Certified Professional in Healthcare Risk Management

CANDIDATE HANDBOOK AND APPLICATION

Conducted by the American Hospital Association Certification Center
Effective March 2012
For questions regarding the certification programs, contact:

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155 N. Wacker Drive, Suite 400
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Phone: 312/422-3711
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For questions regarding the examination application and administration, contact:

**Applied Measurement Professionals, Inc. (AMP)**
18000 W. 105th Street
Olathe, KS 66061-7543
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Fax: 913/895-4651
Email: info@goAMP.com
Website: www.goAMP.com

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Copyright 2010 by the AHA Certification Center (rev. March 2012)
This Candidate Handbook provides information about the Certified Professional in Healthcare Risk Management (CPHRM) program, including the exam administration policy and process as well as the CPHRM Examination Application. Keep this Handbook until after the examination is completed. Additional copies of this Handbook may be obtained by downloading a copy from www.aha.org/certification. The most current version of the Candidate Handbook is posted here and supersedes any other version.

THE AHA-CC

The American Hospital Association Certification Center (AHA-CC) is a division of the American Hospital Association (AHA). Its mission is to create, facilitate and administer the healthcare industry’s premier certification programs.

The AHA-CC Board of Directors is charged with governance of Certification Programs conducted by the AHA-CC. Board members are appointed to represent AHA’s professional Certification Program stakeholders.

Each Certification Program in development or operation with the AHA-CC has a Certification Program Committee that serves as content expert, program resource, and consultant to the AHA-CC regarding program development, examination content, test development, test administration and evaluation. Members are appointed by the AHA-CC Board of Directors.

Statement of Nondiscrimination
The AHA-CC does not discriminate among candidates on the basis of age, gender, race, color, religion, national origin, disability or marital status.

AHA-CC CERTIFICATION PROGRAM EXAMINATIONS

The AHA-CC conducts certification examinations for programs in the following fields of health care:

- Facility Managers
- Constructors
- Environmental Services
- Materials and Resource Management
- Risk Management

The AHA-CC also provides contracted project management and quality assurance services to the American Organization of Nurse Executives (AONE) in support of its certification programs for nurse executives and nurse managers.

Each certification examination is designed to test a well-defined body of knowledge representative of professional practice in the discipline. Successful completion of a certification examination verifies broad-based knowledge in the discipline being tested. Certification examinations conducted by the AHA-CC are independent of each other. Each leads to a certification credential in a healthcare discipline. Content on each examination was defined by a body of experts.

Content of each examination was defined by a national role delineation study. The study involved surveying practitioners in the field to identify tasks that are performed routinely and considered important to competent practice. Each edition of a certification examination is developed through a combined effort of qualified subject matter experts and testing professionals, who construct the examination in accordance with the Examination Content Outline.

Testing Agency
The AHA-CC contracts with Applied Measurement Professionals, Inc. (AMP) to assist in the development, administration, scoring, score reporting and analysis of its CPHRM Examination.
CPHRM CERTIFICATION PROGRAM

The CPHRM certification program promotes healthcare risk management through certification of qualified individuals and the following program elements:

- Recognizing formally those individuals who meet the eligibility requirements of the AHA-CC and pass the examination
- Requiring certification renewal through continued personal and professional growth in the practice of healthcare risk management
- Providing a national standard of requisite knowledge required for certification; thereby assisting employers, the public and members of health professions in assessing healthcare risk managers

Definition of a Healthcare Risk Management Professional

The Healthcare Risk Management Professional’s primary duties include the prevention, reduction, and control of loss to the healthcare organization, its patients, visitors, volunteers, physicians, other healthcare professionals and employees. Regardless of the healthcare delivery system in which the individual works, the Healthcare Risk Management Professional interfaces with a number of healthcare professionals in the accomplishment of these objectives. Duties may include incident investigation and analysis, tracking, trending and evaluation, risk financing and claims management.

CPHRM Eligibility Requirements

Candidates meeting eligibility requirements and passing the CPHRM Examination attain the CPHRM designation. The AHA-CC reserves the right to verify eligibility information supplied by or on behalf of a candidate.

To be eligible for the Certified Professional in Healthcare Risk Management (CPHRM) Examination, a candidate must fulfill one (1) of the following requirements for education/healthcare experience and meet the requirement for risk management experience.

Education/Healthcare Experience

- Baccalaureate degree or higher from an accredited college or university plus five (5) years of experience in a healthcare setting or with a provider of services to the healthcare industry
- Associate degree or equivalent from an accredited college plus seven (7) years of experience in a healthcare setting or with a provider of services to the healthcare industry.
- High school diploma or equivalent plus nine (9) years of experience in a healthcare setting or with a provider of services to the healthcare industry.

Risk Management Experience

- 3,000 hours or 50 percent of full-time job duties within the last three years dedicated to healthcare risk management in a healthcare setting or with a provider of services (e.g. consultant, broker, or attorney) to the healthcare industry.

CPHRM EXAMINATION

The examination is structured as follows:

- Composed of 110 multiple-choice questions. A candidate’s score is based on 100 of these questions. Ten (10) items are “trial” or “pretest” questions that are interspersed throughout the examination.
- A candidate is allowed two (2) hours in which to complete the examination.
- The examination is based on the six (6) major content areas listed in the Content Outline.
  - Each content area is further defined in the Content Outline by a list of tasks representative of that job responsibility.
  - The number of examination questions devoted to each major content area is included in the Content Outline.
Each question on the examination is categorized by a cognitive level that a candidate would likely use to respond to that question. These categories include the following:

- Recall: The ability to recall or recognize specific information
- Application: The ability to comprehend, relate or apply knowledge to new or changing situations
- Analysis: The ability to analyze and synthesize information, determine solutions and/or evaluate the usefulness of a solution

**CPHRM Examination Content Outline**

For the CPHRM Examination Content Outline, refer to the following pages.
1. **Loss Prevention/Reduction**: 32 items (Recall: 6, Application: 19, Analysis: 7)

   A. Develop statistical and qualitative risk management reports.

   B. Develop and maintain communications and relationships with key departments and functions, including but not limited to:
      1. human resources.
      2. infection control.
      3. nursing.
      4. medical records.
      5. quality management.
      6. medical staff.
      7. patient relations.
      8. high risk clinical departments.
      9. bioethics.
     10. pharmacy.
     11. safety.
     12. security.
     13. credentialing.
     14. regulatory compliance.
     15. finance.
     16. privacy.
     17. legal.
     18. patient safety.
     19. case management.
     20. patient and family council.
     21. billing.
     22. public relations.
     23. medical library.
     24. education.

   C. Assess the current state of patient safety and staff awareness within the organization.

   D. Collaborate on proactive patient safety initiatives such as:
      1. teamwork.
      2. simulation.
      3. walk rounds.
      4. rapid response teams.
      5. Failure Mode and Effect Analysis (FMEA).
      6. Root Cause Analysis (RCA).
      7. Safety culture/just culture.

   E. Design, implement, and maintain risk management data collection and analysis systems including elements of:
      1. written incidents reports.
      2. referrals by staff, committees, or other departments.
      3. patient complaints and/or satisfaction surveys.
      4. referrals and reports from committees and departments.
      5. medical record requests.
      6. reports of Potential Compensatory Events (PCEs).
      7. device reporting and tracking logs.
      8. clinical indicators.
      9. security reports.
     10. regulatory inquiries.
     11. recall notices.
     12. loss runs.
F. Ensure that a product recall program exists.

