Certified Professional in Healthcare Risk Management

CANDIDATE HANDBOOK AND APPLICATION

Conducted by the American Hospital Association Certification Center
Effective January 2016
For questions regarding the certification programs, contact:

**AHA Certification Center (AHA-CC)**
155 N. Wacker Drive, Suite 400
Chicago, IL 60606
Phone: 312-422-3702
Fax: 312-422-4575
Email: certification@aha.org
Website: www.AHACertificationCenter.org

For questions regarding the examination application and administration, contact:

**Applied Measurement Professionals, Inc. (AMP)**
18000 W. 105th St.
Olathe, KS 66061-7543
Phone: 888-519-9901
Fax: 913-895-4651
Email: info@goAMP.com
Website: www.goAMP.com

---

**2016 AHA Certification Center Board of Directors**

Ralph C. Graham, Jr., CHFM, SASHE; Birmingham, AL, Board President
James L. Frain, CHHR, SPHR, CEBS; South Bend, IN
Thomas C. Gormley, CHC; Nashville, TN
Vicki B. Haddock, CPHRM, ARM, BSN; Greenville, NC
Ali Khan, CHESP, REH; Easton, MD
Kate J. Polczynski, CMRP; Danville, PA
James W. Pope, public member, Holland, OH
Katherine M. Pressley, CMRP, FAHRMM; Port Angeles, WA
Dean M. Pufahl, CHFM; West Bend, WI
Shadie R. Rankhorn, Jr., CHC, CHFM, SASHE; Johnson City, TN
Deborah Rubens, CHHR, SPHR-CA, SHRM-SCP; Sacramento, CA
John Scherberger, CHESP; Spartanburg, SC
Gregory L. Terrell, CPHRM, MS, FASHRM; Austin, TX

Alison Benefico, Director of Operations, PMGs & AHA-CC; ex officio

---

**2016 CPHRM Certification Program Committee**

Vicki B. Haddock, CPHRM, ARM, BSN; Greenville, NC; Committee Chairperson
Mary Bollwage, CPHRM, BS, MSJ, Mullica, NJ
Kathleen T. Connolly, CPHRM, RN, MSEd; Charlotte, NC
Sharon M. DiRienzo, CPHRM, RN, MSN; Thornton, PA
Laurel J. Grisbach, CPHRM, RN, BSN; Glendale, CA
Linda E. Hines, CPHRM, RN, JD; Columbus, OH
Mike Midgley, CPHRM, RN, JD, MPH, FASHRM; New York, NY
Gregory L. Terrell, CPHRM, MS, FASHRM; Austin, TX

