

ACM™ – Accredited Case Manager

American Case Management Association – Final Detailed Content Outline

Core Examination Portion		# of Items
1. Screening and Assessment - <i>conduct screening and assessment activities for the purpose of preadmission, admission, or following admission to an inpatient or outpatient setting</i>		11
A. Obtain relevant, comprehensive information and data required for client assessment from:		
a. client		
b. family and significant others (and/or legal guardians)		
c. primary care physician/attending physician		
d. consulting physician(s)/specialist(s)		
e. other members of the interdisciplinary team		
f. community providers		
B. Assess and gather information regarding the client's:		
a. health behaviors		
b. response to illness		
c. belief or value system (e.g., cultural influences)		
d. medical history		
e. psychosocial history		
f. financial situation		
g. environment		
h. functional status		
i. developmental level		
j. current medical status and level of care		
C. Formulate and communicate assessment findings		
2. Planning - <i>apply assessment findings to prepare a client-centered plan of care</i>		25
A. Identify hospital services and available resources to meet client needs		
B. Identify continuum of care needs		
C. Obtain client choice regarding aspects of care plan		
D. Collaborate with team to develop a plan of care		
E. Coordinate client care conferences		
F. Establish goals and anticipated outcomes		
G. Propose alternative treatment and therapeutic plans based on efficacy, cost, safety, potential compliance, and anticipated outcomes		
H. Integrate client choice, resources, and team recommendations into a plan of care		
I. Evaluate resource consumption related to expected outcomes		
J. Identify contingencies to the plan		
K. Formulate and communicate the plan of care		
L. Create or develop resources for emerging client populations where resources are scarce		

- 3. Care Coordination and Intervention – facilitate effective management of client care throughout the identified continuum of care** **32**
- A. Establish linkages with **internal** systems to provide resources, services, and opportunities
 - B. Establish linkages with **external** systems to provide resources, services, and opportunities
 - C. Apply regulatory requirements to practice
 - a. HIPAA
 - b. CMS
 - c. JCAHO
 - d. 4. other
 - D. Apply legal requirements to practice (e.g., mandated abuse reporting)
 - E. Apply ethical guidelines to practice (e.g., honoring client’s right to choose, self determination)
 - F. Coordinate timely and effective service delivery
 - a. Facilitate referral to continuum services (e.g., medication payment assistance, SNF, DME, home health, community agencies)
 - b. Provide/reinforce appropriate client education
 - G. Communicate potential payor issues to client, health care team, and other internal services
 - H. Provide for clinical and therapeutic interventions
 - I. Manage variances to the plan
 - J. Negotiate with service providers, payors, and members of the health care team to meet client care needs
 - K. Advocate on behalf of the client and/or facility for needed client resources and services
 - L. Create an environment to support client safety
 - M. Provide education to other health care providers (e.g., infection control, health care economics, payor methods, discharge options, documentation, service utilization)
 - N. Document changes in the plan and responses to interventions
 - O. Communicate changes in the plan and responses to interventions
 - P. Communicate client status and needs to the next level of care
- 4. Evaluation - utilize outcome management and process improvement strategies to measure and improve the quality and effectiveness of care and processes** **22**
- A. Systematically collect timely and accurate data to evaluate interventions
 - B. Identify opportunities for improvement
 - C. Communicate opportunities and supporting data at all organizational levels
 - D. Collaborate with the interdisciplinary team to create solutions and take corrective action to address issues
 - E. Monitor patterns and trends
 - F. Evaluate the effectiveness of the interventions
 - G. Evaluate practice trends against benchmarks to support best practice
 - H. Evaluate research studies and apply findings to improve case management practice and service delivery
 - I. Identify quality and risk management issues
 - J. Resolve or refer quality and risk management issues for corrective action
 - K. Participate in team building activities
 - L. Lead team building activities to promote team cohesiveness and effective performance

Total Scored Items (plus 20 items added for pre-testing)

90

Specialty Simulation Component (Nursing and Social Work)

Specialty Assessment, Care Coordination and Intervention – *facilitate effective management of client care throughout the identified continuum of care as applied to social work/nursing practice in case management*

- A. Perform client screening
- B. Assess and gather information from the client
- C. Obtain relevant, comprehensive information and data required for client assessment by reviewing medical records
- D. Conduct ongoing reassessment of client status and effectiveness of interventions, and revise as necessary
- E. Coordinate timely and effective service delivery
 - a. Facilitate diagnostic and treatment services (e.g. tests, consultations, procedures)
 - b. Identify and manage operational, clinical, and/or client/family barriers
- F. Provide for clinical and therapeutic interventions
- G. Monitor delivery of service against clinical practice guidelines or plan of care
- H. Continuously reassess client and family response to care
 - I. Enhance client capacities (e.g., developmental, problem solving, coping, self care)
- J. Conduct ongoing reassessment of the integration/interaction of all aspects of care
- K. Review admissions and level of care with respect to the medical necessity, quality, and appropriateness of care
- L. Assure payor authorization for stay
- M. Review, process, and issue notices of non-coverage to client/responsible party following regulatory guidelines and facility protocols by informing client/responsible party of right of appeal and appeal process
- N. Participate in collaborative discussions with external organizations related to service delivery utilization and contracting issues
 - a. payors
 - b. providers (e.g. SNFs, home health agencies)
- O. Provide education to clients (e.g., safety, disease process, compliance, medication management, plan of care)

Total of Four Scored Simulations (plus one pretest), each including 6 to 10 sections categorized as shown on the outline.