G. Ensure that appropriate policies, procedures, and mechanisms exist to reflect current practice and are routinely updated to reflect relevant legislation and regulations.

H. Design, implement, and maintain educational programs on risk management and patient safety related topics for:
   1. governing body.
   2. medical staff.
   3. nursing staff and other clinical staff.
   4. non-clinical employees.
   5. administrative staff.
   6. house staff/students.

I. Implement a program for control of contractual risk by recommending/implementing modifications to address identified risks.

J. Communicate with key committees, including the governing body.

K. Ensure that a program exists in the organization to require non-employed staff members, vendors or contractors to maintain adequate insurance to cover the organization’s exposures.

L. Collaborate with public relations in the preparation of responses to the media/external inquiries regarding incidents/occurrences.

M. Promote appropriate procedures for retention, access, and destruction of medical records and other key business records.

N. Promote a culture of patient safety through education, policy development, and standardization of processes.

O. Oversee the investigation of accidents or circumstances that could lead to financial loss (e.g., professional, institutional, and general liability, product liability).

P. Conduct risk assessments to identify exposures related to:
   1. enterprise-wide risks.
   2. new and existing services.

Q. Participate in due diligence assessment for new services or delivery models, acquisitions, or construction.

R. Educate providers, staff, employees, patients and families on the role of patients and families in improving patient safety and reducing risk.

S. Coach physicians, leaders, managers, and staff on appropriate disclosure methods and processes.

T. Participate in critical incident debriefing.

U. Participate in the development of corrective action plans for problems uncovered by risk assessments, audits and investigations (e.g., sentinel events, reported events/incidents, FMEA and Root Cause Analysis).

V. Supervise follow-up to recommend improvements stemming from risk assessments, audits and investigations (e.g., sentinel events, reported events/incidents, FMEA and Root Cause Analysis).

2. Claims Management: 20 items (Recall: 8, Application: 12, Analysis: 0)
   A. Notify carriers of potential or actual claims.
   B. Direct claims management strategies and activities including:
      1. investigations.
      2. ongoing monitoring of defense activities.
      3. discovery requests/interrogatories.
      4. attendance at settlement conferences.
      5. preparation for mediation and arbitration hearings.
      6. preparation for trials.
      7. setting loss reserves.
C. Ensure that administration is kept informed of high exposure cases and aggregate claims experience, including its impact on the risk financing program.

D. Secure and evaluate all pertinent medical, billing, and other records related to individual liability claims.

E. Assess liability and probability of legal action for notification of insurance carriers.

F. Ensure chain-of-custody for all potential evidence related to individual liability claims.

G. Analyze professional liability historical loss experience.

H. Ensure legal case files are maintained in such a way to protect discoverability.

I. Communicate results of claims data analysis and risk management opportunities for inclusion in setting organizational priorities.

J. Manage the response to service of process and notify appropriate parties of such service.

3. Risk Financing: 6 items (Recall: 1, Application: 4, Analysis: 1)
   A. Maintain and coordinate exposure data for organization.
   B. Complete insurance applications and renewals.
   C. Develop comprehensive risk financing strategies to address the organization’s areas of exposure including:
      1. general liability (GL).
      2. professional liability (PL).
   D. Conduct ongoing monitoring/evaluation of risk financing program.
   E. Respond to risk management concerns about insurance coverage from organization personnel and staff members.

4. Regulatory/Accreditation Compliance: 19 items (Recall: 8, Application: 11, Analysis: 0)
   A. Promote compliance with state agencies governing the reporting of specific events through policy development, guidance, or education.
   B. Promote compliance with the requirements of the following federal acts/regulations through policy development, guidance, or education:
      1. Americans with Disabilities Act (ADA).
      2. Occupational Safety and Health Administration (OSHA).
      5. National Practitioner Data Bank (NPDB).
      6. Emergency Medical Treatment and Active Labor Act (EMTALA/COBRA).
      7. Safe Medical Device Act (SMDA).
      8. Health Care Quality Improvement Act (HCQIA).
   C. Promote compliance with state-specific legislation through policy development, guidance, or education.
   D. Promote compliance with federal and state laws and regulations governing patient confidentiality through policy development, guidance, or education including protected health information (PHI).
   E. Promote compliance with state reporting requirements through policy development, guidance, or education concerning:
      1. abuse of developmentally disabled patients.
      2. child abuse.
      3. domestic violence.
      4. elder abuse.
      5. employee sexual misconduct.
   F. Promote compliance with state reporting requirements governing violence in the workplace through policy development, guidance, or education.
G. Educate staff on regulatory issues related to risk management.

H. Promote compliance with state regulations regarding the investigation and resolution of patient complaints or grievances through policy development, guidance, or education.

I. Collaborate with other departments by preparing and conducting quality and/or risk assessments to maintain a constant state of accreditation readiness.

J. Promote compliance with regulations governing involuntary detention of patients through policy development, guidance, or education.

K. Provide ongoing consultation to other departments to promote compliance with accreditation standards.

L. Collaborate in the development of the organization’s regulatory compliance plan.

M. Promote compliance with The Joint Commission (TJC) Sentinel Event reporting requirements.

N. Promote compliance with private accrediting/certification organizations.

O. Assure compliance with The Joint Commission (TJC) Patient Safety Standards.

P. Develop responses to inquiries from regulatory and licensing agencies.

Q. Develop and implement policies in response to regulatory mandates from The Joint Commission.

R. Maintain awareness of patient safety activities occurring locally and nationally, related to:
   1. The Joint Commission (TJC).
   4. Institute for Healthcare Improvement (IHI).

S. Advise on questions related to patient self-determination and advance directives.

T. Ensure HIPAA compliant business partner agreements are in place and current for all insurers, attorneys and others involved in the claims process that will have access to PHI.

U. Ensure that processes are in place for compliance with federal and state community initiatives for emergency preparedness including natural, man-made, and biologic disaster readiness.

V. Ensure processes are in place to monitor and report emerging public health trends.

5. Operations: 15 items (Recall: 3, Application: 9, Analysis: 3)

   A. Supervise risk management staff.
   B. Develop/maintain department policies and procedures and modify as required.
   C. Prepare risk management department budgets.
   D. Develop risk management philosophy including the organizational response to errors.
   E. Coordinate risk management committees.
   F. Develop annual goals for risk management department.
   G. Train risk management staff.
   H. Develop risk management plan.
   I. Evaluate the effectiveness of risk management activities.
   J. Develop policies and procedures for acceptance of legal documents (e.g., summons, complaints, subpoenas, court orders).
   K. Support patient safety committee meetings by collecting and formulating relevant information to facilitate decision-making process.
   L. Participate in professional association activities.
   M. Annually assess risk management plan for effectiveness.
6. Bioethics: 8 items (Recall: 2, Application: 5, Analysis: 1)

A. Ensure processes and programs are in place to address:
   1. advance directives for conformance with ethics principles and applicable regulations.
   2. withdrawal of life support.
   3. Do Not Resuscitate Orders (DNR).
   4. futile care.
   5. informed consent and general consent.
   6. surrogate parent rights.
   7. culturally appropriate care.
   8. non-discriminatory care.

