, then the President will designate a task force to investigate and make a determination regarding the complaint.
- 3. The accused CMC will be notified of the complaint, provided a copy of the complaint, and given an opportunity to formally and in writing admit to or refute the accusations.
- 4. The investigation may require procuring additional materials and interviews with relevant people.
- 5. If it is determined by the task group that the CMC engaged in misconduct and disciplinary action is warranted, the consequences can range from a letter of reprimand; requiring the accused to complete an educational course on ethics; suspension of CMC status for a fixed period; or revocation of CMC status.
- 6. Every effort will be made to reach a decision in a timely manner; however, extended time may be needed to ensure full due process.

- 7. NACCM may defer action or decision on a complaint if the same or substantially the same allegations are being addressed by another appropriate body or by a court or governmental regulator.
- 8. An adverse finding and/or disciplinary action may be appealed by the CMC to the full Board of Directors.
- 9. NACCM may notify interested persons and organizations of suspensions and revocation.

CONTENT OF THE EXAMINATION

The Care Manager Certification Examination is a computer-based examination composed of multiplechoice, objective questions with a total testing time of three and a half (3.5) hours. The content of the examination is described in "Content Domains and Care Manager Tasks" starting below. Every effort has been made to ensure the reliability and validity of the examination. The examination construction process constitutes one major effort devoted to the assurance of content validity. Another major facet is the Job Task Analysis (last performed in 2022) to develop practice relevant test specifications for the examination. The test specifications now in use are based on the findings of this Job Task Analysis.

The examination consists of 180 scored items, plus 20 pre-test items. The pre-test questions are randomly distributed throughout the examination and do not count towards a candidate's score. The pre-test items are being evaluated to determine if they perform well enough statistically to be introduced as scored items on a future examination. Only the scored items count towards the candidate's final score.

The questions for the examination are obtained from individuals with expertise in care management and are reviewed for construction, accuracy, and appropriateness by the NACCM Item Review and Examination Review Panels.

NACCM, with the advice and assistance of the Professional Testing Corporation, prepares and approves the examination.

CONTENT DOMAINS AND CARE MANAGER TASKS

The Care Manager Certification examination questions contain content from the following domains. The approximate percentage of questions from each domain is also indicated.

Domain I. Assess and identify client strengths, needs, concerns, and preferences 25.49% (46 Items)

- 1. Screen a potential client for care management needs to determine the appropriateness of and eligibility for services.
- 2. Ensure informed consent and appropriate disclosures [e.g., explain to the client/responsible party the role of the care manager, the scope of services provided, costs (if any) for care management services, and the client's/responsible party's rights and responsibilities].
- 3. Conduct a comprehensive biopsychosocial and environmental assessment of the client which includes their formal and informal support system and may include the use of standardized assessment tools (e.g., medical, psychological, functional, financial, safety, legal, and social issues).
- 4. Assess the client's ability to participate in developing the care plan and identify alternative decision makers if client has limited ability or lacks decisional capacity.
- 5. Collect additional data by contacting relevant sources [e.g. physician(s), other care providers, and social support systems] in order to validate and expand the information obtained.
- 6. Synthesize and interpret the assessment data.

Domain II. Establish goals and a plan of care 20.69% (37 Items)

- 1. Collaborate with client/responsible party and support system to identify potential areas for intervention, prioritize the identified concerns, and develop mutually agreed upon goals.
- 2. Identify options and resources that address the areas identified for intervention and provide appropriate information and referrals.
- 3. Discuss with the client/responsible party the advantages, disadvantages, and costs of available/appropriate options and resources.
- 4. Develop and prioritize action steps with the client/responsible party in order to achieve the agreed upon care plan goals.
- 5. Develop a timeline for implementation of the care plan.

