Certified in Care Coordination & Transition Management

CCCTM

Exam Guide

June 2018
Table of Contents

CERTIFICATION and CREDENTIAL...........................................................................................................1
ELIGIBILITY CRITERIA..............................................................................................................................1
APPLICATION INSTRUCTIONS....................................................................................................................1
  FAILSAFE APPLICANTS..............................................................................................................................2
  CERTIFICATION PROGRAM ADMINISTRATION.....................................................................................2
  SPECIAL ARRANGEMENTS..........................................................................................................................2
FEES.............................................................................................................................................................2
AUDITS ...........................................................................................................................................................3
EXTENSION, CANCELLATION/REFUND, RESCHEDULE .........................................................................3
TAKING THE EXAM.......................................................................................................................................3
NOTIFICATION OF EXAM SCORE...............................................................................................................4
RECERTIFICATION.......................................................................................................................................4
DENIAL, SUSPENSION OR REVOCATION OF CERTIFICATION...............................................................4
RIGHT OF APPEAL.......................................................................................................................................5
ABOUT THE EXAM .......................................................................................................................................5
REFERENCE LIST and EXAM PREPARATION RESOURCES .......................................................................7
CONFIDENTIALITY OF APPLICATION, EXAM AND SCORES .....................................................................7
RECORD MAINTENANCE...............................................................................................................................7
ABOUT MSNCB...........................................................................................................................................8
ABOUT AAACN...........................................................................................................................................8
Congratulations on your decision to take the Certified in Care Coordination and Transition Management (CCCTM®) exam. This guide will assist you in learning about the exam, application, and study resources. If you need further information on any topic, please visit msncb.org/ccctm.

**CERTIFICATION and CREDENTIAL**

CCCTM is the result of a collaboration between the Medical-Surgical Nursing Certification Board (MSNCB™) and the American Academy of Ambulatory Care Nursing (AAACN).

Certification is awarded to registered nurses who meet the eligibility criteria and pass the multiple-choice exam.

The designated credential is CCCTM (Certified in Care Coordination and Transition Management). This credential may be used in all correspondence or professional activities. Those who earn the CCCTM credential obtain objective validation of their expertise in Care Coordination and Transition Management (CCTM™) practice.

CCCTM certification is valid for 5 years.

**ELIGIBILITY CRITERIA**

To be eligible to take the exam, *candidates must meet the following requirements at the time of application*:

- Hold an unencumbered and current license as a registered nurse (RN) in the United States or territories,
- Have a minimum of two calendar years experience as a registered nurse (RN) in a Care Coordination and Transition Management role,
- Have practiced a minimum of 2,000 hours in Care Coordination and Transition Management practice within the last three years as a registered nurse (RN). Practice may be clinical, management, or education.
- May practice in an acute, ambulatory, community, sub-acute, school health, or home health care setting.

MSNCB shall not discriminate against any certification candidate on the basis of age, sex, race, religion, national origin, ethnicity, disability, marital status, sexual orientation, or gender identity. MSNCB shall not publish materials with discriminatory content, graphics or language that may be offensive to population subgroups.

**APPLICATION INSTRUCTIONS**

This computer-based exam is administered throughout the year at over 230 locations across the country. Before completing the exam application, visit msncb.org/ccctm to ensure there is a testing center near you.

Applications may be submitted at any time. You will need to include the last four (4) digits of your Social Security number as it serves as part of your identifier.

1. Apply online at msncb.org/ccctm.
2. MSNCB forwards the application to the testing agency, Center for Nursing Education and Testing (C-NET). It is reviewed, and criteria is verified.
   
   **NOTE:** If the application is incomplete or the criteria cannot be verified, the candidate will be contacted to provide the missing information. If the requested information is not received within the stated time frame, the application process will stop and a refund less the $75 processing fee will be given.

3. About 3-5 weeks after submitting your application, C-NET will mail your exam permit or contact you for more information.

   The permit will list a 90-day scheduling window within which to take your exam. It will also contain information about how to contact the computer company, PSI, to schedule your exam.

   *If you do not receive your permit in 5 weeks, contact C-NET immediately at 800-463-0786, ext. 11 or info@cnetnurse.com.*

4. After you receive your permit, contact PSI to schedule the exam. You must schedule your exam date no less than 48 hours prior to your intended exam date.

   **TIP:** Schedule early within the 90-day window that is assigned on your permit.
FAILSAFE APPLICANTS
Candidates enrolling through the MSNCB FailSafe Certification Program™ complete the same application process and use a unique facility code to bypass payment. Visit msncb.org to learn more about the FailSafe Certification Program.