B. Provide risk management consultation for specific ethical dilemmas (cases).

C. Provide education/in-service for staff, patients, families, communities on patient's rights (e.g., end of life decisions).

D. Ensure organizational compliance with disclosure of unanticipated outcomes

E. Ensure programs that address provider and staff behavioral issues are culturally, legally and psychologically sound and non-discriminatory
Sample Examination Questions

1. Which of the following is NOT a valid reason for selecting a particular defense attorney or firm?
   A. referral from the hospital’s Board of Directors
   B. the firm’s track record in medical malpractice litigation
   C. the degree of responsiveness to, and cooperation with, the healthcare organization’s Risk Manager
   D. the firm’s compliance with procedural requirements included in the insured’s “defense attorney guidelines”

2. What type of primary malpractice insurance policy is necessary to purchase “tail”/prior acts coverage when changing carriers?
   A. excess
   B. umbrella
   C. occurrence
   D. claims made

3. Which insurance coverage is designed to protect individuals serving in a governance role from liability claims arising out of errors in judgment, breach of duty, and other wrongful acts?
   A. crime
   B. fiduciary
   C. directors’ and officers’
   D. Workers’ Compensation

4. Which of the following should be considered when establishing a risk management budget?
   1. salaries
   2. office supplies
   3. job description
   4. indemnity/expense
   A. 1, 2, and 3 only
   B. 1, 2, and 4 only
   C. 1, 3, and 4 only
   D. 2, 3, and 4 only

5. Which of the following would NOT be considered a sentinel event?
   A. suicide
   B. patient rape
   C. infant abduction
   D. medical record alteration

6. A Risk Manager receives interrogatories that include several questions to which he/she intends to ask the defense counsel to object. Which of the following objections, while appropriate, must be accompanied by detailed reasons?
   A. The interrogatory is inapplicable to the instant case.
   B. The interrogatory is unduly burdensome and time consuming.
   C. The information sought is in the possession of the party requesting it.
   D. The information sought is a matter of public record and equally applicable to both parties.

7. A systematic approach to ethics consultation and decision making will help ensure that risk management goals and ethical principles are served. A systematic approach includes all of the following EXCEPT
   A. verification of the facts.
   B. unanimous agreement among participants.
   C. documentation of the rationale for the decision.
   D. identification of the potential legal and ethical problems.

8. Which of the following is required as part of the sentinel event process of The Joint Commission?
   A. fish bone diagram of the causal factors
   B. pareto chart outlining the problems identified
   C. action plan listing the steps for improvement
   D. flowchart listing the responsibility of each of the departments involved

9. The Safe Medical Device Act requires that a device related death be reported to the
   A. Food and Drug Administration.
   B. Office of Management and Budget.
   C. Centers for Medicare and Medicaid Services.
   D. Occupational Safety and Health Administration.

10. Which of the following is a notice to the defendants named in a complaint indicating that an action has been filed against them, and that they are required to answer on a specified date and at a specified place?
    A. subpoena
    B. summons
    C. court order
    D. notice of intent

   **ANSWER KEY**
<table>
<thead>
<tr>
<th>Sample Examination Questions</th>
<th>1.</th>
<th>2.</th>
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<td>2. What type of primary malpractice insurance policy is necessary to purchase “tail”/prior acts coverage when changing carriers?</td>
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<td>3. Which insurance coverage is designed to protect individuals serving in a governance role from liability claims arising out of errors in judgment, breach of duty, and other wrongful acts?</td>
<td>C</td>
<td>A</td>
<td>D</td>
<td>B</td>
<td>C</td>
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<td>4. Which of the following should be considered when establishing a risk management budget?</td>
<td>D</td>
<td>B</td>
<td>C</td>
<td>A</td>
<td>D</td>
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<td>5. Which of the following would NOT be considered a sentinel event?</td>
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EXAMINATION PREPARATION

The method of preparation and amount of time spent preparing for the exams can be driven by the candidate’s preferred study style, level of professional experience or academic background. Some methods of preparation may include but not be limited to the following ways.

Review the Content
Candidates who have passed AHA-CC certification examinations report that study should begin by reviewing the Examination Content Outline. Review the content categories and related tasks. Identify and focus review on tasks that you do not perform regularly or with which you are not familiar. Remember that all questions in the CPHRM Examination are job-related/experience-based and test the application and analysis of information, not just the recall of isolated facts.

Complete the Self-Assessment Examination (SAE)
A Self-Assessment Examination (SAE) for the CPHRM Examination is an online tool created by the AHA Certification Center to simulate the CPHRM Examination. This tool is available for purchase at www.aha.org/certification.

The 100-question online practice examination was developed using the same procedures as the examination, and conforms to examination specifications in content, cognitive levels, format and difficulty. Feedback reports from the SAE provide an opportunity to evaluate and remedy less-than-desirable performance before taking the CPHRM Examination. The questions presented in the SAE are different from the questions contained on the certification examination.

Use Other Study Resources
The AHA-CC recommends that review for the CPHRM Examination focus on references and programs that cover the information summarized in the CPHRM Examination Content Outline. It should not be inferred that questions in the examination are selected from any single reference or set of references, or that study from specific references guarantees a passing score on the examination. For information about references, study guides and review sessions offered by the American Society for Healthcare Risk Management (ASHRM), visit www.ashrm.org.

EXAMINATION ADMINISTRATION

The CPHRM Examination is administered in the following ways:

- On computers at AMP Assessment Centers
- During special administrations at conferences, meetings or other specially-arranged sessions
- Outside of the U.S. on request and for an additional fee

In accordance with the ADA, special arrangements can be made for candidates with disabilities.

Computer Administration at AMP Assessment Centers
The primary mode of delivery of the CPHRM Examination is via computer at over 170 AMP Assessment Centers geographically distributed throughout the United States and typically located in H&R Block offices. For assessment Center locations, detailed maps and directions, go to www.aha.org/certification, click on “CPHRM” and then on “Testing Centers.”

For computer administrations at AMP Assessment Centers, a candidate who meets eligibility requirements for the examination may submit an application and fee at any time. A candidate must make an appointment for testing and take the examination within ninety (90) days from confirmation of eligibility from AMP. The examination is administered by appointment only Monday through Saturday at 9:00 a.m. and 1:30 p.m. Candidates are scheduled on a first-come, first-served basis.
If AMP is contacted by 3:00 p.m. CST Time on...
Depending upon availability, the examination may be scheduled as early as…

<table>
<thead>
<tr>
<th>Monday</th>
<th>Wednesday</th>
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<td>Thursday</td>
<td>Monday</td>
</tr>
<tr>
<td>Friday</td>
<td>Tuesday</td>
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</table>

The examination is not offered on the following holidays.

- New Year’s Day
- Martin Luther King, Jr. Day
- Presidents’ Day
- Good Friday
- Memorial Day
- Independence Day (July 4)
- Labor Day
- Columbus Day
- Veterans’ Day
- Thanksgiving Day (and the following Friday)
- Christmas Eve Day
- Christmas Day
- New Year’s Eve Day

**Special Administration – Laptop or Paper/Pencil**

The CPHRM Examination may be offered on laptop or in paper-and-pencil format during conferences or meetings. A candidate who meets eligibility requirements and submits an application and fee for receipt by the posted deadline is allowed to test. Online application is not available for special administrations. Dates of special administrations and deadlines for receipt of applications are posted on [www.aha.org/certification](http://www.aha.org/certification).