Domain III. Initiate, manage and monitor ongoing execution and outcomes of care plan 21.66% (39 Items)

- 1. Coordinate services and interventions.
- 2. Communicate goals of the care plan with the client's support system.
- 3. Monitor service delivery and intervention(s).
- 4. Perform periodic reassessments of client and progress towards goal achievement and modify the care plan based on this information as appropriate.
- 5. Evaluate client satisfaction with services.
- 6. Develop a process for termination of services.

Domain IV. Promote and maintain professional standards in care management and in business practices 32.16% (58 Items)

- 1. Promote client autonomy and right to self-determination.
- 2. Recognize and respect diversity with respect to factors such as culture, religion, race, ethnicity, national origin, age, disability, gender, gender identity, sexual orientation, and socioeconomic status, to uphold client's value system, preferences, and choices.
- 3. Adhere to the NACCM Standards of Practice and Code of Ethics.
- 4. Identify and work to resolve ethical dilemmas using consultation and supervision when appropriate.
- 5. Document professionally relevant information about the client/client system (e.g., assessments, care plans, services and the supports provided, communications with the client and other parties, referrals made, reasons for the termination of services).
- 6. Participate in peer review and/or clinical supervision as appropriate.
- 7. Effectively manage a care management practice/program when in a supervisory/leadership role (e.g., providing effective supervision of staff, providing opportunities for staff development, addressing risk management issues, effectively evaluating business/financial metrics, appropriately securing confidential information, and adhering to all applicable laws and regulations).
- 8. Evaluate service quality and effectiveness.

Content domains, care manager tasks, and percentages were reviewed, updated, and approved by the Board of Directors on April 29, 2022.

Knowledge Required to Perform Care Manager Tasks

THEORETICAL BASES

- 01. Development-based theories (e.g., psychodynamic, object relations, stages of psychosocial development)
- 02. Organizational behavior
- 03. Personality theories (e.g., psychoanalytic, humanistic, existential, cognitive)
- 04. Crisis theory
- 05. Behavior theory
- 06. Adult learning theory
- 07. Systems theory
- 08. Change theory
- 09. Family systems theory
- 10. Cultural and Spiritual competence theory
- 11. Mindfulness theories
- 12. Trauma theory
- 13. Ambiguous loss theory

ASSESSMENT

- 14. Health issues and preventive care for individuals with chronic health concerns, disabilities, and cognitive impairment
- 15. Functioning as it relates to all activities of daily living (e.g., transferring, walking, bowel, bladder, toileting, mobility, bathing, dressing, eating, feeding, and sleeping)
- 16. Functioning as it relates to all instrumental activities of daily living (e.g., medication management, meal preparation, shopping, housekeeping, laundry, telephone, travel, finances, and pet care)
- 17. Common mental health disorders (e.g., anxiety and depression), their symptoms, and their management
- 18. Techniques for administering and interpreting cognitive screening tools and behavioral, mental health, and life satisfaction assessment tools
- 19. Risk assessment screening (e.g., fall risk, home safety, ability to manage financial affairs, judgement, safe community)
- 20. Interviewing techniques for collecting information on demographics, environment, family system, home safety, durable medical equipment, and finances
- 21. Basic nutritional and hydration needs as well as special requirements relating to individuals with chronic health concerns, disabilities, and cognitive impairment
- 22. Common medications relating to individuals with chronic health concerns, disabilities and cognitive impairment, including red flags for medications and interactions
- 23. Infectious disease prevention measures, including vaccinations and hygiene, for communicable diseases such as MRSA, TB, HIV, COVID, STDs, etc.
- 24. Impact of diversity in areas such as culture, religion, race, ethnicity, national origin, age, disability, gender, gender identity, sexual orientation, and socioeconomic status on behavior, perceptions and value systems that relate to health and long-term care
- 25. Substance abuse, including prescription medications and alcohol
- 26. Preferences, expectations, capabilities, limitations, stress, and coping mechanisms of the client and others and their impact on the client system
- 27. Impact of interactions between the formal and informal support systems
- 28. Impact of spirituality on health and well-being
- 29. Impact of health status and functional abilities on behavior and mental health
- 30. Advance directives such as financial power of attorney, living will, health care surrogate, and trust documents
- 31. Indicators that client is in need of enacting powers of attorney or guardianship/conservatorship
- 32. Risk factors for abuse, neglect, and exploitation issues
- 33. Grief and loss, history of trauma
- 34. Legal and financial vehicles for financing care such as special needs trusts, government benefits, VA benefits (including Aid and Attendance), reverse mortgage, long-term care insurance, various financial instruments
- 35. Legal issues concerning hiring of home care providers and risks and benefits of various options
- 36. Stress assessment of primary family caregiver
- 37. Social determinants of health

