

American Board of Managed Care Nursing

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CANDIDATES GUIDE FOR CERTIFICATION IN MANAGED CARE NURSING

CERTIFIED MANAGED CARE NURSE (CMCN) DESIGNATION

DEVELOPED AND ADMINISTERED BY:
THE AMERICAN BOARD OF MANAGED CARE NURSING

WHAT IS THE AMERICAN BOARD OF MANAGED CARE NURSING?

The American Board of Managed Care Nursing (ABMCN) was formed in 1998 and is a non-profit 501(c) 6 organization. The ABMCN certification program offers nurses a national examination testing competence to deliver a defined set of behaviors related to patient-centered care to member populations of health plans. The ABMCN examination has been developed and reviewed by nurses with practical experience in managed care and peer acceptance as nurse leaders.

THE VALUE OF CERTIFICATION

Nurses are in an excellent position to take advantage of the changes occurring in the health care delivery system. The education and professional philosophy of nursing makes our profession especially qualified to make the changes needed to move a managed care organization from a paradigm of medicine to a paradigm of health. The certification process of ABMCN promotes excellence and professionalism in managed care nursing and recognizes individuals who demonstrate an acquired body of knowledge and expertise in managed care nursing through voluntary certification. Nurses who pass the examination may use the initials CMCN (Certified Managed Care Nurse) as part of their professional signatures.

PHILOSOPHY OF MANAGED CARE NURSING

Webster defines nursing as "a nurse's occupation or task; one who is educated and licensed to care for the sick or disabled in collaboration with other health care providers."

The managed care nurse is required to function in many different settings and roles. In contrast to the traditional role of the nurse to provide direct patient care at the bedside, the managed care nurse's role is to advocate for all patients enrolled in healthcare delivery systems, to administer benefits within the confines of the healthcare delivery system and to provide customer service for all of the nurse's encounters with members of the healthcare delivery system.

Managed care nurses develop and implement a variety of programs, which may include wellness, and prevention programs, disease management programs, quality management programs, and demand management programs. This enables the managed care nurse to foster a proactive approach that involves the patient in the management of his/her individual health care needs. By utilizing a self-healthcare approach, the goal of the patient is to have a better understanding of matters relating to his/her health, to maintain a more active life-style, and to have mental well-being.

The nurse's role in managed care moves along the continuum from direct patient care to administration. Employers of the near future will recruit nurses who understand the overall structure of the healthcare industry, who possess highly developed critical-thinking skills, and who bring to their positions a well-rounded understanding of the risks and benefits of every healthcare decision.

ELIGIBILITY REQUIREMENTS

LICENSURE

Current registered nurse license or a license in practical nursing in any American State, territory, or protectorate. Nurses who seek the designation of Certified Managed Care Nurse (CMCN) must meet an acceptable minimum level of basic knowledge of the following components:

1. Managed Care Overview
2. Healthcare Economics
3. Healthcare Management
4. Patient Issues

Applicants must qualify under any one of the following employment experiences.

1. One-year (12 months) full time employment experience as a Registered Nurse or Licensed Practical Nurse.
2. Two years (24 months) of acceptable employment as a Registered Nurse, or Licensed Practical Nurse providing direct or indirect care in an acute care facility, outpatient facility, skilled nursing facility, mental health facility, or other healthcare organization.
3. One year (12 months) acceptable case management employment experience.
4. For any applicant to be considered, the employment must be verified. An official job description signed by the employer/supervisor must be submitted to the ABMCN.

The certification will be renewed at three-year intervals beginning January 1st following the completion of the certification exam, if the nurse demonstrates on going professional development with proof of 25 CEU's, verification of current licensure as a Registered Nurse or Licensed Practical Nurse, and a \$55.00 licensing fee. Documentation of an approved program of continuing education must be submitted to the ABMCN.

COURSE WORK

Candidates can purchase the curriculum material from the American Association of Managed Care Nurses (AAMCN), a non-profit 501(c) 6 association with a mission to educate nurses on the core competencies of managed care. The AAMCN faculty have outstanding professional credentials and expertise, which complements the competencies, defined by the ABMCN. The ABMCN does not sponsor, endorse, or benefit financially from any AAMCN course work or materials used to prepare for the ABMCN board examination. Candidates may provide an affidavit that attests to completion of equivalent course work taken elsewhere.

SUGGESTED READING MATERIALS

The following reference materials are provided to help examination candidates. Please be aware that this reading list does not completely delineate the parameters of the examination. It is merely a suggested means for reviewing your personal education and practical experience in the field.

Managed Care: Made In America. Birenbaum, Arnold. Greenwood Publishing Group, Westport, CT. 1998

Essentials of Managed Health Care. Kongstvedt, Peter R. Second Edition. Aspen Publications, Gaithersburg, MD. 1997

The Managed Health Care Handbook. Kongstvedt, Peter R. Third Edition. Aspen Publications, Gaithersburg, MD. 1996

The Case Manager's Handbook. Mullahy, Catherine. Aspen Publishers, Inc., Gaithersburg, MD. 1998

Rehabilitation Nursing. Holman, Shirley. Second Edition. Rehabilitation Nursing; Mosby Yearbook, Inc., St. Louis, MO.

The Americans With Disabilities Act. Hablutzel, Nancy & McMahon, Brian T. GR Press/St. Lucie Press, Del Ray Beach, FL.

Inside Case Management. Howe, Rufus. Aspen Publishers, Gaithersburg, MD.