**International Testing**

Candidates who are eligible for the CPHRM Examination and wish to take the test outside of the U.S. may be accommodated by submitting a [Request for International Examination Administration form](http://www.aha.org/certification). To obtain the form, go to [www.aha.org/certification](http://www.aha.org/certification) at the bottom of page under What’s New. Please note that an additional fee may apply.

**Special Arrangements for Candidates with Disabilities**

The AHA-CC complies with the Americans with Disabilities Act (ADA) and strives to ensure that no individual with a disability is deprived of the opportunity to take the examination solely by reason of that disability. Through its agents, the AHA-CC will provide reasonable accommodation for a candidate with a disability who requests accommodation.

AMP Assessment Centers are equipped with **Telecommunication Devices for the Deaf (TDD)** to assist deaf and hearing-impaired candidates. TDD calling is available 8:30 a.m. to 5:00 p.m. (CST) Monday through Friday at 913/895-4637. This TDD phone option is for individuals equipped with compatible TDD machinery. Additionally, **wheelchair access** is available at all AMP Assessment Centers.

A candidate with a visual, sensory or physical disability that prevents taking the examination under standard conditions may request special accommodations and arrangements. For either a computer or a special administration of an exam, complete the Request for Special Examination Accommodations form included in this Handbook and submit it with an application and fee at least 45 days prior to the examination date desired.
ADHERING TO PROFESSIONAL STANDARDS OF CONDUCT

The AHA-CC is responsible to its candidates, certificants, employers, the profession and the public for ensuring the integrity of all processes and products of its Certification Programs. As such, the AHA-CC requires adherence to these *Professional Standards of Conduct* by all who have achieved certification through successful completion of its programs. A candidate’s signature on an application for examination attests to ongoing agreement to adhere to the following *Professional Standards of Conduct*.

**Professional Standards of Conduct.** A certificant who is awarded certification by the AHA Certification Center agrees to conduct himself/herself in an ethical and professional manner. This includes demonstrating practice-related behavior that is indicative of professional integrity. By accepting certification, the certificant agrees to the following:

- Maintain professional competence
- Demonstrate work behavior that exemplifies ability to perform safely, competently and with good judgment
- Conduct professional activities with honesty and integrity
- Avoid discriminating against any individual based on age, gender, race, color, religion, national origin, disability or marital status
- Avoid conflicts of interest
- Abide by the laws, rules and regulations of duly authorized agencies regulating the profession
- Abide by rules and regulations governing programs conducted by the AHA Certification Center

**Infraction of the Professional Standards of Conduct** is misconduct for which granting of a certification or renewal of a certification may be delayed or denied, or for which a certification may be revoked by the AHA Certification Center.

**Reporting Violations.** To protect the national credentials and to ensure responsible practice by its certificants, the AHA Certification Center depends upon its candidates and certificants, professionals, employers, regulatory agencies and the public to report incidents that may be in violation of these *Professional Standards of Conduct*. A certificant who has violated these *Standards* should voluntarily surrender his/her certification.

Written reports of infraction of these *Standards* may be sent to: President, AHA Certification Center, 155 N. Wacker Drive, Suite 400, Chicago, IL 60606. Only signed, written communication will be considered.

The AHA Certification Center will become involved only in matters that can be factually determined, and commits to handling any situation as fairly and expeditiously as possible. During its investigation and decision, the AHA Certification Center will protect the confidentiality of those who provide information to every possible extent. The named individual will be afforded every opportunity to respond in a professional and legally defensible manner, in accord with policies established by the AHA Certification Center.
EXAMINATION APPLICATION AND SCHEDULING PROCESS

Examination Application Fee Schedule
After fulfilling the eligibility requirements, a candidate may apply to AMP for the CPHRM Examination in one of the following ways.

- Online Application (available at www.goamp.com; requires credit card payment for fees.)
- Paper Application (included in this Handbook)

Documentation of eligibility does not need to be submitted with an Examination Application. The AHA-CC reserves the right to verify information supplied by or on behalf of a candidate. If selected for an audit, the candidate will be asked to submit documentation as proof of meeting the eligibility requirements.

To apply for the CPHRM exam, a candidate must submit the appropriate fee (see below) with a complete Examination Application to AMP.

<table>
<thead>
<tr>
<th>Membership Category</th>
<th>Exam Fee</th>
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<tbody>
<tr>
<td>Member of ASHRM or other AHA Personal Membership Group</td>
<td>$275</td>
</tr>
<tr>
<td>Nonmember</td>
<td>$425</td>
</tr>
</tbody>
</table>

- Payment may be made by credit card (VISA, MasterCard, American Express or Discover) or by company check, cashier’s check or money order made payable to AMP. Cash and personal checks are not accepted.
- Exam-related fees are nonrefundable.
- Up to two (2) business days prior to a scheduled administration, the application may be transferred to a future exam date by requesting AMP to reschedule a new exam date. The exam date may be rescheduled once without incurring an additional fee. This date must be within 90 days of AMP confirming receipt of your exam application. Additional rescheduling of an exam date is subject to a $100 rescheduling fee.
- Credit card transactions that are declined are subject to a $25 handling fee. A certified check or money order for the amount due, including the handling fee, must be submitted to AMP to cover declined credit card transaction.
- Candidates who fail an exam and apply to retake the exam must pay the full exam fee as listed above.

Online Application and Scheduling
For computer administrations at AMP Assessment Centers only
Complete the application and scheduling process in one online session. Visit www.aha.org/certification, click on “CPHRM,” click on “Online Application and Scheduling”, and then follow the online instructions.

If you are a current member of an AHA Personal Membership Group (PMG), you are eligible for the reduced AHA member rate for CPHRM Examination fee. Click on “Member,” and enter your membership number, name and address exactly as they appear in AHA’s membership database. Your preferred mailing and email addresses designated in AHA’s membership database are used for all records and communications. For information on your membership record, please contact ASHRM at 312/422-3980 or AHA's Member Service Center at 312/422-2765.

After completing the application and submitting credit card payment information (VISA, MasterCard, American Express, Discover), eligibility is confirmed or denied, and you are prompted to schedule an examination appointment or supply additional eligibility information, respectively. You must schedule an exam date that is within 90 days of AMP confirming receipt of your exam application.

Paper Application
For all administrations
Complete and submit to AMP an application with the appropriate fee. You may complete the paper application included in this Handbook or obtained by one of the following ways:

- Downloading copy from www.aha.org/certification
- Contacting Applied Measurement Professionals, Inc. (AMP) at 888/519-9901

An incomplete Examination Application will be returned to the candidate along with any fee submitted minus a $50 processing fee. An application is considered complete only if all of the following conditions are met:
- Information provided is legible and accurate
- All of the following required information is provided:
  - Personal Information
  - Examination Type. For a special domestic administration, list the scheduled date. Administration
    and application deadline dates are posted on www.aha.org/certification.
  - Application Status
  - Membership Status. Eligibility for the Member rate of the Examination Application fee requires
    recording your membership number, name, and address exactly as they appear in AHA’s
    membership database. For information on your member record, contact ASHRM at 312/422-3980
    or AHA’s Member Service Center at 312/422-2765.
  - Method of payment for the applicable fee
  - Demographic information
  - Signature
- The candidate is eligible for the examination and can provide evidence if requested to do so
- Appropriate fee accompanies the application (credit card, company check, cashier’s check or money
  order)

If special accommodations are required, complete the Request for Special Examination Accommodations
form included in this Handbook and submit with the exam application and fee to AMP at least 45 days prior to
the desired testing date.

