Table of Contents

Vision Statement ............................................................................................................. 3

Mission Statement ......................................................................................................... 3

Goals ............................................................................................................................. 3

Certification Product ..................................................................................................... 3

Advisory Board ............................................................................................................. 3

Advisory Board Members ............................................................................................ 4

Benefits of Obtaining the COPM Designation .............................................................. 4

Qualifications for Applying to Become a COPM ......................................................... 4

Application Term .......................................................................................................... 4

Fees ............................................................................................................................... 4

Exam Cancellation Policy ............................................................................................ 5

Special Exam Day Accommodations .......................................................................... 5

COPM Examination Core Competencies .................................................................... 5

Discrimination ............................................................................................................... 6

Key Dates ...................................................................................................................... 6

COPM Recertification Program Policies ..................................................................... 6

Content Outline .......................................................................................................... 7

COPM Frequently Asked Questions .......................................................................... 10

Sample Questions ....................................................................................................... 12
Vision Statement
The Certification in Otolaryngology Practice Management (COPM), sponsored by the Association of Otolaryngology Administrators, is awarded to individuals who have demonstrated mastery of core competencies specific to Otolaryngology Practice Management. The COPM Certification signifies success in a leadership role and the ability to manage a practice in the most professional and resourceful manner.

Mission Statement
The Certification in Otolaryngology Practice Management (COPM) defines the knowledge required to successfully manage today’s otolaryngology practice.

Goals of the Education and COPM Advisory Board
- Establish, implement and maintain national certification standards, policies and procedures for the otolaryngology practice management certification.
- Establish, implement and maintain eligibility and examination standards for the COPM program.
- Promote and implement professional credentialing and psychometric methods and procedures for certification in the otolaryngology practice management profession.
- Initiate and foster lifelong learning and sustaining excellence in otolaryngology practice management.
- Implement and develop education content for AOA.

Certification Product
Certification in Otolaryngology Practice Management – the COPM exam will be administered annually, immediately preceding the AOA Annual Education Conference, as well as via computer based testing (CBT), or on your own device any time of year. Please Note: The exam can be taken at your convenience. To schedule your exam, please contact Marcia at the AOA Office: 412-243-5156 x101. You should allow for 2 business days from the time of payment to receive the e-mail with the link and instructions necessary to begin the exam. Results are made available to your e-mail immediately. Please note: tests are reviewed and verified.

Advisory Board
The COPM Board is the sole organizing body whose responsibility is to develop, implement and monitor the COPM program. A national Advisory Board for the COPM has been established to review and monitor this program. The National Advisory Board is comprised of leaders in the field who hold the designation. The Board is approved by the AOA.
Advisory Board Members
Joanne Gauthier, COPM
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Patricia Brown-Oliver, COPM
pbrownoliver@headandnecksurgical.org
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Benefits of Obtaining the COPM Designation
- Sustaining excellence in lifelong learning of otolaryngology practice management
- Personal satisfaction
- Demonstration of your commitment to your profession
- Increased value to your patients, physicians and staff
- Professional development that increases knowledge of all aspects of otolaryngology management
- Formal recognition of your accomplishment
- Authority to use the COPM designation

Qualifications for Applying to Become a COPM
The COPM Board evaluates applications on an ongoing basis and a rolling acceptance will be continuous until the application deadlines.

In order to qualify as a candidate for the COPM Examination, an individual must have:
- A minimum of two years of experience in an ambulatory or other healthcare management position that contributes to the mission of AOA-COPM, including at least 6 months in a supervisory role.

Application Term
Approved applications are valid for a one-year period. Candidate must meet the same qualifications during the one-year period.

Fees:
Application: $ 25
Exam:
- Member, First Time $250
- Non-members $499
Retest within one year $ 0
Retest after one year $100
Yearly assessment for credentialing $ 75
After becoming a COPM, you will be billed for your yearly assessment during your next dues billing cycle.

**Exam Cancellation Policy**
Candidates may cancel their registration if written notification is received by the AOA at least 30 days prior to the day of the examination. A cancellation fee of $100 (US) for the written exam and $150 (US) for computer-based testing (CBT) will be assessed.

The remainder of the examination fee will be refunded. Cancellations made less than 30 days prior to the exam and no-shows on the day of the exam will forfeit the entire examination fee.

**Special Exam Day Accommodations**
Any individual who has a physical or cognitive impairment or limitation that prevents him/her from taking the exam under standard testing conditions may request special testing arrangements. The types of accommodations that may be provided include large print, a person to read and/or mark the answer sheet, extended time (if requesting extended time please indicate how much time is needed), and/or a separate testing room.