CARE PLANNING

- 38. Care planning process
- 39. How to write goals that are specific, measurable, agreed upon, realistic, and timely or time bound
- 40. Reimbursement mechanisms such as health insurance, supplemental insurance, long-term care insurance

- 41. Entitlement programs such as Medicare and Medicaid, Veterans' Administration, SSD, SSI, local programs, and their eligibility requirements
- 42. Cost-benefit analysis of care options
- 43. Social, environmental, and medical services available to enhance function such as durable medical equipment, respite care, day programs, home adaptation
- 44. Intervention strategies, such as medication management, treatment modalities, crisis intervention, psychosocial interventions
- 45. Housing options such as residential care, nursing homes, assisted living, continuing care retirement communities (CCRCs), subsidized housing, intentional communities, "Villages," and aging-in-place
- 46. Alternative/complementary services such as acupuncture and massage
- 47. End of life care planning
- 48. Hospice and palliative care

COORDINATION OF CARE

- 49. Formal and informal provider responsibilities
- 50. Availability and use of interpreters and adaptive communication equipment
- 51. Appropriate record keeping and documentation
- 52. Referral procedures to service providers
- 53. Understanding mental health, physical, geographical, financial, cultural, and other potential barriers to service delivery
- 54. Interdisciplinary team building and techniques to enhance inter-organizational relations

PROFESSIONAL PRACTICE

- 55. Legal and ethical issues of reporting abuse and neglect
- 56. Grievance procedures and complaints
- 57. Appeals processes (e.g., entitlement appeals, professional grievance procedures)
- 58. NACCM standards of practice and ethical guidelines
- 59. HIPAA compliance
- 60. Informed consent
- 61. Professional liability, including legal issues concerning hiring of home care providers
- 62. Client advocacy
- 63. Client empowerment strategies
- 64. Guardianship/conservatorship process
- 65. Client rights and responsibilities
- 66. Peer review processes
- 67. Role of supervisors
- 68. Appropriate use of supervision
- 69. Record audit process
- 70. Community outreach and education techniques
- 71. Outcome measurement and quality assurance practices
- 72. Ethically responsible remote or virtual practice
- 73. Understanding of professional boundaries and scope of practice
- 74. Ethical use of technology in practice with clients (e.g., cameras, sensors, trackers)
- 75. Ethical use of social media in practice
- 76. Maintaining objectivity (no referral fees or commissions)
- 77. Protected Health Information (PHI)

GENERIC COMPETENCIES

- 78. Decision making and problem-solving techniques
- 79. Conflict resolution techniques
- 80. Stress management techniques/mindfulness
- 81. Time management and prioritization techniques
- 82. Counseling techniques
- 83. Crisis intervention techniques
- 84. Motivational interviewing techniques
- 85. Negotiation and mediation strategies
- 86. Interpersonal relations
- 87. Communication techniques
- 88. Group dynamics
- 89. Organizational skills
- 90. Teaching and coaching techniques
- 91. Networking techniques
- 92. Business management
- 93. Cultural competencies
- 94. MCI and dementia and difference between various types of dementia
- 95. Trauma informed care
- 96. Requirements of the Americans with Disabilities Act
- 97. Family "caregiver" education
- 98. Technology skills
- 99. Intellectual/developmental disabilities
- 100. Person-centered care