Application Processing and Examination Scheduling
Within approximately two (2) weeks of receiving the application, AMP processes it, confirms the candidate’s
eligibility, and sends an e-mail and postcard confirmation notice with a toll-free phone number and website
address at which a testing appointment can be scheduled. For special administrations, this notice reports
the date, location and check-in time for the examination. If a confirmation notice is not received within
four weeks of mailing your application, contact AMP at 888/519-9901.

When scheduling an examination at an AMP Assessment Center, be prepared to confirm a location and a
preferred date and time for testing. If you are an AHA Personal Membership Group (PMG) member, you must
provide your member number to AMP. This will be your identification number. If you are not a member of an
AHA PMG, please indicate such and AMP will assign a unique identification number.

For a computer administration at an AMP Assessment Center, a candidate’s application is valid for 90 days
from the date AMP confirms receipt of the application. The candidate must schedule an appointment and take
the examination within this 90-day period. A candidate who fails to schedule an appointment within the 90-day
period forfeits the application and all fees paid to take the examination. A complete application and full
examination fee are required to reapply for examination.

A candidate is allowed to take only the examination for which application is made and confirmation from AMP
is received. Unscheduled candidates (walk-ins) are not allowed to take a test.

Rescheduling or Cancelling an Examination
Although examination application fees are nonrefundable, a candidate who is unable to test has the following
options to reschedule an examination:
- A candidate may reschedule the examination once at no charge by calling AMP at 888/519-9901 at
  least two (2) business days prior to a scheduled administration date. The exam must be rescheduled
  within 90 days of the originally scheduled exam date.
- A candidate may reschedule a second time by submitting to AMP a written request including their
  name, address, identification number and the $100 rescheduling fee. A new application is not
  required. The exam must be rescheduled within 90 days of the originally scheduled exam date. For
  payment by credit card, the credit card number, and expiration date must be included. A new exam
  application is not required.
- A candidate who reschedules an exam after the 90-day period forfeits the application and all fees
  paid to take the exam. A new, complete application and full exam fee are required to reapply for exam.
- A candidate who cancels an exam after confirmation of eligibility is received from AMP forfeits the
  application and all fees paid to take the exam. A new, complete application and full exam fee are
  required to reapply for exam.
ON THE DAY OF THE EXAMINATION

Failing to Report for the Examination
A candidate who fails to report for a scheduled examination has the following two (2) options:

- Reschedule the exam for a new date that is within 90 days from the originally scheduled testing date and remit the $100 rescheduling fee. To schedule a new appointment for the exam, the candidate must submit to AMP a written request including their name, address, identification number and rescheduling fee. For payment by credit card, the credit card number, and expiration date must be included. A new examination application is not required.
- Reschedule the exam date for a date that is beyond the 90-day period and forfeit the application and all fees paid to take the exam. A complete application and full exam fee are required to reapply for the exam.

Reporting for the Examination
Bring with you the confirmation notice provided by AMP. It contains the unique identification number required to take the test and is required for admission to the testing room.

For a computer administration, report to the Assessment Center no later than the scheduled testing time. After entering the H&R Block office, follow the signs indicating AMP Assessment Center Check-In.

For a special administration (laptop or paper and pencil), report to the designated testing room at the time indicated on the confirmation notice. The examination will begin after all scheduled candidates are checked-in and seated. Follow the signs provided in the hotel/convention center to locate the testing room.

A candidate who arrives more than fifteen (15) minutes after the scheduled testing time is not admitted.

- A candidate who is not admitted due to late arrival must schedule a new appointment for a computer administered examination at an AMP Assessment Center and remit a $100 rescheduling fee. To reschedule, the candidate must call AMP at 888/519-9901, request a new exam date that is within 90 days of the originally scheduled examination session, and provide credit card information for the $100 rescheduling fee payment. A new application is not required.
- A candidate who does not reschedule an examination session that falls within the 90-day period forfeits the application and all fees paid to take the examination. A complete application and full examination fee are required to reapply for examination.

On-site Security
The AHA-CC and AMP maintain exam administration and security standards that are designed to assure that all candidates are provided the same opportunity to demonstrate their abilities. The testing environment at AMP testing centers is continuously monitored by audio and video surveillance equipment or exam personnel.

Identity Verification
To gain admission to the Assessment Center or a testing room, the candidate must present two (2) forms of identification, one with a current photograph. Both forms of identification must be current and include the candidate’s current name and signature. The candidate is required to sign a roster for verification of identity. A candidate without proper identification is not permitted to test.

- Acceptable forms of photo identification include a current driver’s license with photograph, current state identification card with photograph, current passport, or current military identification card with photograph.
- Employment ID cards, student ID cards and temporary identification cards are NOT acceptable as primary identification, but may be used as secondary identification.
- Secondary identification must be current and verify the candidate’s name and signature.
**Inclement Weather or Emergency**
In the event of inclement weather or unforeseen emergencies on the day of examination, the AHA-CC, in concert with AMP, will determine whether circumstances warrant the cancellation and subsequent rescheduling of an examination. If testing personnel are able to conduct business, the examination usually proceeds as scheduled.

Every attempt is made to administer an examination as scheduled; however, should an examination be canceled, the scheduled candidate will receive notification following the examination regarding a rescheduled examination date or reapplication procedures. In the case of cancellation, no additional fee is required to test.

For computer administrations at AMP Assessment Centers, candidates may visit AMP’s website at [www.goAMP.com](http://www.goAMP.com) prior to the examination to determine if any Assessment Centers have been closed.

In the event of a personal emergency on the day of examination, a candidate may request consideration of rescheduling the examination without additional fee by contacting the AHA-CC in writing within 30 days of the scheduled testing session. A description of the emergency and supporting documentation are required. Rescheduling without additional fee will be considered on a case-by-case basis.

**TAKING THE EXAMINATION**
After identity of the candidate has been verified and his/her calculator has been approved, the candidate is directed to a testing carrel for a computer administration or an assigned seat for a special administration. For computer-based testing, including laptop administrations, each candidate is provided one sheet of scratch paper for calculations that must be returned to the examination proctor at the completion of testing.

For a *paper-and-pencil administration*, the candidate is provided oral and written instructions about the exam administration process.

For a *computer administration at an AMP Assessment Center or a laptop administration*, the candidate is provided instructions on-screen. First, the candidate is instructed to enter his/her unique identification number. Then, the candidate’s photograph is taken and remains on-screen throughout the examination session. Prior to attempting the examination, the candidate is provided a short tutorial on using the software to take the examination. Tutorial time is NOT counted as part of the two hours allowed for the examination. Only after a candidate is comfortable with the software does the examination begin.