CERTIFICATION PROGRAM ADMINISTRATION
MSNCB works with the testing agency, the Center for Nursing Education and Testing (C-NET®), to offer the CCCTM certification exam. C-NET staff members have extensive experience in the development and administration of certification and licensure exams for nurses.

SPECIAL ARRANGEMENTS
MSNCB and C-NET will make special arrangements to accommodate candidates with disabilities protected under the Americans with Disabilities Act (ADA) that interfere with test taking. To request special arrangements, complete and submit the exam application first to MSNCB, then contact C-NET with documentation of the disability. For questions about acceptable documentation, contact C-NET directly at 800-463-0786, ext. 11.

Please allow 8 weeks for special arrangements. Every effort will be made to accommodate your disability. To submit documentation to: C-NET–CCCTM Exam; 35 Journal Square, Suite 901; Jersey City, NJ 07306.

FEES
Prices are subject to change without notice. To ensure you have the most updated information, visit msncb.org/ccctm.

Application Fee
- $375 Regular
- $255 Academy of Medical-Surgical Nurses (AMSN) or AAACN Member Fee
  (AMSN and/or AAACN membership must be current at the time of application.)
Join AMSN at amsn.org or AAACN at aaacn.org before completing the certification application to receive the member rate.

All application fees include a non-refundable processing/administrative fee of $75.

FailSafe Applicants
Candidates enrolling through the MSNCB FailSafe Certification Program™ complete the same application process. In order to bypass payment, use the unique facility code provided by your facility in the “Apply Discount” box at checkout. Do not enter credit card information.

Extension Fee - $75
The Extension Fee is a service fee and is non-refundable. Extension requests are discussed on page 3.

First-Time Retake Discount - $75 off exam application fee (not applicable to FailSafe applicants)
A candidate who does not pass the first exam may retake the exam with a one-time only, first-time retake discount, valid up to 4 months after the exam date. The discount becomes active approximately 4 weeks after the first exam date. Visit msncb.org/ccctm for more information.

Returned Check Fee - $30
Any candidate whose check is returned for insufficient funds is required to pay this fee. Remittance of fees thereafter must be made by money order, certified check, or credit card.
AUDITS

Our testing agency, C-NET, performs a 5% random audit on all applications to ensure eligibility requirements are met. You will be notified by email if your application has been randomly selected. Your supervisor will be contacted to verify your eligibility. If you receive notification about the audit, inform your supervisor to expect a letter from the testing agency that needs to be completed and returned promptly. Applicants whose supervisors do not respond to the audit request will not be permitted to take the exam. Audited applicants who do not respond to audit requests will be denied and all money forfeited. It is the applicant’s responsibility to ensure that all requested audit information is sent and that their supervisor has returned the verification.

EXTENSION, CANCELLATION/REFUND, RESCHEDULE

EXTENSION

Candidates who are unable to test within the assigned 90-day window listed on their exam permit may request an extension for a $75 service fee.

- Extensions are one-time only per registration, so the candidate must test within the new window.
- Extension requests are only accepted after the original exam permit expiration date and up to 30 days after expiration.
- MSNCB cannot cancel an appointment for you. Candidates must cancel any existing appointment with the computer company PSI no later than 48 hours prior to your exam date. Once cancellation is confirmed, you may request an extension with MSNCB.

Requests that meet criteria are processed in 1-3 business days. In approximately 2 weeks, the candidate will receive a new permit by mail from our testing agency, C-NET. If the new permit is not received in 3 weeks, the candidate should contact C-NET immediately at 800-463-0786, ext. 11.

Extension requests are not available to candidates who registered through the MSNCB FailSafe Certification Program™ or missed an exam appointment.

*The extension fee is a service fee and is non-refundable.*

The Request for Extension form can be found at msncb.org.

CANCELLATION/REFUND

Cancellations are not accepted for the CCCTM exam. If you miss your exam date, your application payment will be forfeited. For FailSafe candidates, a missed appointment will serve as one attempt to test.

MSNCB understands that emergencies happen. If an emergency occurs which prevents you from testing, you may submit an email to msncb@msncb.org to request to cancel and give the special circumstances of the emergency. Supporting documentation must be provided. Each request will be handled on a case-by-case basis. If your cancellation is accepted, you will be refunded the application payment minus the processing fee.

RESCHEDULE

The candidate may reschedule an existing exam appointment with the computer company, PSI, no later than 48 hours before the test date online at cnetnurse.com/cbt or at 800-733-9267. Be sure to make note of the confirmation number.