SAMPLE EXAMINATION QUESTIONS

- 1. Which of the following activities represent activities of daily living (ADLs)?
 - 1. Bathing, dressing, toileting
 - 2. Dusting, vacuuming, mowing the lawn
 - 3. Preparing lunch, washing clothes and folding laundry
 - 4. Paying bills, answering the phone, reading the newspaper
- 2. The principle that is associated with a client making his/her own decisions about which interventions he/she will or will not receive is called
 - 1. justice.
 - 2. autonomy.
 - 3. dependency.
 - 4. informed consent.
- 3. In order to obtain medical information about a client, a care manager must
 - 1. ask the client for the information.
 - 2. ask the client's caregiver for the information.
 - 3. obtain a signed release of information from the client.
 - 4. obtain a signed release of information from the physician.
- 4. When an older client suddenly becomes confused, the care manager's <u>FIRST</u> step is to
 - 1. arrange for a medical evaluation of the client.
 - 2. arrange for a psychological evaluation of the client.
 - 3. complete standardized cognitive screening on the client.
 - 4. watch and wait for 24-hours to see if the client gets better.
- 5. Developing and implementing an individualized care plan based on the goals that are most important to the client is considered
 - 1. transitions of care.
 - 2. coordination of care.
 - 3. person centered care.
 - 4. chronic disease self-management.
- 6. During the initial visit to an older client, the care manager finds the client confused, undernourished, in soiled clothing, and with bruises on his face. The caregiver shouts at the client who then cowers in fear. The care manager's <u>FIRST</u> step is to
 - 1. arrange for meal delivery.
 - 2. call adult protective services.
 - 3. place the client in a nursing home.
 - 4. arrange for guardianship/conservatorship.

ANSWERS

1.	1
2.	2
3.	3
4.	1
5.	3
6.	2

RECOMMENDED REFERENCES

The National Academy of Certified Care Managers has prepared a suggested reference list to assist in preparing for the Care Manager Certification Examination. These references contain journals and textbooks which include information of significance to Care Managers. This list does not attempt to include all acceptable references nor is it suggested that the Care Manager Certification Examination is necessarily based on these references.

Books

Aging: The Health Care Challenge. An Interdisciplinary Approach to Assessment and Rehabilitative Management of the Elderly. 4th Edition. Bernstein-Lewis, C. (2002). FA Davis Company.

Being Mortal: Medicine and What Matters in the End. Gawande, A. (2014). Henry Holt & Company, NY

Buried in Treasures: Help for Compulsive Acquiring, Saving, and Hoarding. Frost, R. O., Steketee, G. & Tolin, D. (2007). Oxford University Press.

Communication and Aging. Nussbaum, J. F., Pecchioni, L. L., Robinson, J. D. & Thompson, T. L. Second Edition. (2000). Lawrence Erlbaum Associates, Publishers.

Compulsive Hoarding and Acquiring: Therapist Guide. Frost, R. O. & Steketee, G. (2007). Oxford University Press.

Doorway Thoughts: Cross-Cultural Healthcare for Older Adults. Volumes. 1-3. American Geriatric Society.

Elderhood: Redefining Aging, Transforming Medicine, Reimagining Life. (2019) Aronson, L.

Empowering Social Workers for Practice with Vulnerable Older Adults. (2010). Soniat, B.A. & Micklos, M.

Ethics in Community-Based Elder Care. Holstein, M.B. & Mitzen, P.B. (2001). Springer Publishing

Final Gifts: Understanding the Special Awareness, Needs, and Communication of the Dying. Callanan, M. & Kelley, P. (2012).

Fundamentals of Case Management Practice: Skills for the Human Services. Sixth Edition. Summers, N. (2024). Cengage Learning.

Handbook for Mortals: Guidance for People Facing Serious Illness. The Center to Improve Care of the Dying. Lynn, J. & Harold, J. (2011). Oxford University Press.

Handbook of Geriatric Care Management – Fourth Ed. (2017). Cress, C. J.