The *computer monitors the time spent on the examination*. The examination terminates at the two-hour mark. Clicking on the TIME button in the lower right portion of the screen or selecting the TIME key reveals a digital clock that indicates the time remaining. The TIME feature may also be turned off during the exam.

**Only one examination question is presented at a time**. The question number appears in the lower right portion of the screen. The entire examination question appears on-screen (stem and four options labeled A, B, C and D). Select an answer either by entering the letter of the option (A, B, C or D) or using the mouse to click on the option. The letter of the selected option appears in the window in the lower left portion of the screen. To change an answer, enter a different option by pressing the A, B, C or D key or by clicking on the option using the mouse. An answer may be changed multiple times.

**To move to the next question**, click on the forward arrow (>) in the lower right corner of the screen or select the NEXT key. This action allows the candidate to move forward through the examination question by question. To review a question or questions, click the backward arrow (<) or use the left arrow key to move backward through the examination.

**An examination question may be left unanswered for return later in the testing session**. Questions may also be bookmarked for later review by clicking in the blank square to the right of the Time button. Click on the hand icon or press the NEXT key to advance to the next unanswered or bookmarked question on the examination. To identify all unanswered or bookmarked questions, repeatedly click on the hand icon or press the NEXT key.

When the examination is completed, the number of examination questions answered is reported. If fewer than 110 questions were answered and time remains, return to the examination and answer the remaining questions. Be sure to answer each examination question before ending the examination. There is no penalty for guessing.
Candidates may provide comments about a test item. Comments will be reviewed, but individual responses will not be provided.

- For a **computer administration**, online comments may be provided for any question by clicking on the button displaying an exclamation point (!) to the left of the TIME button. This opens a dialogue box where comments may be entered.
- For a **paper-and-pencil administration**, comments may be provided on the answer sheet on the day of the examination.

**Rules for Examination**

All exam candidates must comply with the following rules during the exam administration:

1. No personal items (including watches, hats and coats), valuables or weapons should be brought into the testing room. Only keys, wallets and items required for medical needs are permitted. Books, computers, or other reference materials are strictly prohibited. If personal items are observed in the testing room after the examination is started, the exam administration will be forfeited. AMP is not responsible for items left in the reception area.
2. Pencils will be provided during check-in. No personal writing instruments are allowed in the testing room.
3. Examinations are proprietary. Exam questions may not be recorded or shared with any individual in any manner. No cameras, notes, tape recorders, Personal Digital Assistants (PDAs), pagers, cellular phones or other recording devices are allowed in the testing room. Possession of a cellular phone or other electronic devices is strictly prohibited and will result in dismissal from the examination.
4. Eating, drinking and smoking will not be permitted in the testing room.
5. No documents or notes of any kind may be removed from the testing room. Each candidate will be provided one sheet of scratch paper that must be returned to the proctor at the completion of testing.
6. No questions concerning the content of the examination may be asked of anyone during the exam.
7. Permission from the exam proctor is required to leave the testing room during the exam. No additional time is granted to compensate for time lost.
8. No guests, visitors or family members are allowed in the testing room or reception areas.

Candidates observed engaging in any of the following conduct during the exam may be dismissed from the exam session, their score on the exam voided and the exam fees forfeited. Evidence of misconduct is reviewed by the Appeal Board of the AHA-CC to determine whether the candidate will be allowed to reapply for examination. If re-examination is granted, a complete exam application and full examination fee are required.

- Gaining unauthorized admission to the examination
- Creating a disturbance, being abusive or otherwise uncooperative
- Displaying and/or using electronic communications equipment including but not limited to pagers, cellular phones and PDAs
- Talking or participating in conversation with other examination candidates
- Giving or receiving help or being suspected of doing so
- Leaving the Assessment Center during the examination
- Attempting to record examination questions or making notes
- Attempting to take the examination for someone else
- Having possession of personal belongings
- Using notes, books or other aids without it being noted on the roster
- Attempting to remove examination materials or notes from the testing room
Copyrighted Examination Questions
All examination questions are the copyrighted property of the AHA-CC. It is forbidden under federal copyright law to copy, reproduce, record, distribute or display these examination questions by any means, in whole or in part. Doing so may result in severe civil and criminal penalties.

FOLLOWING THE EXAMINATION

Score Reports
Score reports are issued by AMP, on behalf of the AHA-CC. Scores are reported in written form only, in person or by U.S. mail. Scores are not reported over the telephone, by electronic mail or by facsimile.

- A candidate who takes the examination in paper-and-pencil format receives his/her score report from AMP by mail approximately five weeks after the examination.
- A candidate who takes the examination on a computer at an AMP Assessment Center or on laptop receives his/her score report before leaving the testing center except when the examination program is in a provisional score report mode.

The score report indicates a “Pass” or “Fail”, which is determined by the raw score on the total examination. The score report also includes raw scores for each of the major categories of the Examination Content Outline. A raw score is the number of questions answered correctly. Even though the examination consists of 110 questions, the score is based on 100 questions. Ten questions are “pretest” questions and do not impact the candidate’s score. The minimum passing score for the examination is posted on www.aha.org/certification.

Recognition of certification and information about certification renewal are issued from the AHA-CC within six (6) weeks of successfully completing the examination. This package is mailed to the address provided on the examination application.

How the passing score is set
The methodology used to set the initial minimum passing score is the Angoff method in which expert judges estimate the passing probability of each question on the examination. These ratings are averaged to determine the preliminary minimum passing score (i.e., the number of correctly answered questions required to pass the examination). This method takes into account the difficulty of the examination. The preliminary minimum passing score is validated by the performance of candidates. The passing standard is applied consistently across all candidates who take the same form of the examination.

When new forms of the examination are introduced, a certain number of examination questions in the various content areas are replaced by new examination questions. These changes may cause one form of the examination to be slightly easier or harder than another form. To adjust for these differences in difficulty, a procedure called “equating” is used. For equated examinations that have different passing scores, the equating process helps ensure that the levels of examinee knowledge are equivalent on the various examination forms.

Passing the Examination
A candidate who passes the CPHRM Examination is awarded the Certified Professional in Healthcare Risk Management (CPHRM) credential. Approximately four (4) to six (6) weeks after the candidate passes an examination, the AHA-CC mails to the candidate a certificate of recognition, a pin and information about certification renewal requirements. The name on the certificate and the address to which the package is mailed is based on information the candidate’s membership record. It is the candidate’s responsibility to keep current this information.

The AHA-CC, in concert with the professional membership society, reserves the right to recognize publicly any candidate who has successfully completed the CPHRM Examination. Recognition is awarded so as not to embarrass any candidate who is not successful in achieving certification.

Name, address, telephone number and email address of a candidate who passes the Examination will be shared with the professional membership society. Scores are never reported. If you do NOT wish to have your personal information shared, please opt out by contacting the AHA-CC in writing via e-mail at certification@aha.org or fax at 312/422-4575.
**Failing the Examination**

If a candidate does not pass an examination, the score report includes a shortened application form to apply for retaking the exam.

- To schedule a *retake of the examination*, a candidate may apply by using the online application and scheduling feature on [www.aha.org/certification](http://www.aha.org/certification) or by submitting the re-application form included with the score report. To use this shortened application form, the complete application and full examination fee must be submitted and an exam scheduled within the 90-day period following the failed examination.

