

2014 to 2021 CMAA Test Plan Crosswalk

Crosswalk Section: The following bridges tasks on the 2014 CMAA test plan with task statements on the 2021 CMAA test plan.

2014 NHA Test Plan Number	TASK DESCRIPTION	2021 NHA Test Plan Number	TASK AND <i>KNOWLEDGE</i> DESCRIPTION/DOMAIN
DOMAIN 1	SCHEDULING		
1.A.	Evaluate different types of patient scheduling	4.A.	Determine optimal scheduling based on considerations such as purpose for appointment, type of service, appointment intervals, provider's preferences, availability, needs, and schedule matrix.
1.B.	Determine scheduling needs of the facility, as well as new and established patients	4.D.	Schedule appointments in the EHR and/or manually.
		4.B.	Determine appropriateness for a telehealth appointment and if applicable, provide patient with specific instructions for connection, and schedule as telehealth appointment.
1.C.	Follow protocol for no-show, missed, cancelled, or follow-up appointments	4.C.	Initiate patient registration (if needed) and collect/verify patient information (e.g., name, date of birth, insurance, billing address, best method of contact and accurate contact information)
		4.F.	Follow protocols for no-show, missed, cancelled, or rescheduled appointments.
1.D.	Arrange for diagnostic testing and procedures	4.G.	Arrange for diagnostic testing and procedures including pre-authorization, referrals, scheduling pre-admission testing, and schedule follow-up appointments.

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1.E.	Confirm future appointments	4.E. 5.H.	Confirm appointments, monitor patient portal notifications, and provide patient with instructions (e.g., bring identification and proof of insurance, copay requirements, arrival time). Conduct patient check-out procedures (for example, provide post-visit summary documents, discuss required follow-up, address patient questions).
DOMAIN 2	PATIENT INTAKE		
2.A.	Confirm demographic information with patient	5.A. 5.G.	Welcome and check-in patients, collect/verify identification and demographic information (for example, check ID, address, phone number, date of birth), and make changes as needed. Identify and flag duplicate patient electronic health records that may require merging.
2.B.	Verify insurance information	5.B.	Verify insurance information, including reviewing insurance card and coverage benefits, copayment/coinsurance, secondary or tertiary insurance, or changes in coverage.
2.C.	Ensure forms are updated or completed	5.D. 5.F.	Ensure completion of required patient intake forms (for example, assignment of benefits, notice of privacy practices, advance directives, release forms, financial responsibility). Ensure all pertinent information has been entered into the electronic health record (EHR), including information from intake forms and test results from previous visits.
2.D.	Prepare encounter form	5.E.	Generate encounter documentation and verify accuracy of information with patient.

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2.E.	Prepare daily charts	4.H.	Conduct pre-appointment screening and confirmation (e.g., symptom screening questionnaires, vaccination questions, insurance or health status changes, technology capability and assistance checks for telehealth).
DOMAIN 3	OFFICE LOGISTICS		
3.A.	File medical records	7.A.	Manage and review medical records to ensure records are secure, complete, up-to-date, and sign-off has occurred.
3.B.	Perform financial procedures	6.A.	Prepare documentation for billing.
		6.B.	Perform charge reconciliation (for example, correct use of electronic health record software, entering charges, posting adjustments, accounts receivable procedures).
		6.C.	Bill patients, insurers, and third-party payers for services performed.
		6.D.	Perform payment collection (for example, copays, and create statements).
		6.E.	Support resolution of billing issues with insurers and third-party payers, including appeals and denials.
3.C.	Evaluate mail deliveries	7.D.	Verify contents of deliveries and sort and distribute to appropriate recipients.
DOMAIN 4	COMPLIANCE		

2014 NHA Test Plan Number	TASK DESCRIPTION	2021 NHA Test Plan Number	TASK AND <i>KNOWLEDGE</i> DESCRIPTION/DOMAIN
4.A.	Follow HIPAA guidelines	3.B. 3.C. 3.E.	<p>Maintain confidentiality and security of protected health information (PHI) in compliance with standards and guidelines such as the HIPAA Privacy and Security Rules and organization/facility policy.</p> <p>Release protected health information (PHI) in accordance with the HIPAA Privacy Rule and organization/facility.</p> <p>Adhere to requirements regarding reportable violations or incidents (for example, fraud, security breach, errors in patient care, accidents in the workplace).</p>
4.B.	Follow OSHA guidelines	3.A.	Ensure compliance with laws, regulations, and guidelines (for example, Occupational Safety and Health Administration [OSHA], The Joint Commission’s National Patient Safety Goals, Centers for Medicare & Medicaid Services [CMS], the Office of the Inspector General [OIG], Americans with Disabilities Act Amendments Act [ADAAA]).
4.C.	Follow the Center for Medicare/Medicaid Services (CMS) guidelines	3.G.	Adhere to professional codes of ethics.
DOMAIN 5	<i>PATIENT EDUCATION</i>		
5.A.	Explain the Patients’ Bill of Rights	3.D.	Adhere to the Patient's Bill of Rights (also known as The Patient Care Partnership) including rules regarding consent, the right to go to a medical specialist, the right to keep the same physician or be seen by another physician, the right to a second opinion, medical record ownership, right to refuse treatment, and ADA compliance.