The Life Care Management Handbook (2021). Crowley, J. & Huber, S.

Loss, Trauma & Resilience: Therapeutic Work with Ambiguous Loss. (2006). Boss, P. Norton & Company.

Motivational Interviewing: Helping People Change and Grow (Applications of Motivational Interviewing Series) Fourth Edition. (2023). Miller, W. R. & Rollnick, S.

My Mother Your Mother: Embracing "Slow Medicine," The Compassionate Approach to Caring for Your Aging Loved Ones. McCullough, D. (2009). Harper.

Risk Management in Social Work: Preventing Professional Malpractice, Liability, and Disciplinary Action. Reamer, F. (Nov 2014). Columbia University Press, NY

Social Work Practice and Psychopharmacology. A Person in Environment Approach. Dziegielewski, S.F. Third Edition. (2016). Springer Publishing.

Social Work Values and Ethics Fifth Edition. Reamer, F. (2018). Columbia University Press, NY

The 36-Hour Day: A Family Guide to Caring for People Who Have Alzheimer's Disease and Other Dementias, Seventh Edition. Mace, N. L & Rabins, P. V. (2021).

The Dynamics of Aging Families: A Handbook for Adult Children. Gibson, J.W. & Harley, B. B. (2006). Cambio Press.

Journals/Articles/Booklets

Ethical Standards for Social Workers' Use of Technology: Emerging Consensus. Reamer, F. (2018). <u>https://tinyurl.com/2addfdpn</u>

Eye on Ethics. Making Difficult Decisions. Reamer, F. (2002). Access 2024: http://tinyurl.com/j27sqe7

Goals to Care: How to Keep the Person in "Person-Centered". The National Committee for Quality Assurance. Accessed 2024: <u>http://tinyurl.com/j3j2rlc</u>

Introduction to Dementia and Intellectual/Developmental Disabilities. Accessed 2024: <u>https://tinyurl.com/mssc74j9</u>

Journal of the Aging Life Care Association. <u>www.aginglifecare.org</u>

Polypharmacy in Adults 60 and Older. Accessed 2024: <u>https://tinyurl.com/289hskpz</u>

Prescription Drug Use Among Adults Aged 40–79 in the United States and Canada. CDC. Accessed 2024. https://tinyurl.com/594jbf74

Websites

Aging Life Care Association: <u>www.aginglifecare.org</u>

Alzheimer's Association: <u>www.alz.org</u>

American Academy of Developmental Medicine and Dentistry. https://aadmd.org/

American Psychiatric Association https://www.psychiatry.org/

American Society on Aging <u>www.asaging.org</u>

Centers for Disease Control https://www.cdc.gov/

Centers for Medicare & Medicaid (CMS): www.cms.gov

Medicaid: https://www.medicaid.gov/

Medicare: <u>www.medicare.gov</u>

Mental Health America https://www.mhanational.org/bipoc

MS Association: <u>www.nationalmssociety.org</u>

NASW Standards for Case Management Practice: <u>www.socialworkers.org</u>

National Academy of Certified Care Managers - Code of Ethics & Standards of Practice: <u>www.naccm.net</u>
National Alliance on Mental Illness <u>https://www.nami.org/</u>
National Association of Social Workers: <u>www.socialworkers.org</u>
National Center on Elder Abuse <u>www.ncea.acl.gov</u>
National Guardianship Association: <u>www.guardianship.org</u>
National Institute on Aging: <u>www.nia.nih.gov</u>
National Low Income Housing Coalition <u>https://nlihc.org/</u>
Services and Advocacy for Gay, Lesbian, Bisexual & Transgender Elders (SAGE). www.sageusa.org
Small Business Association: <u>www.sba.gov</u>
Social Security Administration: <u>www.ssa.gov</u>
Substance Abuse and Mental Health Services Administration (SAMHSA): <u>www.samhsa.gov</u>
The Hartford Institute for Geriatric Nursing – Competencies/Best Practices https://tinyurl.com/5a4k9pt2
The Hartford Institute for Geriatric Nursing – TryThis: <u>https://tinyurl.com/4nj5cbws</u>
The Hartford Institute for Geriatric Nursing: <u>https://hign.org/</u>
The National Committee for Quality Assurance: <u>www.ncqa.org</u>
The Scan Foundation: <u>http://www.thescanfoundation.org/</u>
US Department of Housing and Urban Development <u>https://www.hud.gov/</u>
World Health Organization Social Determinates of Health https://tinyurl.com/2wh6r8f3