When submitting the application, include a separate letter and documentation describing:
- the candidate's disability or special need,
- the specific adaptation requested, and
- documentation from a physician and/or other appropriate diagnostic authority concerning disability and special need.

If religious beliefs prohibit an individual from taking the examination on the scheduled date of an exam, an alternate day may be requested. The request must be accompanied by a letter of confirmation from the individual's clergy.

After reviewing requests, the applicant will receive a confirmation letter from the COPM office confirming the special arrangements that are granted.

**COPM Examination Core Competencies**

The COPM examination is based on the knowledge required of an otolaryngology practice management professional. That knowledge base is specified within six topic areas designated as practice management "functions." In addition, practice managers must recognize that each function is impacted by or relevant to the "conditions" under which practices are organized. Consequently, examination questions are written to assess an individual candidate's knowledge in terms of practice management functions and the conditions associated with those functions.

The examination is composed of 150 test questions based on the COPM Core Competency areas. Each examination offered is a different examination representing a new selection from the bank of test questions. The COPM Core Competency areas are listed below. The percentages designate the questions from each topic divided by the total questions that may be included in an individual examination.
Basic Otolaryngology Knowledge 15%
Finance and Accounting 30%
Marketing 7%
Operations 53%
Technology 15%
Human Resources 30%

Discrimination
The AOA does not discriminate against any individual on the basis of race, color, religion, sex, sexual preference, national origin, age, disability, or any other characteristic protected by law.

Key Dates
• Application deadline
  o AOA Annual Education Conference written exam: Two weeks prior to exam: contact Marcia at the AOA Office 412-243-5156 x101.
  o Computer-based testing on your own device, during the Annual Meeting: contact Marcia at the AOA Office 412-243-5156 x101.
  o Computer-based testing at your convenience on your own device: contact Marcia at the AOA Office. 412-243-5156 x101.

• Examination date
  o Written exam: Wednesday prior to the AOA's Annual Education Conference
  o Computer-based testing: any time of year plus at the conference

• You have one year in which to take and pass the exam.
• Approximately two weeks before the examination date, candidates who registered will be sent written confirmation of the final examination arrangements, including site, room location and time of exam. Candidates opting for the CBT will receive instructions via email concerning how they will be taking the exam.
• After taking the written exam, you will receive your results within one week
• Computer-based testing offers results immediately following exam completion.
• If you pass the exam, a certificate will be sent to you after you receive your notification letter.

COPM Recertification Program Policies
To maintain COPM status, COPM professionals must recertify every two years. Recertification is required every year if you leave the AOA for a different practice management position in a specialty other than otolaryngology and want to maintain your COPM designation. The recertification supports on-going practice management work experience and professional development. Recertification can be done through continuing education credits or retesting if preferred. Please refer to the COPM Recertification Requirements form for complete details.
COPM Content Outline
Reviewed May 2015

I. Basic Otolaryngology Knowledge -- 15%
   A. Knowledge of basic otolaryngology terminology
   B. Familiarity with basic otolaryngology procedures and protocols, and patient services
   C. Familiarity with basic otolaryngology instruments
   D. Knowledge about otolaryngology practice triage
   E. Anatomy
   F. Pharmacology relevant to otolaryngology

II. Finance and Accounting -- 30%
   A. Practice generally accepted accounting principles (i.e. GAAP)
      1. General ledger
      2. Cash flow
      3. Income statement
      4. Depreciation
      5. Balance sheets
      6. Accounts receivable
      7. Payroll
      8. Accounts payable
      9. Audit trails
   B. Study and evaluate operations and financial reports
   C. Prepare and monitor budgets
   D. Demonstrate an understanding of corporate structure and its tax implications
   E. Implement and coordinate accounting procedures
      1. Internal controls
      2. Protocols
   F. Develop a cost/benefit analysis
   G. Mergers and buyouts

III. Marketing -- 7%
   A. Conduct internal and external customer satisfaction surveys
   B. Develop and implement a marketing plan
   C. Design, implement and monitor advertising and promotional programs
   D. Plan and conduct public relations programs
   E. Referral management and development
   F. Develop and implement a marketing strategy

IV. Operations -- 53%
   A. Develop, prepare, analyze and monitor operational reports
      1. Productivity
      2. Financial
      3. Utilization
      4. Inventory
      5. Staffing Reports
   B. Identify need, create and implement policies and procedures
   C. Practice improvement and quality measurers
      1. HCAP
Handbook for the Certification in Otolaryngology Practice Management (COPM)

2. Incentives
3. PQRS

D. Risk Management
1. Malpractice
2. Minimize legal exposure
3. HITECH compliance
4. Patient relationships
7. Patient records release