---

CPHRM is a trademark of the AHA Certification Center, a division of the American Hospital Association.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE AHA-CC</td>
<td>1</td>
</tr>
<tr>
<td>Statement of Nondiscrimination</td>
<td>1</td>
</tr>
<tr>
<td>AHA-CC CERTIFICATION PROGRAM EXAMINATIONS</td>
<td>1</td>
</tr>
<tr>
<td>Testing Agency</td>
<td>1</td>
</tr>
<tr>
<td>CPHRM CERTIFICATION PROGRAM</td>
<td>2</td>
</tr>
<tr>
<td>Definition of a Healthcare Risk Management Professional</td>
<td>2</td>
</tr>
<tr>
<td>CPHRM Eligibility Requirements</td>
<td>2</td>
</tr>
<tr>
<td>CPHRM EXAMINATION</td>
<td>2</td>
</tr>
<tr>
<td>CPHRM Examination Content Outline</td>
<td>3</td>
</tr>
<tr>
<td>Sample Examination Questions</td>
<td>7</td>
</tr>
<tr>
<td>CPHRM EXAMINATION PREPARATION</td>
<td>8</td>
</tr>
<tr>
<td>Review the Content</td>
<td>8</td>
</tr>
<tr>
<td>Complete the CPHRM Self-Assessment Examination</td>
<td>8</td>
</tr>
<tr>
<td>Use Other Study Resources</td>
<td>8</td>
</tr>
<tr>
<td>CPHRM EXAMINATION ADMINISTRATION</td>
<td>8</td>
</tr>
<tr>
<td>Computer Administration at AMP Assessment Centers</td>
<td>8</td>
</tr>
<tr>
<td>Special Administration – Laptop or Paper-and-Pencil</td>
<td>9</td>
</tr>
<tr>
<td>International Testing</td>
<td>9</td>
</tr>
<tr>
<td>Special Arrangements for Candidates with Disabilities</td>
<td>9</td>
</tr>
<tr>
<td>ADHERING TO PROFESSIONAL STANDARDS OF CONDUCT</td>
<td>10</td>
</tr>
<tr>
<td>CPHRM EXAMINATION APPLICATION AND SCHEDULING PROCESS</td>
<td>11</td>
</tr>
<tr>
<td>CPHRM Examination Application Fee Schedule</td>
<td>11</td>
</tr>
<tr>
<td>Online Application and Scheduling</td>
<td>11</td>
</tr>
<tr>
<td>Paper Application</td>
<td>12</td>
</tr>
<tr>
<td>Application Processing and CPHRM Examination Scheduling</td>
<td>12</td>
</tr>
<tr>
<td>Rescheduling or Cancelling a CPHRM Examination</td>
<td>13</td>
</tr>
<tr>
<td>ON THE DAY OF THE CPHRM EXAMINATION</td>
<td>13</td>
</tr>
<tr>
<td>Failing to Report for the CPHRM Examination</td>
<td>13</td>
</tr>
<tr>
<td>Reporting for the CPHRM Examination</td>
<td>13</td>
</tr>
<tr>
<td>On-site Security</td>
<td>14</td>
</tr>
<tr>
<td>Identity Verification</td>
<td>14</td>
</tr>
<tr>
<td>Use of Calculators</td>
<td>14</td>
</tr>
<tr>
<td>Inclement Weather or Emergency</td>
<td>14</td>
</tr>
<tr>
<td>TAKING THE CPHRM EXAMINATION</td>
<td>15</td>
</tr>
<tr>
<td>Rules for CPHRM Examination</td>
<td>16</td>
</tr>
<tr>
<td>Copyrighted CPHRM Examination Questions</td>
<td>16</td>
</tr>
<tr>
<td>FOLLOWING THE CPHRM EXAMINATION</td>
<td>17</td>
</tr>
<tr>
<td>CPHRM Examination Score Reports</td>
<td>17</td>
</tr>
<tr>
<td>Passing the CPHRM Examination</td>
<td>17</td>
</tr>
<tr>
<td>Failing the CPHRM Examination</td>
<td>18</td>
</tr>
<tr>
<td>CPHRM Examination Scores Canceled by the AHA-CC</td>
<td>18</td>
</tr>
<tr>
<td>CPHRM Examination Score Confidentiality</td>
<td>18</td>
</tr>
<tr>
<td>Administrative Matters</td>
<td>18</td>
</tr>
<tr>
<td>RENEWAL OF CPHRM CERTIFICATION</td>
<td>19</td>
</tr>
<tr>
<td>Failing to Renew CPHRM Certification</td>
<td>19</td>
</tr>
<tr>
<td>APPEALS</td>
<td>20</td>
</tr>
<tr>
<td>CPHRM EXAMINATION APPLICATION</td>
<td>22</td>
</tr>
<tr>
<td>REQUEST FOR SPECIAL EXAMINATION ACCOMMODATIONS FORM</td>
<td>24</td>
</tr>
<tr>
<td>DOCUMENTATION OF DISABILITY-RELATED NEEDS</td>
<td>26</td>
</tr>
</tbody>
</table>

Copyright 2014 by the AHA Certification Center (rev. January 2016)
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 Candidate Handbook until after the CPHRM Examination is completed. Additional copies of this Candidate Handbook may be obtained by downloading a copy from www.AHACertificationCenter.org. 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, CPHRM 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
- Human Resources
- 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 is an indicator of 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 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

Administered by the AHA-CC, 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 CPHRM 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 the CPHRM eligibility requirements fully and passing the CPHRM Examination attain the CPHRM designation. The AHA-CC reserves the right, but is not obligated, to verify the accuracy of 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 CPHRM 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 and are not scored.
- A candidate is allowed two (2) hours in which to complete the CPHRM Examination.
- The CPHRM Examination is based on the five (5) 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 CPHRM Examination questions devoted to each major content area is included in the Content Outline.
Generally, the Examination questions are categorized by the following cognitive levels:

- 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 for the current CPHRM Examination, refer to the following pages.
American Hospital Association Certification Center
Certified Professional Healthcare Risk Management Certification Examination Content Outline

1. **Clinical/Patient Safety:** 35 items (Recall: 7, Application: 10, Analysis: 18)
   A. Assess the current state of patient safety and staff awareness within the organization.
   B. Collaborate on proactive patient safety initiatives (e.g., FMEA, RCA, Safety Culture/Just Culture).
   C. Design, implement, and maintain educational programs on risk management and patient safety related topics.
   D. Promote a culture of patient safety through education, policy development, and standardization of processes.
   E. Educate providers, staff, employees, patients and families on the role of patients and families in improving patient safety and reducing risk.
   F. Coach physicians, leaders, managers, and staff on appropriate disclosure methods and processes.
   G. Participate in critical incident debriefing.
   H. Participate in the development of corrective action plans and supervise follow-up of recommended improvements stemming from risk assessments, audits and investigations (e.g., sentinel events, reported events/incidents, FMEA and Root Cause Analysis).
   I. Provide guidance to staff regarding a:
      1) disruptive patient.
      2) verbally disruptive family member.
   J. Design a management data collection and analysis system and timely reporting including elements of written incidents reports.
   K. Design a management data collection and analysis system and timely reporting including elements of patient complaints and/or satisfaction surveys.
   L. Design a management data collection and analysis system and timely reporting including elements of clinical indicators.