ONLINE PRACTICE TEST IN CARE MANAGEMENT

A practice test is available to provide candidates with a better understanding of what the actual certification examination is like. Each practice test consists of 50 questions, has a testing time of two hours, and is taken online available 24 hours a day/7 days a week. The practice test is developed according to the certification examination's test specifications (content outline).

After completing the online practice test, you will receive an instant score report showing overall test score as well as a score for each content area. The score report does not provide correct answers or indicate which questions were answered correctly or incorrectly. Once the practice test is scored, you cannot return to the test to review the questions. The results of the practice test should not be interpreted as a predictor of performance on the actual examination. The scores do not provide a valid or reliable indicator of how well you will perform on the actual examination.

The PTC Online Testing System does not demonstrate the testing software used during the certification examinations. Those who purchase the online practice test should be aware that they will use a different testing platform when they take certification examinations at designated proctored testing centers.

The online practice test is an optional tool candidates may use as they prepare for the certification examination. The practice test is not a requirement for certification eligibility, nor does it contribute in any way to success on the certification examination. There are many ways candidates should prepare for the certification examination. Candidates should use a variety of resources and consider their own education and experiences. Review the content outline and reference materials listed in the handbook for additional exam-related information. Since the practice test is NOT intended to be a study guide nor the sole source of preparation for the actual certification examination, candidates are NOT provided with the answer key, rationales for each question, nor notification of which specific items were answered correctly or incorrectly.

CONTENT INCLUDED IN THE ONLINE PRACTICE TEST IN CARE MANAGEMENT

Domain I. Assess and identify client strengths, needs, concerns, and preferences

Domain II. Establish goals and a plan of care

Domain III. Initiate, manage and monitor ongoing execution and outcomes of care plan

Domain IV. Promote and maintain professional standards in care management and in business practices

FEE: \$75, payable by credit card online at <u>www.ptcny.com</u>.

QUESTIONS: Call 212-356-0660.

PTC22012



VERIFICATION FORM for SUPERVISED CARE MANAGEMENT EXPERIENCE and DIRECT CLIENT EXPERIENCE

PLEASE TYPE OR PRINT CLEARLY | Questions? Call PTC at 212.356.0660

Candidates must upload a copy of their college degree along with completed verification form.

Your Name _

phone

email fax

SUPERVISED CARE MANAGEMENT EXPERIENCE Required for All Candidates

Please list paid, full-time care management experience gained after your degree was awarded - including 50 hours of supervision / consultation per year. Full-time employment is defined as a minimum of 35 hours per week. (Part-time employment can be used. Refer to the Handbook for a Part-Time to Full-Time Conversion Table.)

Supervision / consultation may include but is not limited to case conferences with supervisors or peers, performance appraisal, client record reviews, and consumer satisfaction data. Supervised care management work experience must begin after earning the degree applicant is using to qualify. NACCM will consider employment experiences within the last 10 years towards eligibility.

Option A requires one (1) year of paid, full-time, care management experience including 50 hours of supervision / consultation per year. Option B & C require two (2) years of paid, full-time, care management experience including 50 hours of supervision / consultation per year. Option D requires three (3) years of paid, full-time, care management experience including 50 hours of supervision / consultation per year.

