Frequently Asked Questions:
Commission for Case Manager Certification 2014 Role and Function Study

1. **Why does the Commission do the study?**
Every five years, the Commission administers a study to gather data about how the field of case management is changing and the knowledge, skills and activities required in today’s case management practice. The robust, statistically significant findings inform the knowledge tested by the Certified Case Manager® (CCM®) credential exam. The study underscores the relevance of board certification to case managers and employers by assuring that the board-certified case manager has a mastery of key knowledge domains needed to support competent, effective case management.

2. **Who is surveyed? And when?**
Invitations to participate in the 2014 study were sent to 52,370 case managers in May and June 2014, resulting in 7,668 usable survey responses (an almost 15 percent response rate). Researchers determined that the high number of responses allowed them to generalize the results with a high degree of confidence and precision.

3. **What were key findings from the study about case managers?**
- Slightly over half of the survey respondents were care/case managers (53.99%) while only 8.66% were manager/supervisors.
- 61.27% have performed case management work for more than six years.
- Most (88.6%) are registered nurses; 4.4% are social workers and 2.3% are vocational rehabilitation counselors or specialists.
- More than a third (34.3%) of board-certified case managers participating in the survey achieved certification within the last four years.
- Case managers are growing older as a group. In 2009, 21% were over age 55, but in 2014, that percentage more than doubled to 43.6%. Just over 1% are under age 30.
- Almost all (94.6%) case managers are women.

4. **What were key findings from the study about the case management field?**
- Nearly two-thirds (65.03%) spend at least half their daily time on direct case management services. More than a third (38.7%) spend more than 80 percent of their time in direct case management.
- Their work settings are diverse:
  - 28.8% health insurance
  - 22.8% hospitals
  - 11.6% workers’ comp
  - 7.3% independent case management
- A far greater percentage of employers—40.2%—now require certification, a 14.3% increase from 2004.
- The percentage of employers who offer a monetary reward for certification grew by nearly 10%, from 20.2% in 2004 to 29.9% in the 2014 survey.
- About 60% of the participants indicated that care management and care coordination terms are included in their job titles, underscoring the significance of those functions.
• There is increasing prominence of quality measurement and evaluation functions, likely because of new care models based on value rather than volume. Value-based payment models require quality measures to quantify and reward efficient, effective care delivery.
• There is a significant increase in emphasis on ethics and quality measurement as core competencies for professional case managers. This represents a major shift in importance for these activities—well beyond previous studies.
• A more sophisticated case management department includes specialized, defined roles for an educator and a quality evaluation professional to support the case management team.