2. **Risk Financing:** 10 items (Recall: 2, Application: 6, Analysis: 2)
   A. Assist General Counsel with administration of all aspects of the Self-Insured Retention (SIR) program.
   B. Implement a program for control of contractual risk by recommending/implementing modifications to address identified risks.
   C. Oversee the investigation of accidents or circumstances that could lead to financial loss (e.g., professional, institutional, general liability, and product liability).
   D. Participate in due diligence/research potential liability assessment for new services or delivery models, acquisitions or construction (e.g., line of service, new products in the delivery of care).
   E. Assess liability and probability of legal action resulting from adverse events, complaints, and regulatory actions.
   F. Analyze professional liability historical loss experience.
   G. Develop comprehensive risk financing strategies to address the organization’s areas of exposure (e.g., general liability (GL), professional liability (PL), privacy and security liability).
   H. Respond to risk management concerns about insurance coverage from organization personnel and staff members.

3. **Legal and Regulatory:** 24 items (Recall: 5, Application: 14, Analysis: 5)
   A. Promote compliance with state-specific legislation through policy development, guidance, or education.
   B. Promote compliance with federal and state laws and regulations governing patient confidentiality through policy development, guidance, or education including protected health information (PHI).
   C. Promote compliance with state reporting requirements through policy development, guidance, or education (e.g., abuse of vulnerable populations).
   D. Promote compliance with state reporting requirements governing violence in the workplace through policy development, guidance, or education.
   E. Educate staff on regulatory issues related to risk management.
   F. Promote compliance with state regulations regarding the investigation and resolution of patient complaints or grievances through policy development, guidance, or education.
   G. Collaborate with other departments by preparing and conducting quality and/or risk assessments to maintain a constant state of accreditation readiness.
   H. Promote compliance with regulations governing involuntary detention of patients through policy development, guidance, or education.

Copyright 2014 by the AHA Certification Center (rev. January 2016)
I. Manage a vendor liability program to catalog evidence of vendor licensure, required insurance limits, permits, etc.

J. Promote compliance with state agencies governing the reporting of specific events through policy development, guidance, or education.

K. Promote compliance with the requirements of the following federal acts/regulations through policy development, guidance, or education:
   1) Americans with Disabilities Act (ADA).
   2) Anti-Kickback Statute.
   3) Centers for Medicare and Medicaid Services (CMS).
   4) Emergency Medical Treatment and Active Labor Act (EMTALA/COBRA).
   5) Food and Drug Administration (FDA).
   6) Health Care Quality Improvement Act (HCQIA).
   7) Health Insurance Portability and Accountability Act (HIPAA).
   8) National Practitioner Data Bank (NPDB).
   9) Occupational Safety and Health Administration (OSHA).
  10) Patient Self-Determination Act (PSDA).
  11) Safe Medical Device Act (SMDA).
  12) Stark Law.

L. Provide guidance to staff regarding:
   1) consent for care.
   2) false identification provided by a patient.
   3) illegal drugs in the patient’s possession.

M. Design a management data collection and analysis system and timely reporting including elements of:
   1) device reporting and tracking logs.
   2) recall notices.
   3) regulatory inquiries.

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

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

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

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

R. Promote compliance with private accrediting organizations.

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

T. Develop and implement policies in response to regulatory mandates from The Joint Commission (TJC).

U. Maintain awareness of patient safety activities occurring locally and nationally (e.g., The Joint Commission (TJC), Institute for Healthcare Improvement (IHI), National Quality Forum (NQF)).

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

W. 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.

X. Ensure processes and programs are in place (e.g., Advance Directives, cultural sensitivity, organ donation).

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

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

AA. Ensure organizational compliance with disclosure of unanticipated outcomes.

BB. Ensure programs that address provider and staff behavioral issues are culturally, legally and psychologically sound and non-discriminatory.