E. Compliance
1. HIPAA
2. CMS

F. Revenue Cycle
1. Coding
2. Documentation requirements
3. Reimbursement monitoring
4. Incident to
5. Establish fee schedule
6. Quality Indicators
7. Performance incentives

G. Establish and maintain external relationships (i.e., vendors, third-party payors, referral sources)

H. Develop, implement and monitor a business and/or strategic plan

I. Manage and maintain property, facilities, equipment and supplies

J. Design, implement, and monitor organizational structure

K. Payor & Contract Review and Negotiation

V. Technology -- 15%
A. Terminology of information systems

B. Analyze and manage IS
1. Computer systems
2. Phone systems
3. Telemedicine
4. Electronic medical records/Electronic Health Record
   a. Meaningful use
5. Integration of systems (i.e., LANS, WANS, etc.)
6. Electronic billing

C. Hardware and software
1. System maintenance
2. File maintenance

D. Database administration

VI. Human Resources -- 30%
A. Develop and administer personnel policies (clinical and non-clinical personnel and providers)
1. Job descriptions
2. Recruitment and hiring/on-boarding
3. Retaining
4. Essential job duty
5. Training and development
6. Discipline and dismissal
7. Performance Evaluation
B. Formulate and administer compensation and benefit programs
   1. Salary and benefit surveys
   2. Physician compensation
   3. Incentive plans
   4. Insurance benefits
   5. Retirement benefits
   6. Other benefits

C. Understand and comply with federal laws & regulations and guidelines pertaining to personnel
   1. Department of Labor
   2. Fair Labor Standards Act
   3. Americans with Disabilities Act
   4. Family and Medical Leave Act
   5. Equal Employment Opportunity Commission
   6. Equal Pay Act
   7. Civil Rights Act/Title VII
   8. Age Discrimination in Employment Act
   9. Affirmative Action
   10. Employee Retirement Income Security Act
   11. Worker’s Compensation
   12. Health Insurance Portability and Accountability Act
   13. Consolidated Omnibus Budget Reconciliation Act
   14. Occupational Safety and Health Administration
   15. National Labor Relations Act

D. Leadership Development
   1. Negotiating
COPM FAQs

Q1: What is the COPM program?
A: The AOA provides members with the opportunity to earn the Certificate of Otolaryngology Practice Management through a formal pathway to certification. The COPM designation represents the standard of excellence in today’s otolaryngology practice manager.

Q2: Why should I obtain the COPM designation?
A: The benefits of obtaining the COPM designation include:
   - Sustaining excellence in lifelong learning of otolaryngology practice management
   - Personal satisfaction
   - Demonstration of your commitment to your profession
   - Increased value to your patients, physicians and staff
   - Professional development that increases knowledge of all aspects of otolaryngology management
   - Formal recognition of your accomplishment
   - Authority to use the COPM designation

Q3: What do I need to qualify as an applicant?
A: A minimum of two years of experience in an ambulatory or other healthcare management position that contributes to the mission of AOA-COPM, including at least 6 months in a supervisory role

Q4: How do I prepare for the COPM exam?
A: The applicant should review the COPM Handbook for detailed information. In addition, the AOA Resource Manual, based on the core competencies, has been developed and recently made available for purchase to help you prepare for the exam. Of course you may also study any other information which you believe will help you review sufficiently for the examination.

Q5: What do I need to do to become a COPM?
A: To apply to take the exam:
   1) Complete the application online at www.AOAnow.org/COPM.
   2) Complete the application and submit it to the AOA office along with the applicable fee.
   3) Qualified applicants may sit for the examination at either the next AOA Education Conference or use the computer-based testing on your own device at your convenience.

Q6: Who can I ask for help or guidance to obtain certification?
A: Other COPM’s are participating in a Mentor Program. Contact the AOA office or COPM@AOAnow.org or contact the COPM Education Board. This person will be available to answer questions and provide guidance to you on your pathway to certification.

Q7: What are the core competencies of the COPM examination?
A: The core competency areas consist of Basic Otolaryngology Knowledge (10%); Finance and Accounting (20%); Marketing (5%); Operations (35%); Technology (10%) and Human Resources (20%).

Q8: How do I know in which area I need to concentrate my studies?
A: Check out the AOA website, www.AOAnow.org/COPM and look for the COPM Self-Assessment Tool found in the store. You have the ability to assess your knowledge and readiness for the exam by gaining some experience with the type of questions that are asked. At the end of the quiz, you will be scored and a recommendation provided based on your performance and the core competencies.