- A candidate who applies to retake the examination after 90 days following the failed examination date must submit a complete application and full examination fee.

There is no limit to the number of times an individual may take the CPHRM Examination. Every retake requires submitting an examination application and the full exam fee.

**Scores Cancelled by the AHA-CC**

The AHA-CC and AMP are responsible for maintaining the integrity of the scores reported. On occasion, occurrences such as computer malfunction or misconduct by a candidate may cause a score to be suspect. The AHA-CC is committed to rectifying such discrepancies as expeditiously as possible. The AHA-CC may void examination results if, upon investigation, violation of CPHRM regulations is discovered.

**Score Confidentiality**

Information about a candidate for testing or renewal of certification and examination results is considered confidential; however, the AHA-CC reserves the right to use information supplied by or on behalf of a candidate in the conduct of research. Studies and reports concerning candidates contain no information identifiable with any candidate, unless authorized by the candidate.

Demographic information about a candidate is shared only when beneficial to the candidate. Scores are never reported to anyone other than the candidate, unless the candidate directs such a request in writing.

**Administrative Matters**

**Duplicate score report**

A candidate may purchase additional copies of the score report for a fee of $25 per copy. The request must be submitted in writing to AMP within twelve (12) months after the examination is completed and must include the candidate’s name, unique identification number, mailing address, telephone number, date of examination and examination taken, as well as the $25 fee payable to AMP. After receipt of the request, the duplicate score report will be mailed within three (3) weeks.

**Name and address change**

Certificants are responsible for keeping current all contact information. The AHA-CC is not responsible for communication not received due to incorrect contact information. To update any contact information, please contact ASHRM at 312/422-3980 or the AHA Member Service Center at 312/422-2765.

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**RENEWAL OF CERTIFICATION**

Achieving certification is an indication of mastery of a well-defined body of knowledge at a point in time. Periodic renewal of the certification is required to maintain certified status and to demonstrate ongoing commitment to remain current in the field. Initial certification or renewal of certification is valid for three (3) years.

Candidates who successfully complete the examination are provided information about certification renewal requirements in a certification package sent by the AHA-CC. **The Certification Renewal Application must be submitted 30 days prior to the expiration date** listed on the certificate.

The AHA-CC e-mails notices to certificants of their pending certification expiration. Certificants are responsible for keeping their contact information accurate. The AHA-CC is not responsible for communications not received due to incorrect contact information in a certificant’s record.
A certificant may renew the CPHRM credential through one of the following two ways:

- **Successful re-examination.** To renew this way, successfully pass the CPHRM certification exam within one (1) year prior to expiration of your certification (subject to usual fees and provisions for testing) and submit with the Certification Renewal Application a copy of your passing CPHRM score report. An additional Certification Renewal Application fee is not required if a candidate selects this way to renew the designation.

- **Completion of 45 contact hours of continuing professional education** over the three (3)-year period and payment of the renewal fee. To renew this way, submit a complete Certification Renewal Application with the appropriate fee and report all eligible continuing professional education activities that you completed during your renewal period. Eligible activities include attending or teaching academic courses, completing on-line course, attending professional organization conferences and completing AHA-CC Self Assessment Examinations, among other activities. Some activities have limitation on maximum allowable hours. Refer to the current Certification Renewal Application for a description of eligible activities and other provisions for renewing your certification.

Certification Renewal Application processing requires four (4) to six (6) weeks. Certificants who meet the renewal requirements receive in the mail (at the address in their membership record) a new certificate of recognition listing the new certification expiration date, as well as information about renewing the certification. Certificants are responsible for keeping current contact information their membership record.

**Failing to Renew**
A certificant who fails to renew his/her certification will receive written notification that he/she is no longer considered certified and may not use the CPHRM credential in professional communications including but not limited to letterhead, stationery, business cards, directory listings and signatures. To regain certification, the individual must retake and pass the CPHRM Examination (subject to the usual fees and provisions for testing).

**APPEALS**
A candidate who believes he/she was unjustly denied eligibility for examination, who challenges results of an examination or who believes he/she was unjustly denied renewal of certification may request reconsideration of the decision by submitting a written appeal to the AHA Certification Center, 155 N. Wacker Drive, Suite 400, Chicago, IL 60606. The candidate for certification or renewal of certification must provide convincing evidence that a severe disadvantage was afforded the candidate during processing of an application for examination or renewal of certification or prior to or during administration of an examination. The appeal must be made within 45 days of receipt of a score report or any other official correspondence related to certification or renewal of certification from the AHA-CC or its agents. The written appeal must also indicate the specific relief requested. The appealing candidate is required to submit a $100 fee (Payable to the AHA-CC) with the written appeal. The fee will be refunded to the candidate if deemed justified through action of the Appeal Board. For additional regulations related to the appeal process, contact the AHA-CC.

**Checklist for becoming certified**
- Read the CPHRM Candidate Handbook. Use the Examination Content Outline to focus study efforts.
- Apply for the examination by one of the following two ways:
  - Mail or fax the complete Examination Application to AMP as directed on the form. Include the exam fee, sign the application, and submit both pages of the application. When confirmation of eligibility is received from AMP, make an appointment to take the examination.
  - Apply online for the examination and schedule an appointment to test on computer at an AMP Assessment Center. Visit [www.aha.org/certification](http://www.aha.org/certification), click on “CPHRM,” “Online Application and Scheduling”, and then follow the online instructions.
- Appear on time for the examination on the date and at the time and location selected. Bring the confirmation notice provided by AMP and identification as described in this Handbook.
To apply for the CPHRM Examination, complete this application and return it with the examination fee to:

Applied Measurement Professionals, Inc., AHA-CC Examination, 18000 W. 105th Street, Olathe, KS 66061-7543
FAX: 913/895-4651 PHONE: 888/519-9901

CANDIDATE INFORMATION

| (First Name) | (Middle Initial) | (Last Name) | Former name if exam was taken previously
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<tr>
<td>List name as you wish to be printed on your certificate. Titles and designations will not be printed on the certificate.</td>
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Name of Facility/Company ____________________________

Preferred Mailing Address (Street Address, City, State/Province, Zip/Postal Code, Country) ____________________________

EXAMINATION TYPE. Place a checkmark next to the type of exam administration for which you are applying. Select only one.

- □ Computer administration at an AMP Assessment Center
- □ Special domestic administration (For scheduled dates, see www.aha.org/certification.) Scheduled date: ____________
- □ International administration (For Request for International Examination Administration form, see www.aha.org/certification.)

ELIGIBILITY REQUIREMENTS

To be eligible for the Certified Professional in Healthcare Risk Management (CPHRM) Examination, a candidate must fulfill one (1) of the following requirements for education/healthcare experience AND meet the requirement for risk management experience. Check the one that applies

**Education/Healthcare Experience**

- □ Baccalaureate degree or higher from an accredited college or university plus five (5) years of experience in a healthcare setting or with a provider of services to the healthcare industry
- □ Associate degree or equivalent from an accredited college plus seven (7) years of experience in a healthcare setting or with a provider of services to the healthcare industry.
- □ High school diploma or equivalent plus nine (9) years of experience in a healthcare setting or with a provider of services to the healthcare industry.

**Risk Management Experience**

- □ 3,000 hours or 50 percent of full-time job duties within the last three (3) years dedicated to healthcare risk management in a healthcare setting or with a provider of services (e.g. consultant, broker, attorney) to the healthcare industry.