CC. Develop responses to inquiries from regulatory and licensing agencies.
4. **Healthcare Operations:** 26 items *(Recall: 5, Application: 16, Analysis: 5)*
   A. Ensure that processes are in place for compliance with federal and state community initiatives for emergency preparedness and business continuity including natural, man-made, and biologic disaster readiness.
   B. Provide guidance to staff regarding a physically disruptive family member.
   C. Conduct risk assessments to identify exposures related to new and existing services.
   D. Collaborate with public relations in the preparation of responses to the media/external inquiries regarding incidents/occurrences.
   E. Design a management data collection and analysis system and timely reporting including elements of:
      1) security reports.
      2) general liability incidents (e.g., sexual misconduct by or against staff, patients).
   F. Design a management data collection and analysis system and timely reporting including elements of referrals by staff, committees, departments, other facilities.
   G. Design a management data collection and analysis system and timely reporting including elements of medical record requests.
   H. Develop and maintain communications and relationships across the continuum of care.
   I. Communicate with key committees, including the governing body.
   J. Promote appropriate procedures for retention, access, and destruction of medical records and other key business records.
   K. Supervise risk management staff.
   L. Conduct risk assessments to identify exposures related to enterprise-wide services.
   M. Develop/maintain department policies and procedures and modify as required.
   N. Prepare risk management department budgets.
   O. Develop enterprise risk management philosophy including the organizational response to errors.
   P. Coordinate enterprise risk management activities for the institution/committees.
   Q. Develop annual institutional goals for enterprise risk management program/department.
   R. Train risk management staff.
   S. Develop enterprise risk management plan for institution.
   T. Evaluate the effectiveness of risk management activities.
   U. Develop policies and procedures for acceptance of legal documents (e.g., summonses, complaints, subpoenas, court orders).
   V. Support patient safety committee meetings by collecting and formulating relevant information to facilitate decision-making process.
   W. Participate in professional association activities.
   X. Assess enterprise risk management plan for effectiveness on an annual basis.
   Y. Develop statistical and qualitative enterprise risk management reports.
   Z. Analyze information technology liability risk exposure (e.g., risk assessment, general IT control audits/reviews).

5. **Claims and Litigation:** 5 items *(Recall: 2, Application: 3, Analysis: 0)*
   A. Design a management data collection and analysis system and timely reporting including elements of reports of Potential Compensatory Events (PCEs).
   B. Design a management data collection and analysis system and timely reporting including elements of open and closed claims and loss runs.
   C. Notify carriers and/or claims and litigation department of potential or actual claims.
   D. Participate in claims management activities (e.g., setting loss reserves, discovery requests/interrogatories, preparation for trials, evidence/record preservation and management).
   E. Ensure that administration is kept informed of high exposure cases and aggregate claims experience, including its impact on the risk financing program.
   F. Secure and evaluate all pertinent medical, billing, and other records related to individual liability claims.
   G. Ensure chain-of-custody for all potential evidence related to individual liability claims.
   H. Ensure legal case files are maintained in such a way to protect discoverability.
   I. Manage the response to service of process and notify appropriate parties of such service.
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>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>A</td>
</tr>
<tr>
<td>2.</td>
<td>D</td>
</tr>
<tr>
<td>3.</td>
<td>C</td>
</tr>
<tr>
<td>4.</td>
<td>B</td>
</tr>
<tr>
<td>5.</td>
<td>D</td>
</tr>
<tr>
<td>6.</td>
<td>B</td>
</tr>
<tr>
<td>7.</td>
<td>B</td>
</tr>
<tr>
<td>8.</td>
<td>C</td>
</tr>
<tr>
<td>9.</td>
<td>A</td>
</tr>
<tr>
<td>10.</td>
<td>B</td>
</tr>
</tbody>
</table>
CPHRM EXAMINATION PREPARATION

The method of preparation and amount of time spent preparing for the AHA-CC certification Examinations can be driven by the candidate's preferred study style, level of professional experience or academic background. Some methods of preparation may include but are not limited to the following methods.

**Review the Content**
Candidates who have passed the 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 recollection of isolated facts.

**Complete the CPHRM Self-Assessment Examination (SAE)**
A Self-Assessment Examination (SAE) for the CPHRM Examination is an online tool created by the AHA-CC to simulate the CPHRM Examination. This tool is available for purchase at www.AHACertificationCenter.org.

The 100-question online practice test was developed using the same procedures as the CPHRM Examination, and conforms to CPHRM 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 CPHRM certification Examination. Performance on the CPHRM SAE is not necessarily an indicator of performance on the CPHRM 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 CPHRM Examination are selected from any single reference or set of references, or that study from specific references guarantees a passing score on the CPHRM Examination. For information about references, study guides and review sessions offered by the American Society for Healthcare Risk Management (ASHRM), visit www.ashrm.org.

CPHRM 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 Americans with Disabilities Act (ADA), special arrangements can be made for candidates with a disability.

**Computer Administration at AMP Assessment Centers**
The primary mode of delivery of the CPHRM Examination is via computer at over 190 AMP Assessment Centers geographically distributed throughout the United States and typically located in H&R Block offices. For AMP Assessment Center locations, detailed maps and directions, go to www.AHACertificationCenter.org, click on “CPHRM” and then on “Testing Centers.”

For computer administrations at AMP Assessment Centers, a candidate who meets eligibility requirements for the CPHRM Examination may submit an application and fee at any time. A candidate must make an appointment to take the CPHRM Examination within ninety (90) days from confirmation of eligibility from AMP. The CPHRM Examination is administered by appointment only Monday through Saturday at 9:00 a.m. and 1:30 p.m., with the exception of some holidays. 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>
</tr>
</thead>
<tbody>
<tr>
<td>Tuesday</td>
<td>Thursday</td>
</tr>
<tr>
<td>Wednesday</td>
<td>Friday/Saturday</td>
</tr>
<tr>
<td>Thursday</td>
<td>Monday</td>
</tr>
<tr>
<td>Friday</td>
<td>Tuesday</td>
</tr>
</tbody>
</table>

The CPHRM 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-and-Pencil**

The CPHRM Examination may be offered on laptop or in paper-and-pencil format during conferences or meetings. A candidate who meets the CPHRM eligibility requirements and submits a CPHRM Examination application and fee for receipt by the posted deadline is allowed to take the CPHRM Examination. Online application is not available for special administrations. Dates of special administrations and deadlines for receipt of applications are posted on www.AHACertificationCenter.org.