Q9: I realize the conference and exam date is within a few weeks, but
I have been so busy I just haven’t had time to complete it. Can I still send it in?
A: Absolutely. Just complete the application online along with the applicable fees.

Q10: What happens if I take the COPM exam and fail?
A: The eligibility for the COPM Examination is valid for a one year period. In the event you do not pass the COPM exam on the first attempt, you are encouraged to repeat it. We suggest retaking the CBT within six months. If you prefer the Annual Education Conference option, you should take it at the next AOA Annual Education Conference.

Q11: For the next exam, I am unable to attend the AOA Annual Education Conference. Is there any way I can take the exam?
A: The COPM examination is also offered by computer based testing (CBT). You must take the test on a computer (not a tablet). The CBT exam can be taken at any time of year. There is no charge if you retake the test within one year.

Q12: Can I cancel my COPM exam after I have already signed up?
A: Yes, candidates may cancel their registration. Their application fee will be returned, less $100, more than 30 days prior to the exam. Cancellations made less than 30 days prior to the examination and no shows on the day of the examination, will forfeit their entire examination fee.

Q13: I have a new address; how should I inform AOA?
A: You may submit your new address via the AOA website, www.AOAnow.org, or contact the Association Headquarters at 412-243-5156 or COPM@AOAnow.org.

Q14: If I have more questions, who should I contact?
A: You may visit the AOA website, www.AOAnow.org, or contact Marcia at the AOA Headquarters at 412-243-5156 x101 or COPM@AOAnow.org.

Q15: I haven’t taken a test in several years, any suggestions?
A: The Mentor program can offer support while you prepare. The COPM Self Assessment Tool can provide insight as to the subject matter you need to improve upon. Consult the Handbook and consider purchasing the AOA Resource Manual as well as joining the COPM study group forum.

Q16: I didn’t pass the Self Assessment Tool, why should I try the actual exam?
A: The Self Assessment Tool is not an absolute indicator of testing success. Rather it helps identify the areas you may want to focus your preparation. Most COPM designees study and improve their knowledge base, as very few Otolaryngology practice managers are fully skilled in all core competencies.

Q17: Who will know if I don’t pass the exam?
A: The application and testing process is completely confidential. Confidentiality is also stressed when a group of candidates are testing at the AOA Annual Education Conference. The only people who will know the outcome of your exam are those with whom you’ve personally discussed the outcome.

Q18: What happens if I obtain my COPM designation and later move into a practice management position in a different specialty other than otolaryngology?
A: To maintain your COPM designation if you leave otolaryngology you must pay a $100.00 recertification fee and submit 15 hours of CEU’s by Jan. 31 each year.
1. The practice productivity report is initially used to:
   A. identify inconsistencies in volume
   B. measure costs of all productivity
   C. identify physician and staff absences
   D. identify insurance billing problems

2. Budgeting for group revenues and expenses are a component of which part of a comprehensive budget:
   A. the cash budget
   B. the capital expenditures budget
   C. the accounts payable budget
   D. the profit plan

3. One of your physicians performs a total laryngectomy on a patient diagnosed with cancer of the larynx. After this surgery, you know that this patient may be a candidate for:
   A. changing their diet to limit fatty and spicy foods
   B. raising the head of their bed 6” to 8” when lying down
   C. voice reconstruction as his voice box has been removed
   D. voice rest for two weeks

4. Employees terminated are eligible for COBRA benefits for how long after termination?
   A. 6 months
   B. 12 months
   C. 18 months
   D. 24 months

5. How many employees must an employer have before it is required to file an EEO-1 employer information report annually as required by EEOC?
   A. 10
   B. 100
   C. 1,000
   D. 10,000

6. The minimum retention period for time cards is:
   A. 1 year
   B. 2 years
   C. 7 years
   D. indefinitely

7. What is the chief benefit of accrual accounting?
   A. it more accurately matches expenses and revenues
   B. it records expenses as they are paid
   C. it defers expenses and records revenue when collected
   D. it records receivables when collected

8. OSHA training records must be maintained how long from the date of training?
   A. 3 years
   B. 7 years
   C. 3 years after separation of service
   D. 30 years after separation of service
9. The four step approach in developing a marketing plan includes assessing the practice, identifying the market, establishing a plan of action and:
   A. evaluating the market
   B. computing the cost
   C. gauging progress
   D. measuring results

10. What consists of the following eight elements: location, quality, severity, duration, timing, context, modifying factors and associated signs and symptoms?
   A. Chief Complaint
   B. History of Present Illness
   C. Review of Systems
   D. Physical Exam

Key: 1A, 2D, 3C, 4C, 5B, 6B, 7A, 8A, 9D, 10B