

Content and Blueprint of the CCM Examination

The content of the CCM examination is based on a nationwide research project conducted every five years that validates the knowledge, skills, and activities that define the role of the case manager. The research has identified five major domains of essential knowledge. Additionally, each of the five domains is further delineated into sub-domains. These sub-domains are considered core knowledge areas that are used by case managers across the continuum of activities and functions typically associated with case management (i.e., assessment, planning, implementation, coordination, monitoring, and evaluation) and are reflected in the five knowledge domains of case management listed below.

The content of the examination remains constant for each administration of the examination. The questions will vary from administration to administration in order to protect the integrity of the examination process. The current exam blueprint was updated in 2020.

Knowledge Domain: <i>Care Delivery and Reimbursement Methods</i> (28%)	42 (+/- 2 items)
<ul style="list-style-type: none"> • Accountable care organizations • Adherence to care regimen • Differences in and application of age specific care • Life span considerations • Alternative care facilities (e.g. assisted living, group homes, residential treatment facilities) • Case management models, process, and tools • Coding methodologies (e.g. Diagnosis-related group [DRG], Diagnostic and Statistical Manual of Mental Disorders [DSM], International Classification of Diseases [ICD], Current Procedural Terminology [CPT]) • Continuum of care/continuum of health and human/social services • Cost containment principles • Factors used to identify client's acuity or severity levels • Financial resources (e.g., waiver programs, special needs trusts, viatical settlements) • Goals and objectives of case management practice • Healthcare delivery systems • Hospice, palliative, and end of life care • Insurance principles (e.g., health, disability, workers compensation, long term care) • Interdisciplinary/interprofessional care team (ICT) • Levels of care and care settings • Managed care concepts • Management of acute and chronic illness(es) • Management of clients with disability(ies) • Medication safety assessment, reconciliation and management • Military and veteran benefit programs (e.g., TRICARE and Veterans Administration) • Models of care delivery (e.g., patient centered medical home [PCMH], health home, chronic care) • Population health • Negotiation techniques • Physical functioning and behavioral health assessment • Private benefit programs (e.g., pharmacy benefits management, indemnity, employer-sponsored health coverage, individually purchased insurance, home care benefits, COBRA) • Public benefit programs (e.g., SSI, SSDI, Medicare, Medicaid) • Employer-based health and wellness programs • Reimbursement and payment methodologies (e.g., bundled payment, case rate, prospective payment systems, value-based care, financial risk models) • Roles and functions of case managers in various care/practice settings • Roles and functions of other healthcare providers in various care/practice settings • Transitions of care/transitional care • Utilization management principles and guidelines • Collaborative/comprehensive/integrated/holistic case management services • Caseload considerations • Alternative care sites (e.g., non-traditional sites of care, telehealth, virtual care) 	

Knowledge Domain: <i>Psychosocial Concepts and Support Systems</i> (25%)	38 (+/- 2 items)
<ul style="list-style-type: none"> • Abuse and neglect (e.g. emotional, psychological, physical, financial) • Behavioral change theories and stages • Behavioral health concepts (e.g., diagnosis, dual diagnoses, co-occurring disorders, substance use) • Client activation and readiness to change • Client empowerment • Client engagement 	

<ul style="list-style-type: none"> • Client self-care management (e.g., self-advocacy, self-directed care, informed decision making, shared decision making, health education) • Community resources (e.g., elder care services, transportation, fraternal/religious organizations, meal delivery services, pharmacy assistance programs) • Conflict resolution strategies • Crisis intervention strategies • Client support system dynamics • Health coaching and counseling • Health literacy • Interpersonal communication (e.g., group dynamics, relationship building) • Interview tools and techniques (e.g., motivational interviewing) • Multicultural, spiritual, and religious factors that may affect the client's health status • Psychological and neuropsychological assessment • Psychosocial aspects of chronic illness and disability • Resources for the uninsured or underinsured • Supportive care programs (e.g., support groups, pastoral counseling, disease-based organizations, bereavement counseling) • Wellness and illness prevention programs, concepts, and strategies • Social determinants of health • Gender health (e.g., sexual orientation, gender expression, gender identity)

Knowledge Domain: <i>Quality and Outcomes Evaluation and Measurements</i> (19%)	29 (+/- 2 items)
<ul style="list-style-type: none"> • Accreditation standards and requirements • Cost-benefit analysis • Data interpretation and reporting • Health care analytics (e.g., health risk assessment, predictive modeling, Adjusted Clinical Group [ACG]®) • Program evaluation and research methods • Quality and performance improvement concepts • Quality indicators techniques and applications • Sources of quality indicators (e.g., Centers for Medicare and Medicaid Services [CMS], URAC, National Committee for Quality Assurance [NCQA], National Quality Forum [NQF], Agency for Healthcare Research and Quality [AHRQ], National Quality Strategy) • Types of quality indicators (e.g., clinical, financial, productivity, utilization, quality, client experience of care) • Evidence-based care guidelines related to case management 	

Knowledge Domain: <i>Rehabilitation Concepts and Strategies</i> (11%)	16 (+/- 2 items)
<ul style="list-style-type: none"> • Adaptive technologies (e.g. text telephone device [TTD], teletypewriter [TTY], telecommunication device for the deaf, orientation and mobility services) • Functional capacity evaluation • Rehabilitation post hospitalization or acute health condition • Vocational and rehabilitation service delivery systems • Vocational aspects of disability(ies) and illness (e.g., job analysis and accommodation, life care planning) • Rehabilitation concepts (e.g., medical rehabilitation, substance use rehabilitation, vocational rehabilitation, return to work strategies) • Job analysis, job accommodation, and job modification • Life care planning • Work adjustment, transitional employment, and work hardening 	

Knowledge Domain: <i>Ethical, Legal, and Practice Standards</i> (17%)	25 (+/- 2 items)
<ul style="list-style-type: none"> • Case recording and documentation • Ethics related to care delivery (e.g., principles, advocacy, experimental treatments, end of life, advance directives, refusal of treatment/services) • Ethics related to professional practice (e.g., cultural and linguistic sensitivity, code of professional conduct, veracity) • Health care and disability related legislation (e.g., Americans with Disabilities Act [ADA], Occupational Safety and Health Administration [OSHA] regulations, Health Insurance Portability and Accountability Act [HIPAA], Affordable Care Act [ACA], HITECH Act) • Legal and regulatory requirements applicable to case management practice • Privacy and confidentiality • Risk management • Self-care safety and well-being as a professional • Standards of practice (e.g., Case Management Society of America Standards of Practice for Case Management, National Association of Social Work Standards for Case Management) 	