**International Testing**

Candidates who are eligible for the CPHRM Examination and wish to take the CPHRM Examination outside of the U.S. may be accommodated by submitting a *Request for International Examination Administration* form. To obtain the form, go to www.AHACertificationCenter.org. Please note that an additional fee may apply.

**Special Arrangements for Candidates with Disabilities**

The AHA-CC complies with applicable provisions of the Americans with Disabilities Act (ADA) and strives to ensure that no individual with a disability is deprived of the opportunity to take the CPHRM 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 by completing and timely submitting the Request for Special Examination Accommodations form included in this Candidate Handbook to AMP.

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 CPHRM Examination under standard conditions may request special accommodations and arrangements. For either a computer or a special administration of a CPHRM Examination, complete the Request for Special Examination Accommodations form included in this Candidate Handbook and submit it with a CPHRM Examination application and fee at least 45 days prior to the CPHRM 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 the CPHRM Examination Application 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-CC 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
- Not to misrepresent the credential and to adhere to the Guidelines for Use of the Certification Marks as posted on the AHA-CC website.

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-CC 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: AHA Certification Center, 155 N. Wacker Drive, Suite 400, Chicago, IL 60606. Only signed, written communication will be considered.

The AHA-CC 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 a reasonable opportunity to respond in a professional and legally defensible manner, in accordance with policies established by the AHA-CC.
CPHRM CANDIDATE HANDBOOK AND APPLICATION

CPHRM EXAMINATION APPLICATION AND SCHEDULING PROCESS

CPHRM Examination Application Fee Schedule
After fulfilling the CPHRM 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 Candidate Handbook)

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

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

Member of ASHRM or other AHA Personal Membership Group.... $275
Nonmember................................................................. $425

- 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.
- Examination-related fees are nonrefundable and nontransferable.
- Up to two (2) business days prior to a scheduled administration, the application may be transferred to a future CPHRM Examination date by requesting AMP to reschedule a new date. The examination date may be rescheduled once without incurring an additional fee. This date must be within 90 days of AMP confirming receipt of your CPHRM Examination application. Each additional rescheduling of a CPHRM examination 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 a CPHRM Examination and apply to retake the CPHRM Examination must pay the full CPHRM Examination fee as listed above.

Online Application and Scheduling
For computer administrations at AMP Assessment Centers only
Complete the CPHRM Examination application and scheduling process in one online session. Visit http://www.AHACertificationCenter.org, 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 Services Center at 312-422-2765.

After completing the CPHRM Examination application and submitting credit card payment information (VISA, MasterCard, American Express, Discover), AMP confirms the candidate’s certification of eligibility, and prompts the candidate to schedule a CPHRM Examination appointment or supply additional eligibility information. The candidate must schedule a CPHRM Examination date that is within 90 days of AMP confirming receipt of the CPHRM Examination application.
Paper Application
For all administrations
Complete and submit to AMP a CPHRM Examination application with the appropriate fee. You may complete the paper application included in this Candidate Handbook or obtained by one of the following ways:

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

An incomplete CPHRM Examination Application will be returned to the candidate along with any fee submitted less a $50 processing fee. A CPHRM Examination 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 CPHRM 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 CPHRM 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 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.

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

Application Processing and CPHRM Examination Scheduling
Generally, within approximately two (2) weeks of receiving the application, AMP processes it, confirms the For CPHRM Examinations scheduled at AMP Assessment Centers, generally, in about two (2) weeks of AMP receiving the application, AMP processes it, confirms the candidate’s certification of eligibility, and sends an email and postcard confirmation notice with a toll-free phone number and website address at which a testing appointment can be scheduled. If a confirmation notice is not received within four (4) weeks of mailing your application, contact AMP at 888-519-9901.

When scheduling a CPHRM 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 CPHRM 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 CPHRM Examination. A complete application and full examination fee are required to reapply for CPHRM Examination.
For *special administrations*, approximately ten (10) business days after AMP’s receipt of application, a notice is sent by email to the candidate stating the application has been received and approved. If the application is incomplete, a letter will be sent to the candidate listing the deficiency. Generally, candidates receive their admission letter to the testing about two (2) to three (3) weeks prior to the CPHRM special administration date. The notice includes the date, location and check-in time for the CPHRM Examination.