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5.B.	Explain the patients' insurance responsibilities	5.C.	Discuss financial responsibilities of the patient and respond to common questions regarding insurance (for example, copayments, coinsurance, deductibles, allowed amounts).
5.C.	Explain pre- and post-instructions for testing and procedures	2.G.	Provide written and verbal instructions for pre/post tests and procedures as prescribed by providers.
DOMAIN 6	<i>GENERAL OFFICE POLICIES AND PROCEDURES</i>		
6.A.	Perform office opening and closing procedures	7.B. 7.C.	Perform financial procedures, such as management of petty cash and end-of-day financial reconciliation. Perform opening and closing procedures, including enabling/disabling answering service, checking messages, allowing time for system updates, preparing medical records for the day, planning for daily activities, turning equipment on/off, cleaning reception area, and stocking supplies.
6.B.	Greet patients upon arrival	2.B. 2.C. 2.D.	Manage challenging/difficult customer service occurrences and patient interactions. Adapt verbal and nonverbal communication to diverse audiences (for example, patients and caregivers, medical and non-medical personnel, external entities). Adapt verbal and nonverbal communications with patients and caregivers based on special considerations (for example, language barriers, pediatric, geriatric, hearing impaired, vision impaired, persons with disabilities, health literacy level).
6.C.	Apply telephone etiquette	7.F.	Follow proper telecommunications procedures, including introduction of organization/facility and self, identification of caller needs, management of hold times, and directing calls to proper parties when needed.

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6.D.	Create correspondences	7.G.	Create correspondences using templates, proper greetings and salutations, proper postage, and required signatures.
6.E.	Demonstrate basic computer skills	7.H.	Demonstrate basic computer skills including use of email, word processing, spreadsheets, internet, and hardware (for example, copiers, fax machines, scanners).
DOMAIN 7	BASIC MEDICAL TERMINOLOGY		
7.A.	Use medical terminology to communicate with patients and physicians.	2.A. 1.k5.	Communicate with patients, caregivers, providers, other personnel, and third-party payers. <i>Spelling, pronunciation, and definition of medical terms</i>
7.B.	Recognize abbreviations and acronyms used to complete administrative duties	1.k6. 1.k7. 1.k8.	<i>Common professional abbreviations and acronyms</i> <i>Acceptable and unacceptable professional abbreviation practices</i> <i>The Joint Commission's (TJC) "Do Not Use" List</i>
7.C.	Use word parts (i.e., prefixes, roots, suffixes) to define medical terminology	1.k5. 1.k9.	<i>Spelling, pronunciation, and definition of medical terms</i> <i>Prefixes, roots, and suffixes (for example, an-, hyper-, hypo-, cardi/o, vascul/o, -osis, -pathy, -ist)</i>

New Tasks

The following is a list of the tasks that will be new areas of coverage on the 2021 CMAA test plan

2021 NHA CMAA Test Plan Number	Task or <i>knowledge</i> description
2.E.	Clarify and relay communications between appropriate parties, as needed.
2.F.	Facilitate and promote teamwork and team engagement.
2.H.	Provide patients with information regarding educational and community resources.
2.I.	Demonstrate professionalism (for example, appropriate appearance, hygiene, demeanor, maintaining professional boundaries, language, and tone).
3.F.	Perform duties within legal scope of practice.
7.E.	Manage inventory of administrative supplies and complete required documentation.
1.k1.	<i>Types of health care organizations and delivery models (for example, outpatient/inpatient, patient centered medical home, collaborative care, accountable care organization, hospice, home health care, mobile health unit)</i>
1.k2.	<i>The relationship between front office and clinical processes and procedures</i>

1.k3.	<i>Types of health record (paper or electronic, including app-based/mobile, computer-based, web-based, or cloud-based/online) and implications for use</i>
1.k4.	<i>Electronic health record (EHR) and electronic medical record (EMR) components (for example, demographic information, clinical records, medication administration record, diagnoses, laboratory reports, orders, billing information)</i>
1.k10.	<i>Signs and symptoms of common diseases, conditions, and injuries</i>
1.k11.	<i>Anatomical structures, locations, and positions</i>
1.k12.	<i>Functions of major body systems</i>
	*Comment: The above “ New ” tasks and <i>knowledge</i> statements are considered typical to medical administrative assistant curriculum.