TAKING THE EXAM

The CCCTM exam consists of 150 scored questions. The time allotted for the exam is 3 hours. Plan to arrive 30 minutes prior to your exam appointment for check-in.

The CCCTM exam is offered at PSI computer centers, which use security and administration standards to provide candidates a suitable testing environment.

IDENTIFICATION:

*You must bring a current government issued photo ID,* such as a driver’s license (temporary paper copy is not acceptable), state-issued ID card, passport, or a notarized photograph bearing the candidate’s signature. The first and last name on your permit **must** match your photo ID. If they do not match, bring supporting documentation of your name change.

- You are not required to bring your exam permit.
- You are not required to bring a copy of your nursing license.
- If you do not have your necessary documents, you will be denied testing and your application payment will be forfeited.
In addition to bringing a photo ID, candidates are digitally photographed. The image prints on the candidate’s score report and is archived with the candidate’s score. Candidates at many locations are also digitally fingerprinted as another level of security.

ADMINISTRATION:
A candidate is provided access to the testing room once the identity has been verified. Candidates will be randomly seated. Candidates are actively monitored by a proctor via visual and audio recording and an observation window.

Candidates will be provided a CBT tutorial before the start of the exam. Also, they are provided with a pencil and one sheet of scrap paper to be collected at the end of the exam.

If a candidate takes a break, the exam clock will continue to run during break times. Candidates may not leave the building during the exam.

RESTRICTIONS:
- No conversing or any other form of communication among candidates in the testing room.
- No children, cell phones, pagers, cameras, books, notes, programmable electronic devices, or recording devices of any kind are permitted to enter the PSI center. Additionally, no personal items are permitted to enter the PSI center, including handbags, backpacks, or heavy coats. PSI will not be responsible for any personal items, and suggests that you leave such items in another safe place of your choosing.
- No smoking, eating, or drinking is permitted in the PSI center.
- Copying or communicating examination content is a violation of security policy and the State Law. Either one may result in the disqualification of exam results and may lead to legal action.

NOTIFICATION OF EXAM SCORE
A standard score of 95, or approximately 72% correct, is required to pass the CCCTM exam. Candidates will receive their test results at the end of the exam. A total score is provided for candidates who pass the exam. A total score and subscores in the major test areas are provided for candidates who do not pass the exam. Subscores on each of the test areas can be used to assist in further study for those who choose to retake the exam.

The MSNCB database will be updated approximately 4 weeks after the exam. Successful candidates will receive a wall certificate and a CCCTM lapel pin. The certification wallet card can be printed online through the CCCTM Tracker.

Certification granted by MSNCB is a voluntary process intended solely to test for special knowledge. MSNCB does not license or define the qualifications of any person to practice nursing. The significance of certification in any jurisdiction or institution is the responsibility of the candidate to determine. The candidate should contact the appropriate state board of nursing or institution in order to determine practice implications.

RECERTIFICATION
CCCTM certification is valid for 5 years. Recertification is available by exam or by continuing education. Certified nurses receive courtesy recertification notices prior to the expiration of their certification. It is the certificant’s professional responsibility to know the certification expiration date.

Recertification applications must be submitted to MSNCB no later than 30 days prior to your expiration date.

For more information on CCCTM recertification, visit msnccb.org/ccctm.

DENIAL, SUSPENSION OR REVOCATION OF CERTIFICATION
The occurrence of any of the following actions will result in the denial, suspension, or revocation of CCCTM certification:
- any restrictions of the professional RN license by a nursing authority such as revocation, suspension, probation, or other sanction
- practicing nursing with a restricted nursing license
- falsification of the application information
- misrepresentation of CCCTM status
- cheating on the CCCTM exam
- failure to pay appropriate fees
A letter of notification will be sent to the certificant/candidate by traceable, secure mail (i.e. UPS or FedEx) and a copy of the letter will be sent to his/her employer.
RIGHT OF APPEAL

A candidate who has failed or a certificant who has had his/her certification denied or revoked has the right to appeal. The appeal request must be submitted in writing within thirty (30) days of notification of the pass/fail status, denial, or revocation of certification. The appeal request should state the specific reasons for the appeal.

MSNCB shall appoint an Appeals Task Force of CCCTM nurses who will review blinded copies of materials sent by applicant/certificant for review. The final decision of the Appeals Task Force will be communicated in writing by the chair to the candidate and to MSNCB within one (1) month of the start of the review process. All decisions of the Appeals Task Force will be final.

ABOUT THE EXAM

MSNCB subject matter experts (SMEs) in collaboration with the testing agency, the Center for Nursing Education and Testing (C-NET®), maintains best practices to ensure individual test items, the test, and published materials related to the exam are free of bias and discrimination (i.e. race, religion, ethnicity, disability, etc.).

