CERTIPORT
A PEARSON VUE BUSINESS

Medical Administrative Assistant
Objective Domains

Candidates for this certification have a foundational knowledge of the domain subjects listed, as well as an understanding of the issues surrounding the processes, terminology, billing, and recordkeeping in a medical office. Successful candidates will be able to analyze and resolve problems involving social situations and compliance issues. They should be able to demonstrate knowledge of appropriate patient communication, medical records, and health-related legal questions. 150 hours or more of instruction and/or hands-on experience should be completed prior to taking this exam.

1. Interpersonal Communication and Teamwork

1.1 Given a scenario with a patient issue, determine how to resolve or de-escalate the issue.

1.2 Given a scenario, determine when to report issues in the office.

1.3 Given a scenario, identify the presence of potential bias.

2. Basic Healthcare Terminology

2.1 Identify the definition of common office terms including but not limited to all log, spreadsheet, scheduling/scheduler, encryption, electronic medical record (EMR), prescription, authorized representative (who); in-network insurance, and out of network insurance.

2.2 Distinguish between diagnostic tests and procedures.

2.3 Identify the definition of major organs to body systems and their medical specialists.

2.4 Identify the definition of legal terms in the healthcare setting including but not limited to healthcare proxies, power of attorney, ADA, patient's rights, scope of practice, HIPAA, mandatory reporter, authorized representative, and informed consent.

2.5 Identify the definition of terms for healthcare providers including but not limited to Pharmacist, Pediatrician, Psychiatrist, Behavioral Interventionist, Oncologist, Primary Care Physician, Physician Assistant/Nurse Practitioner, Licensed Practical Nurse/ Licensed Vocational Nurse, and Registered Nurse

2.6 Identify the definition of terms for standard precautions including but not limited to PPE, hand hygiene and biohazards.

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3. Basic Billing Knowledge

3.1 Classify different payment sources including but not limited to billing, coding, payments, insurance, cash, and government assistance.

3.2 Identify important components of insurance cards including but not limited to group ID number, member ID number, and RX ID.

3.3 Identify the definitions of different billing terms.

4. Office Procedures

4.1 Given a patient call, determine the proper sequence of steps to make an appointment.

4.2 Given a scenario, identify the difference between emergent and non-emergent patients.

4.3 Identify required patient information including, but not limited to, ID, insurance, referrals, previous medical records, form of payment, and chosen pharmacy.

4.4 Determine how patient will pay for a visit including insurance coverage and private payment.

4.5 Given a scenario, identify which complies with HIPPA communication rules.

5. Medical Health Records and Patient Confidentiality

5.1 Identify the correct procedure for handling medical records requests.

5.2 Identify how to store, maintain, and transfer data securely.

5.3 Identify when and how to dispose of sensitive documents.

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