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

**Rescheduling or Cancelling a CPHRM Examination**

Although CPHRM Examination application fees are nonrefundable, a candidate who is unable to take the CPHRM Examination has the following options to reschedule a CPHRM Examination:

- A candidate may *reschedule the CPHRM 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 CPHRM Examination must be rescheduled within 90 days of the originally scheduled CPHRM Examination date.
- A candidate may *reschedule a second or additional time* by submitting to AMP a written request including their name, address, identification number and the $100 rescheduling fee. A new CPHRM Examination application is not required. The CPHRM Examination must be rescheduled within 90 days of the originally scheduled CPHRM Examination date. For payment by credit card, the credit card number, and expiration date must be included.
- A candidate who *reschedules a CPHRM Examination after the 90-day period* forfeits the application and all fees paid to take the exam. A new, complete application and full CPHRM Examination fee are required to reapply for the CPHRM Examination.
- A candidate who *cancels a CPHRM Examination after confirmation of eligibility is received* from AMP forfeits the application and all fees paid to take the CPHRM Examination. A new, complete application and full CPHRM Examination fee are required to reapply for the CPHRM Examination.

**ON THE DAY OF THE CPHRM EXAMINATION**

**Failing to Report for the CPHRM Examination**

A candidate who shows up late or fails to show up for an already rescheduled exam without the requisite advance two (2) business days’ notice forfeits all fees. A complete application and the full CPHRM Examination fee are required to reschedule another CPHRM Examination.

A candidate who fails to report for a scheduled CPHRM Examination with the required advance notice has the following two (2) options:

- Reschedule the CPHRM Examination for a new date that is within ninety (90) days from the originally scheduled testing date and remit the $100 rescheduling fee. To schedule a new appointment for the CPHRM Examination, 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 CPHRM Examination application is not required.
- Reschedule the CPHRM Examination date for a date that is beyond the ninety (90)-day period and forfeit the application and all fees paid to take the exam. A complete application and full CPHRM Examination fee are required to reapply for the CPHRM Examination.

**Reporting for the CPHRM 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 AMP 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 CPHRM Examination will begin after all scheduled candidates are checked-in and seated and no more than one hour after the scheduled registration begins. 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 reschedule the CPHRM Examination for a new date that is within ninety (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.

- A candidate who does not reschedule a CPHRM Examination session that is within the ninety (90)-day period forfeits the application and all fees paid to take the exam. A complete application and full exam fee are required to reapply for the exam.

**On-site Security**

The AHA-CC and AMP maintain CPHRM Examination 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 Assessment Centers is continuously monitored by audio and video surveillance equipment or CPHRM Examination personnel. Candidates may be subjected to a metal detection scan upon entering the examination room.

**Identity Verification**

To gain admission to the AMP Assessment Center or a testing room, the candidate must present two (2) forms of identification. The primary form must be government issued, current, and include the candidate’s name, signature and photograph. The candidate will also be required to sign a roster for verification of identity. A candidate without proper identification will not be permitted to take the CPHRM Examination.

- Examples of valid primary forms of identification are current driver’s license with photograph, current state identification card with photograph, current passport, or current military identification card with photograph.

- The secondary form of identification must display the candidate’s name and signature for the candidate’s signature verification. (e.g., credit card with signature, social security card with signature, employment/student ID card with signature, etc.)

- If the candidate’s name on the registration list is different than it appears on the forms of identification, the candidate must bring proof of the name change (e.g., marriage license, divorce decree, or court order).

- No form of temporary identification will be accepted.

**Use of Calculators**

Some CPHRM Examination questions may require calculations. Use of a silent, nonprogrammable calculator without paper tape-printing capability or alpha keypad is permitted during the CPHRM Examination. Use of a computer or a cell phone is not permitted. Calculators will be checked for conformance with this regulation before candidates are allowed admission to the AMP Assessment Center or testing room. Calculators that do not comply with these specifications are not permitted in the AMP Assessment Center or testing room.

**Inclement Weather or Emergency**

In the event of inclement weather or unforeseen emergencies on the day of the CPHRM Examination, the AHA-CC, in concert with AMP, will determine whether circumstances warrant the cancellation and subsequent rescheduling of a CPHRM Examination. If testing personnel are able to conduct business, the CPHRM Examination usually proceeds as scheduled.

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

For computer administrations at AMP Assessment Centers, candidates may visit AMP’s website at www.goAMP.com prior to the CPHRM Examination to determine if any AMP Assessment Centers have been closed.

In the event of a personal emergency on the day of the CPHRM Examination, a candidate may request consideration of rescheduling the CPHRM 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 CPHRM 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 CPHRM Examination proctor at the completion of testing.

For a paper-and-pencil administration, the candidate is provided oral and written instructions about the CPHRM Examination 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 CPHRM Examination session. Prior to attempting the CPHRM Examination, the candidate is provided a short tutorial on using the software to take the CPHRM Examination. Tutorial time is NOT counted as part of the two (2) hours allowed for the CPHRM Examination. Only after a candidate is comfortable with the software and chooses to do so does the CPHRM Examination begin.