EXAM BLUEPRINT

The exam blueprint is the framework for the CCCTM certification exam and is based on a practice analysis. Each test question stems from the exam blueprint and is based on Nursing Role Domains. The following table provides the percentage of exam questions for each Domain of Nursing Practice.

<table>
<thead>
<tr>
<th>Domains of CCTM Practice</th>
<th>% of Test</th>
<th>Ideal Distribution of 150 questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication and transition throughout the care continuum</td>
<td>20%</td>
<td>30</td>
</tr>
<tr>
<td>Education, engagement, coaching and counseling of patients, caregivers, and support network</td>
<td>20%</td>
<td>30</td>
</tr>
<tr>
<td>Population health management</td>
<td>20%</td>
<td>30</td>
</tr>
<tr>
<td>Patient-centered care planning and support for self-management</td>
<td>15%</td>
<td>22-23</td>
</tr>
<tr>
<td>Teamwork and interprofessional collaboration</td>
<td>15%</td>
<td>22-23</td>
</tr>
<tr>
<td>Advocacy</td>
<td>10%</td>
<td>15</td>
</tr>
</tbody>
</table>

DOMAINS OF CCTM PRACTICE

A. Communication and transition throughout the care continuum - 20%
   1. Identify the services, providers, and resources to address patient needs.
   2. Determine appropriate level of care.
   3. Provide patient with options for providers, facilities, and services.
   4. Verify all necessary authorizations from payer are completed prior to transition.
   5. Ensure effective verbal and written communication among providers and care settings.
   6. Provide structured hand-off reports with consistent content, e.g., SBAR, discharge check-off list.
   7. Communicate transition plan of care to patient, caregiver, and support network.
   8. Meet applicable regulatory communication requirements, e.g., interpreters, EMTALA, nurse licensure compact, etc.
   9. Verify referral of care acceptance from one provider or service to another.
   10. Ensure seamless transition while maintaining continuity of care.
   11. Monitor the outcomes of the transition process.
   12. Adjust the plan of care based on identified risks.
   13. Use care coordination and transition models (e.g., BOOST, PAM, GRACE, Modified LACE, CTI, Ask Me 3) for assessment, risk stratification, care planning, etc.
B. Education, engagement, coaching and counseling of patients, caregivers, and support network - 20%
1. Assess patient’s health literacy, readiness for learning and learning style.
2. Utilize motivational interviewing techniques to engage patient.
3. Recognize the social, environmental, and cultural factors and disparities in health care in designing and implementing interventions.
4. Recognize and encourage patient, caregiver, and support network’s participation as active members of the team.
5. Develop individualized education strategies to address the plan of care and the patient, caregiver, and support network’s goals.
6. Assist patient to develop SMART goals (Specific, Measurable, Achievable, Realistic, Time-specific).
7. Identify and provide necessary resources to assist patient to achieve goals.
8. Incorporate “teach back” to monitor and evaluate patient’s level of understanding.
9. Identify barriers to adherence to the plan of care.
10. Re-evaluate and adjust the education plan as indicated.
11. Assess patient’s understanding of the disease process and plan of care.

C. Population health management - 20%
1. Identify target populations utilizing appropriate inclusion criteria.
2. Identify measures for risk stratification, e.g., predictive modeling, lab values, claims data, core measures (heart failure, pneumonia, SCIP).
3. Address the gaps in care for preventive services and chronic condition management.
4. Promote patient engagement, e.g., motivational interviewing, tailored coaching, self-management promotion, counseling, and incentives.
5. Create an individualized plan of care that incorporates standards of care for the particular target population.
6. Incorporate preventive, wellness, and chronic care needs in plan of care, including immunizations.
7. Utilize automated outreach systems and reminders for preventive care management.
8. Optimize information management and communication through the use of informatics and decision-support systems.
9. Integrate telecommunications technologies to increase access, improve outcomes, and contain/reduce costs of healthcare.
10. Use information management tools to monitor outcomes of care processes.
11. Stay current with emerging trends, new legislation, and payment and reimbursement models in the provision of care design and delivery in the populations managed.

D. Patient-centered care planning and support for self-management – 15%
1. Perform a comprehensive needs assessment.
2. Review patient’s record to identify gaps in care and individualize the plan focus.
3. Identify conditions that place patient at high risk.
4. Perform a telephonic or face-to-face visit with the patient to identify patient needs and barriers to care.
5. Assess patient’s understanding with current health status and needs.
6. Identify the patient’s short and long-term goals.
7. Incorporate patient values, goals, and preferences into planned care activities.
8. Assess patient’s understanding of chronic condition(s).
9. Determine the patient’s adaptation to illness or stressors.
10. Support knowledge and understanding of health promotion and disease prevention.
12. Incorporate care regimen into daily practices.
13. Assist the patient, caregiver and support network to self-evaluate to measure success against individualized goals.