Outcome-Oriented Rehabilitation. Landrum, Pat Kitchell, Schmidt, Nancy D., & McLean, Jr. Alvin. Aspen Publishers, Gaithersburg, MD.

A Nurses Introduction to Managed Care American Association of Managed Care Nurses, 2002.

The Journal of Care Management. Mason Medical Communications, Inc., Fairfield, CT.

Workers' Compensation Managed Care. Capital Publication, Inc., Alexandria, VA .

Nursing Care Management. Powell, Suzanne K. Lippincott-Raven Publishers, Philadelphia, PA.

REGISTRATION & EXAMINATION FEE

To register send:

1. Registration fee of \$250
2. Completed official application form
3. Proctor agreement form
4. Copy of current nursing license
5. Current job description

EXAMINATION INFORMATION

The CMCN examination is offered through a proctor. Your supervisor, human resources or continuing education representative can proctor your exam.

Examination scores are confidential. A Pass/Fail notification will be forwarded to the candidates within eight weeks following the examination date.

The CMCN designation is strictly limited to those individuals who:

1. Have met all the criteria of the ABMCN, and have been officially notified of their certification by the ABMCN.
2. Have renewed their certification as required by the ABMCN.
3. Other individuals who represent themselves as being certified may be subject to legal action.
4. Candidates who receive a non-passing grade may retake the exam again with submittal of new application paperwork and examination fee.

HOW DO I GET AN APPLICATION?

Write, Phone, or Fax:

American Board of Managed Care Nursing

4435 Waterfront Drive, Suite 101

Glen Allen, Virginia 23060

Phone 804.527.1905

Fax 804.747.5316

keads@abmcn.org

CONTENT OF THE EXAMINATION

A condensed content outline of the certification examination is shown below.

SECTION ONE

MANAGED CARE OVERVIEW

1. Understand managed care and how it evolved
2. Identify factors driving increases in healthcare costs
3. Describe the practical application of federal laws affecting managed care, i.e. COBRA, TEFRA, and ERISA
4. Define terminology and acronyms dealing with managed care, contracting and insurance coverage
5. Differentiate between various organizational models known to managed care
6. Identify different types of managed care products

SECTION TWO

HEALTHCARE ECONOMICS

1. Explain the relationship between types of provider reimbursement
2. Describe challenges medicine and nursing have overcome, changes in the current healthcare delivery system and the implications for the future of nursing
3. Understand health economics principles for managed care organizations
4. Understand the concepts of the negotiation process
5. Define the trends currently impacting healthcare
6. Define individual's challenges for functioning in the future of healthcare

SECTION THREE

HEALTHCARE MANAGEMENT

1. Identify and define the multiple components of a utilization management program
2. Describe disease state management programs
3. Recognize quality management's impact on the cost of care
4. Understand the concept of case management and the case management delivery model
5. Identify basic quality improvement activities in a managed care setting
6. Recognize the current accreditation/regulatory bodies and understand the implications of accreditation/regulation and certification
7. Describe the content in a managed care report card and the IT systems used to gather data for it
8. Describe provider profiling and its effects on managed care
9. Identify the impact of informatics on managed care and the healthcare industry

SECTION FOUR
PATIENT ISSUES

1. Identify the critical factors impacting member benefits
2. Recognize the consumers perception of the effectiveness of managed care
3. Understand the managed care nurse's role
4. Describe the differences between principles, values, and ethics
5. Recognize the legal fundamentals, contractual and risk management issues and their effects on managed healthcare
6. Identify the grievance process and alternative dispute resolution
7. Understand the basics of malpractice action
8. Understand the implications of the nurse practice act

SECTION FIVE
SCENARIOS

Comprehension of essential skills necessary to understand job responsibility and accountability.

You must have the ability to apply the knowledge of managed care concepts in today's healthcare environment.

SAMPLE EXAMINATION QUESTIONS

The following questions are similar to those that **may** appear on the examination.

1. The primary purpose of a Worker's Compensation program is to:
 - a) Provide sure, prompt, reasonable income and medical benefits to insured workers, regardless of fault
 - b) Protect the employer against frivolous lawsuits
 - c) Assure the injured worker access to the legal system
 - d) Help establish a network of rehab providers
2. Under most long-term disability coverage's, which of the following is true?
 - a) Benefits can be terminated at some point when an individual can perform any occupation
 - b) Any Social Security Disability Income recipient is not eligible for LTD
 - c) Any Worker's Compensation recipient is not eligible for LTD
 - d) Any person with a disability and an earning capacity disability above the poverty line is eligible for Social Security Disability Income
3. The purchase of insurance by an insurer to assure adequate risk distribution is:
 - a) Subrogation
 - b) Reinsurance
 - c) Self-Insurance
 - d) Indemnification
4. A home health agency is considered to be reliable if:
 - a) The agency is large and well known
 - b) The agency has been around a long time
 - c) The agency is known to deliver consistently good care at a competitive price
 - d) It is a national agency
5. Military personnel and their families are covered for medical needs by the following:
 - a) HMO
 - b) TRICARE
 - c) PPO
 - d) EPO
6. COBRA is a federally-mandated program that:
 - a) Allows qualified individuals to take leave
 - b) Protects injured federal workers
 - c) Provides auto insurance for federal workers
 - d) Mandates the extension of medical plans after termination from a job for a period of time.

ANSWERS - 1. A 2. A 3. B 4. C 5. B 6. D