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

Only one (1) CPHRM Examination question is presented at a time. The question number appears in the lower right portion of the screen. The entire CPHRM 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. This action allows the candidate to move forward through the CPHRM 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 CPHRM Examination.

A CPHRM 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 to advance to the next unanswered or bookmarked question on the CPHRM Examination. To identify all unanswered or bookmarked questions, repeatedly click on the hand icon.

When the CPHRM Examination is completed, the number of CPHRM Examination questions answered is reported. If fewer than 110 questions were answered and time remains, return to the CPHRM Examination and answer the remaining questions. Be sure to answer each CPHRM Examination question before ending the CPHRM 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 CPHRM Examination.
Rules for CPHRM Examination

All CPHRM Examination candidates must comply with the following rules during the CPHRM Examination 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. CPHRM Examinations are proprietary. CPHRM Examination questions may not be recorded or shared with any individual in any manner. No cameras, notes, tape recorders, pagers, cellular/smart phones, or other recording devices are allowed in the testing room. Possession of a cellular/smart phone or other electronic devices is strictly prohibited and will result in dismissal from the CPHRM Examination.

4. Eating, drinking, and smoking is not permitted in the testing room.

5. No documents or notes of any kind may be removed from the testing room. Each CPHRM candidate will be provided one sheet of scratch paper that must be returned to the CPHRM Examination proctor at the completion of testing.

6. No questions concerning the content of the CPHRM Examination may be asked of anyone during the CPHRM Examination.

7. Permission from the CPHRM Examination 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 CPHRM Examination may be dismissed from the CPHRM Examination session, their score on the CPHRM Examination voided and the CPHRM Examination fees forfeited. Evidence of misconduct is reviewed by the Appeal Board of the AHA-CC to determine whether the CPHRM candidate will be allowed to reapply for CPHRM Examination. If re-examination is granted, a complete CPHRM Examination application and full CPHRM Examination fee are required.

- Gaining unauthorized admission to the CPHRM Examination
- Creating a disturbance, being abusive or otherwise uncooperative
- Displaying and/or using electronic communications equipment including but not limited to pagers, cellular/smart phones, etc.
- Talking or participating in conversation with other CPHRM Examination candidates
- Giving or receiving help or being suspected of doing so
- Leaving the AMP Assessment Center or testing room during the CPHRM Examination
- Attempting to record CPHRM Examination questions in any manner or making notes
- Attempting to take the CPHRM 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 CPHRM Examination materials or notes from the AMP Assessment Center or the testing room

Copyrighted CPHRM Examination Questions

All CPHRM 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 CPHRM Examination questions by any means, in whole or in part. Doing so may result in severe civil and criminal penalties.
FOLLOWING THE CPHRM EXAMINATION

**CPHRM 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 CPHRM Examination in **paper-and pencil format** receives his/her score report from AMP by mail generally about three (3) to five (5) weeks after the CPHRM Examination.
- A candidate who takes the CPHRM 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 CPHRM 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 CPHRM Examination. The score report also includes raw scores for each of the major categories of the CPHRM Examination Content Outline. A raw score is the number of questions answered correctly. Responses to individual CPHRM Examination questions will not be disclosed to the candidate. Even though the CPHRM Examination consists of 110 questions, the CPHRM Examination score is based on 100 questions. Ten (10) questions are “pretest” questions and do not impact the candidate’s score. The minimum passing score for the CPHRM Examination is posted on [http://www.AHACertificationCenter.org/index.shtml](http://www.AHACertificationCenter.org/index.shtml).

Recognition of certification and information about certification renewal are issued from the AHA-CC generally about four (4) to six (6) weeks of successfully completing the CPHRM Examination. This package is mailed to the address contained in the AHA member database.

**How the CPHRM Examination 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 CPHRM Examination. These ratings are averaged to determine the preliminary minimum passing score (i.e., the number of correctly answered questions required to pass the CPHRM Examination). This method takes into account the difficulty of the CPHRM 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 CPHRM Examination.

When new forms of the CPHRM Examination are introduced, a certain number of CPHRM Examination questions in the various content areas are replaced by new CPHRM Examination questions. These changes may cause one form of the CPHRM 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 CPHRM Examinations that have different passing scores, the equating process helps ensure that the levels of examinee knowledge are equivalent on the various CPHRM Examination forms.

**Passing the CPHRM Examination**

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

The AHA-CC, in concert with the personal membership group (PMG), 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 CPHRM Examination will be shared with the PMG. **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 CPHRM Examination**

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

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

- A candidate who applies to retake the CPHRM Examination after 90 days following the failed CPHRM Examination date must submit a completed full-length application (in this CPHRM Handbook or on-line at goAMP.com) and full examination fee.

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

**CPHRM Examination 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 CPHRM Examination results if, upon investigation, violation of CPHRM Examination regulations is discovered.