E. Teamwork and interprofessional collaboration - 15%
1. Identify the care team participants based on patient needs.
2. Develop partnerships with patient, caregiver, and providers to create an individualized plan of care.
3. Describe strategies for identifying and managing team member roles and accountabilities.
4. Use effective professional communication skills and tools to disseminate relevant information among team members.
5. Identify processes to overcome barriers to effective collaboration and teamwork, e.g., updating scheduling information, staff education, “huddles”.
6. Utilize patient, caregiver, and support network care conferences to resolve transition conflicts to optimize the continuum of care.
7. Assist interprofessional team members to reprioritize activities according to immediate patient needs, e.g., specialty consultations, procedure delays, and equipment failure.
8. Examine strategies for improving systems to support team functioning.

**F. Advocacy - 10%**
1. Support and educate patient to make informed decisions regarding their plan of care.
2. Empower patient in navigating the healthcare system for access to the appropriate care.
3. Encourage patient to build strong partnerships with healthcare team members.
4. Apply principles of professional codes of ethics to ensure individual rights.
5. Preserve patient’s rights to confidentiality, privacy, and self-determination within legal, regulatory, and ethical parameters.
6. Apply change management principles by using data to improve patient and systems outcomes, e.g., team development processes, office dynamics.
7. Address barriers to access to services for underserved, vulnerable, and at-risk populations, e.g., transportation, housing, finances, healthcare.
8. Employ communication skills including assertiveness, negotiation, and conflict resolution to promote positive health outcomes.
9. Recognize the connections among health, poverty, mental illness, and homelessness as important elements of effective practice involved in the coordinated care of impoverished, underserved, and vulnerable populations.

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**REFERENCE LIST and EXAM PREPARATION RESOURCES**
A complete list of references used during the development of the CCCTM exam, along with several other study resources, can be found at msncb.org/ccctm. They will be helpful in preparing for the exam.

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**CONFIDENTIALITY OF APPLICATION, EXAM AND SCORES**
All application information is considered confidential and is not shared with ANY outside party. It is used only by MSNCB, the testing agency, C-NET, and the computer company, PSI, for certification processing purposes. To insure the security of the exam, the test materials are confidential and will not be released to any person or agency.

Pass/fail status will be released to outside parties only when submitted with a written authorization signed by the candidate. Any additional information about a candidate’s individual test results will be released only to the candidate, upon written request. Enrolled MSNCB FailSafe Certification Program™ candidates, by nature of participating in their facility’s program, grant the right to their employer to receive a pass/fail outcome.

MSNCB maintains a searchable directory of all CCCTM nurses on its website, msncb.org.

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**RECORD MAINTENANCE**
MSNCB and the testing agency, C-NET, will retain electronic records of all candidates and certificants for at least five (5) years. It is the professional responsibility of the candidate/certificant to notify MSNCB of any change in name, address, phone, and email either before testing or during the 5-year certification period.
ABOUT MSNCB

The Medical-Surgical Nursing Certification Board (MSNCB™) is a nonprofit organization whose mission is to validate excellence in medical-surgical nursing and care coordination and transition management.

MSNCB is composed of seven board members: five who hold an MSNCB certification, a public member, and an ex-officio member (the current AMSN president or designee). MSNCB nurse members are appointed to represent the diverse roles and settings in which medical-surgical nurses and care coordination nurses practice as well as varied demographic characteristics.

MSNCB National Office

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>Delivery Service</th>
<th>Toll-Free: 866-877-2676</th>
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<tbody>
<tr>
<td>MSNCB</td>
<td>MSNCB</td>
<td>Fax: 856-589-7463</td>
</tr>
<tr>
<td>PO Box 56</td>
<td>200 East Holly Avenue</td>
<td>Email: <a href="mailto:msncb@msncb.org">msncb@msncb.org</a></td>
</tr>
<tr>
<td>Pitman, NJ 08071</td>
<td>Sewell, New Jersey 08080</td>
<td>Website: msncb.org</td>
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</table>

ABOUT AAACN

AAACN is the national professional nursing specialty organization for registered nurses in all ambulatory care settings. AAACN developed the CCTM-RN model of care coordination and provides study resources for the CCCTM exam.

AAACN National Office

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