Current Employment			
Agency/Company	Your Position/Title		
Agency/Company Address			
Dates of Employment: from MM/DD/YYYY	to MM/DD/YYYY		
Hours per week of care management employment during above dates:	_/week		
Hours per year of care management supervision / consultation during above dates:	hours/week = total	l hours/year	
*Supervisor's name & credential(s)	Title		
Supervisor's phoneemail		fax	
Agency/Company	Your Position/Title		
Agency/Company Address			
Dates of Employment: from MM/DD/YYYY	to MM/DD/YYYY		
Hours per week of care management employment during above dates:	_/week		
Hours per year of care management supervision / consultation during above dates:	hours/week = total	l hours/year	
*Supervisor's name & credential(s)	Title		
Supervisor's phone email		fax	
Agency/Company	Your Position/Title		
Agency/Company Address			
Dates of Employment: from MM/DD/YYYY	to MM/DD/YYYY		
Hours per week of care management employment during above dates:	_/week		
Hours per year of care management supervision / consultation during above dates:	hours/week =total	l hours/year	
*Supervisor's name & credential(s)	Title		
Supervisor's phone email		fax	

*If you are an independent practitioner, please provide the name of an individual who can attest to your professional consulting relationship.

VERIFICATION FORM (continued)

□ I perform/ed all content domains and tasks in these position(s) (see Candidate's Handbook for detailed list of tasks in each domain), including

Domain I – Assess and identify client strengths, needs, concerns and preferences

Domain II – Establish goals and plan of care

Domain III - Initiate, manage and monitor ongoing execution and outcomes of care plan

Domain IV - Promote and maintain professional standards in care management and in business practices

I have read and agree to adhere to the National Academy of Certified Care Managers Standards of Practice and Code of Ethics at naccm.net.

I hereby certify that all information on this form is accurate, truthful, and complete. I understand that false or misleading information, whether by inclusion or omission, will result in the rejection of my application. (Above boxes must be checked.)

Applicant's Signature

__Date_

DIRECT CLIENT EXPERIENCE Required for candidates using Options C & D only

Direct Client Experience includes working directly with clients, consumers, or patients in fields such as social work, nursing, mental health, counseling, human services, or care management. Your direct client experience is separate and distinct from Supervised Care Management Experience documented above.

Full-time employment is defined as a minimum of 35 hours per week. (Part-time employment can be used. Refer to the Handbook for a Part-Time to Full-Time Conversion Table.)

Option C requires one (1) year of full-time direct client experience in addition to required 2 years of supervised experience for a total of 3 years.

Option D requires one (1) year of full-time direct client experience in addition to required 3 years of supervised experience for a total of 4 years.

gency/CompanyYour Position/Title			
Agency/Company Address			
Dates of Employment: from MM/DD/YYYY	to	MM/DD/YYYY	
Hours per week of employment during above dates:			/week
Hours per week of Direct Client Contact/Interaction during	above dates:		
I performed the following tasks in this position: □ Conducted assessments	Assisted with long-term planning	Regularly monitored client situation	
 Recommended and/or coordinated services Provided support to client and/or others involved 	 Developed care plans Educated client about available resource 	s Advocated on behalf of client	
Supervisor's name & credential(s)	Titl	e	
Supervisor's phone	email	fax	
Agency/Company		/our Position/Title	
Agency/Company Address			
Dates of Employment: from MM/DD/YYYY	to	MM/DD/YYYY	
Hours per week of employment during above dates:			
Hours per week of Direct Client Contact/Interaction during	above dates:		
I performed the following tasks in this position:			
 Conducted assessments Recommended and/or coordinated services Provided support to client and/or others involved 	 Assisted with long-term planning Developed care plans Educated client about available resource 	Regularly monitored client situation Advocated on behalf of client S Other:	
Supervisor's name & credential(s)	Titl	e	
Supervisor's phone	email	fax	

□ I have read and agree to adhere to the National Academy of Certified Care Managers Standards of Practice and Code of Ethics at naccm.net.

I hereby certify that all information on this form is accurate, truthful, and complete. I understand that false or misleading information, whether by inclusion or omission, will result in the rejection of my application.