**CPHRM Examination Score Confidentiality**

Information about a candidate for testing or renewal of certification and CPHRM 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 CPHRM Examination 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 and include the candidate’s name, unique identification number, mailing address, telephone number, and date the CPHRM Examination was completed as well as the $25 fee payable to AMP. After receipt of the request, the duplicate score report is mailed generally within about three (3) weeks.

**Score verification request**

Candidates who do not pass the CPHRM Examination may request a manual verification of the computer scoring. Requests for manual scoring must be submitted to AMP in writing with a $25 hand scoring fee (cashier’s check or money order made payable to AMP) within one year following the CPHRM Examination date. The request must include your name, unique identification number, mailing address, CPHRM Examination date, and a copy of your score report. Please allow 10 business days for processing your request. Candidates close to passing are discouraged from a handscore request. AMP routinely samples examinations of candidates who score near passing to ensure correct reporting of results. These CPHRM Examinations are automatically handscored before results are mailed as a quality control measure. Thus, it is unlikely any CPHRM Examination results will change from “fail” to “pass” after a requested handscore.

**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 Services Center at 312-422-2765.
RENEWAL OF CPHRM 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 CPHRM certification is valid for three (3) years.

Eligible candidates who successfully complete the CPHRM Examination are provided information about certification renewal requirements in a certification package sent by the AHA-CC. The Certification Renewal Application must be submitted up to one (1) year but no less than thirty (30) days prior to the expiration date listed on the certificate.

As a courtesy, the AHA-CC sends 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.

The current CPHRM Certification Renewal Application and fees are available at www.AHACertificationCenter.org.

A certificant shall renew the CPHRM credential through one of the following two ways:

- **Successful re-examination.** To renew this way, successfully pass the CPHRM Certification Examination no more than one (1) year prior to expiration of your CPHRM certification (subject to usual fees and provisions for testing). Submit to the AHA-CC the CPHRM Certification Renewal Application and a copy of your passing CPHRM Examination score report. An additional CPHRM Certification Renewal Application fee is not required if a candidate selects this way to renew the CPHRM designation.

- **Completion of 45 contact hours of eligible continuing professional education** over the three (3)-year period and payment of the renewal fee. To renew this way, submit a completed CPHRM 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 CPHRM Self Assessment Examinations, among other activities. Some activities have limitation on maximum allowable hours. Refer to the current CPHRM Certification Renewal Application for a description of eligible activities and other provisions for renewing your certification.

CPHRM Certification Renewal Application processing generally requires about 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.

**Failing to Renew CPHRM Certification**

A certificant who fails to renew his or her CPHRM 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 or she was unjustly denied eligibility for CPHRM Examination, who challenges results of a CPHRM 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 evidence satisfactory to the Appeal Board that a severe disadvantage was afforded the candidate during processing of an application for CPHRM Examination or renewal of CPHRM certification or prior to or during administration of a CPHRM 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

- Meet the CPHRM Certification Examination Eligibility Requirements.
- Prepare for the CPHRM Certification Examination.
- Read the CPHRM Candidate Handbook fully. Use the CPHRM Examination Content Outline to focus study efforts.
- Apply for the CPHRM Examination by one of the following two ways:
  - Mail or fax the complete CPHRM Examination Application to AMP as directed on the form. Include the CPHRM Examination 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 CPHRM Examination.
  - Apply online for the CPHRM Examination and schedule an appointment to test on computer at an AMP Assessment Center. Visit www.AHACertificationCenter.org, click on “CPHRM,” “Online Application and Scheduling”, and then follow the online instructions.
- Appear on time for the CPHRM Examination on the date and at the time and location selected. Bring the confirmation notice provided by AMP and identification as described in the CPHRM Candidate Handbook.
CANDIDATE INFORMATION

(First Name) __________________________ (Middle Initial) ________ (Last Name) ____________
List name as you wish to be printed on your certificate. Titles and designations will not be printed on the certificate.

Name of Facility/Company/Organization __________________________ Title __________________________

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

Preferred Telephone Number __________________________ email Address __________________________

EXAMINATION TYPE

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

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. By checking a box below, a candidate certifies to the AHA-CC that he or she satisfies the eligibility requirement. 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 re-applicant, i.e., retaking the exam.
□ I am applying for renewal of CPHRM certification.

MMEMBERSHIP 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: ____________

CPHRM 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 __________________________

Copyright 2014 by the AHA Certification Center (rev. January 2016) Page 22
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 Candidate 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: ______________________

NOTE: Name, address, telephone number and email address of candidates who pass the CPHRM Examination are with ASHRM. 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.

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 I am eligible to take the CPHRM Examination and 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 CPHRM Examination results may be delayed or voided.

Name (please print): ______________________________________________________

Signature: ____________________________________________________________  Date: __________________________
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 CPHRM Examination application and fee to AMP at least 45 days prior to 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 ___________________________ Email Address ___________________________________________

ASHRM or other AHA Personal Membership Group Member (PMG) Number __ __ __ __ __ __ __ __ __ __ __

☐ I am not a member of an AHA PMG.

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 St., Olathe, KS 66061-7543

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

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

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