APPLICATION STATUS

Check one of the following.

- □ I am applying as a new candidate.
- □ I am applying as a reapplicant, i.e., retaking the exam.
- □ I am applying for renewal of certification.

MEMBERSHIP STATUS

If you are a current member of ASHRM or other AHA Personal Membership Group (PMG), you are eligible for the reduced CPHRM Examination fee. Please provide your 10-digit membership number below.

For information on joining the American Society for Healthcare Risk Management (ASHRM), visit www.ASHRM.org.) Membership must be obtained before application for examination at the reduced fee can be honored.

If you have applied for membership but have not yet received your membership number, enter NEW below.

**Membership Number**: ____________________________

EXAMINATION FEES

Payment may be made by credit card, company check, cashier's check or money order made payable to AMP. Indicate the type and amount of fees enclosed:

- □ Member of ASHRM or other AHA PMG….$275
- □ Nonmember:………………………………...$425
- □ Rescheduling Fee……………………… …..$100

For payment by credit card, complete the following. Select type of credit card being used:

- □ VISA □ MasterCard □ American Express □ Discover

Credit Card Number ____________________________

Expiration Date ____________________________

Your Name as it Appears on the Card ____________________________

Signature ____________________________
SPECIAL ACCOMMODATIONS. Do you require special disability related accommodations during testing?

□ No  □ Yes  If yes, please complete the Request for Special Examination Accommodations form included in this Handbook and submit it with an application and fee at least 45 days prior to the desired testing date.

DEMOGRAPHIC INFORMATION.  The following demographic information is requested.

1. How many years of experience do you have in healthcare risk management?
   □ 0-5 years
   □ 6-10 years
   □ 11-15 years
   □ 16-20 years
   □ 21-25 years
   □ 26-30 years
   □ More than 30 years

2. What is the highest academic level you have attained?
   □ High school diploma or equivalent
   □ Associate’s degree
   □ Baccalaureate degree
   □ Master’s degree
   □ Doctoral degree

3. Professional designations earned (select all that apply):
   □ ABHRM
   □ AIC
   □ ALCM
   □ ARM
   □ AU
   □ CHEM
   □ CHSP
   □ CPA
   □ CPCU
   □ CPHQ
   □ CSP
   □ RN
   □ RPLU
   □ Other: ______________________

4. The majority of formal training you received in risk management was through:
   □ College Courses
   □ Professional Development (e.g., ARM, CPCU)
   □ ASHRM Seminars/Certificate Programs
   □ Other: ______________________

5. Current primary job function (select all that apply):
   □ Acute Care Medical Center
   □ Academic Medical Center
   □ Multi-Hospital System
   □ Specialty (e.g., pediatric, psychiatric, rehab.)
   □ Long Term Care
   □ Military/Federal/VA
   □ Ambulatory Care
   □ Insurance Company/Captive/Trust
   □ Law Firm
   □ Medical Group Practice
   □ Home Healthcare Agency
   □ Risk Management Consultant
   □ Other: ______________________

6. Current job title (Select one):
   □ CEO/COO/CMO/CNO/CFO
   □ Vice President/Chief Risk Officer
   □ Medical Director
   □ Risk Manager (e.g., coordinator, director, corporate)
   □ Quality Assurance Manager (e.g., coordinator, director, corporate)
   □ Patient Safety Officer
   □ Claims Manager (e.g., coordinator, director, corporate)
   □ Insurance Manager (e.g. coordinator, director, corporate)
   □ Consultant
   □ Attorney
   □ Compliance Officer
   □ Other: ______________________

SIGNATURE.  I certify that I have read all portions of the CPHRM Candidate Handbook and agree to abide by regulations contained therein.  I certify that the information I have submitted in this application is complete and correct to the best of my knowledge and belief.  I understand that, if the information I have submitted is found to be incomplete or inaccurate, my application may be rejected or my examination results may be delayed or voided.

Name (please print): ____________________________________________

Signature: ____________________________________________ Date: ______________________

NOTE: Name, address, telephone number and email address of candidates who pass the Examination will be shared with the professional membership society. Scores are never reported. If you do NOT wish to have your personal information shared, please opt out by contacting the AHA-CC in writing via e-mail at certification@aha.org or fax to 312/422-4575.
REQUEST FOR SPECIAL EXAMINATION ACCOMMODATIONS

If you have a disability covered by the Americans with Disabilities Act (ADA), please complete this form and the Documentation of Disability-Related Needs on the reverse side so your accommodations for testing can be processed efficiently. The information you provide and any documentation regarding your disability and your need for accommodation in testing will be treated with strict confidentiality. Please return this form with your examination application and fee to AMP within 45 days of the desired testing date.

CANDIDATE INFORMATION

First Name              Middle Initial             Last Name

Name of Facility/Company                                                 Title

Preferred Mailing Address (Street Address, City, State/Province, Zip/Postal Code, Country)

Preferred Telephone Number      E-mail Address

ASHRM or other AHA Personal Membership Group Member Number __ __ __ __ __ __ __ __ __ __

☐ I am not a member of an AHA Personal Membership Group

SPECIAL ACCOMMODATIONS

I request special accommodations for the ___________________________________ examination.

Please provide (Check all that apply.):

_____ Reader
_____ Extended testing time (time and a half)
_____ Reduced distraction environment
_____ Large print test (paper-and-pencil administration only)
_____ Circle answers in test booklet (paper-and-pencil administration only)
_____ Other special accommodations (Please specify.)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Comments ___________________________________________________________________

________________________________________________________________________

________________________________________________________________________

PLEASE READ AND SIGN:  I give my permission for my diagnosing professional to discuss with AMP staff my records and history as they relate to the requested accommodation.

Signed: __________________________      Date: ______________

Return this form with your examination application and fee to:
Examination Services, AMP, 18000 W. 105th Street, Olathe, KS 66061-7543

If you have questions, call AMP Examination Services at 888/519-9901 or fax to 913/895-4651.
Please have this section completed by an appropriate professional (education professional, physician, psychologist, psychiatrist, etc.) to ensure AMP is able to provide the required examination accommodations. The information provided will be treated with strict confidentiality. Return this form with the Request for Special Examination Accommodations form and your examination application and fee to AMP within 45 days of the desired testing date.

PROFESSIONAL DOCUMENTATION

I have known ____________________________ since ____/____/___ in my capacity as a
Examination Candidate Date

________________________________________________.
Professional Title

The candidate discussed with me the nature of the examination to be administered. It is my opinion that, because of this candidate’s disability described below, he/she/ should be accommodated by providing the special arrangements as describe on the Request for Special Accommodations form.

Description of disability:  
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

Signed:  ______________________________________    Title:  _________________________________
Printed Name:  ____________________________ _____     Date:  ________________________________
License Number (if applicable) _____________________
Address:  _______________________________________________________________________________
________________________________________________________________________________________
Telephone Number:  ______________________________    Fax Number:  _________________________
E-mail:  ________________________________________

Return this form with your examination application and fee to:
Examination Services, AMP, 18000 W. 105th Street, Olathe, KS 66061-7543

If you have questions, please call AMP Examination Services at 888/519-9901 or fax to 913/895-4651.