



MRMC



MEDICAL REHABILITATION
MANAGEMENT CERTIFICATION

AMRPA



Medical Rehabilitation Management Certification (MRMC) Exam Guide



Preparing for the Exam

The MRMC exam is designed for candidates with one year of experience in the role of medical rehabilitation manager. Successful candidates should demonstrate knowledge and skills in leadership, strategy, customers, workforce, operations and results related to medical rehabilitation. Candidates should carefully review the exam content outline and prioritize areas where they require additional study beyond their professional work experience. This guide includes an outline of the exam content, testing objectives, related resources, and a selection of sample items.

Exam Development

The development of exam items begins with comprehensive item writing training that is based on the latest research regarding exam item effectiveness and resulting information. AMRPA's exam development partner, Certification Management Services, Inc. provided expert coaching and guidance from experienced psychometricians to assist item writers during the development process. This combination of SME expertise and proper training results in superb item quality. This quality strengthens the validity of AMRPA certification decisions.

Each exam item has been critically discussed and reviewed for congruence to the testing objectives, technical accuracy, appropriate level of difficulty and relevance during a technical review process led by an experienced psychometrician. After the initial offering of the exam, our exam development partner will conduct an item analysis to rate the performance of each item and identify trends and statistics that indicate a poorly performing item. After completing this analysis, standard setting will be conducted using the Bookmark/Hofstee standard setting procedure to identify a fair cut point for the exam form.

The MRMC exam consists of 175 multiple choice items (120 scored items and 55 pretest items). The exam content is divided into six main sections, each containing multiple testing objectives. Exam items are designed to test both recall of knowledge, with declarative testing objectives, and application of knowledge, with application testing objectives.

- Declarative questions test the ability to recall or recognize specific information.
- Application questions test the ability to comprehend and apply knowledge to a specified situation or scenario.

Exam Content Sections

Percentage of Exam Content

| | |
|---|-----|
| 1. Foundations of Rehabilitation | 16% |
| 2. Compliance and Ethics – Accreditation & Regulatory | 27% |
| 3. Hospital Processes | 18% |
| 4. Electronic Medical Records (EMR) | 8% |
| 5. Strategic Plan – Tactical Components | 14% |
| 6. Leadership Skills | 17% |

Online Proctored Exam

Sample Items



Section I. Foundations of Rehabilitation

The Foundations of Rehabilitation portion of the MRMC exam accounts for 16% of the exam.

Testing Objectives

| | |
|-----|---|
| 1.1 | Declarative: Identify elements of the 2014 WHO International Classification of Functioning, Disability and Health |
| 1.2 | Application: Given a patient scenario, identify the appropriate element from the 2014 WHO ICF model |
| 1.3 | Declarative: Identify components of an interdisciplinary team model |
| 1.4 | Application: Given a scenario, select appropriate action for effective collaboration |
| 1.5 | Declarative: Identify appropriate interdisciplinary team members |

Related Resources

Centers for Medicare & Medicaid Services (CMS.gov)

Inpatient Rehabilitation Facility (IRF) Medical Review Changes (2018). *MLN Matters*.

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE17036.pdf>

Medicare Benefit Policy Manual, 100-02 (Chapter 1) <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs-Items/CMS012673>

Association for Rehabilitation Nurses. (2019). *The Specialty Practice of Rehabilitation Nursing: A Core Curriculum*. Chicago, IL: Author.

Ramsdell, K, Nitu-Marquise, A., Turk, M., (2020). Rehabilitation Team Functioning. *PM&R Knowledge Now*. <https://now.aapmr.org/rehabilitation-team-functioning>

Section II. Compliance and Ethics: Accreditation & Regulatory



The Compliance and Ethics: Accreditation & Regulatory portion of the MRMC exam accounts for 27% of the exam.

Testing Objectives

| | |
|-----|---|
| 2.1 | Declarative: Identify key information regarding the regulation and accreditation standards applicable to medical rehabilitation |
| 2.2 | Application: Given a scenario, apply the appropriate intent of the CMS regulation |
| 2.3 | Declarative: Identify requirements to demonstrate conformance to CARF accreditation conditions for survey readiness |
| 2.4 | Application: Given a scenario, identify how an organization can demonstrate conformance to a given CARF standard |
| 2.5 | Declarative: Identify how an organization can demonstrate compliance to The Joint Commission (TJC) standards |
| 2.6 | Application: Given a scenario, identify the appropriate legislative act |
| 2.7 | Application: Given a scenario, identify appropriate actions when preparing for either a regulatory or an accreditation survey |
| 2.8 | Declarative: Identify causes of reimbursement denial |
| 2.9 | Application: Given a scenario, select the appropriate ethical action |

Related Resources

Centers for Medicare & Medicaid Services (CMS.gov)

Comprehensive Error Rate Testing (CERT). (2021). <https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Improper-Payment-Measurement-Programs/CERT>

FY21 IPPS Final Rule. (2021). <https://www.cms.gov/medicare/acute-inpatient-pps/fy-2021-ipp-final-rule-home-page>

Inpatient Rehabilitation Facility (IRF) Quality Reporting Program (QRP). (2021).
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting>

Medicare Benefit Policy Manual, 100-02 (Chapter 1- Inpatient Hospital Services Covered Under Part A) <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c01.pdf>

Medicare Benefit Policy Manual, 100-02 (Chapter 15- Covered Medical and Other Health Services) <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c15.pdf>

Medicare Claims Processing Manual Ch 5/20.2/Reporting of Service Units With HCPCS
<https://www.cms.gov/Medicare/Billing/TherapyServices/Downloads/clm104c05.pdf>

Commission on Accreditation of Rehabilitation Facilities (CARF) (www.carf.org)
CARF Survey Guide, CARF International

2020 Medical Rehabilitation Standards Manual, CARF International

Accreditation Process. (2021). CARF. <http://www.carf.org/Accreditation/AccreditationProcess/>

Steps to Accreditation. (2021). CARF.
<http://www.carf.org/Accreditation/AccreditationProcess/StepstoAccreditation/>

Code of Ethics for the Physical Therapist. (2021). American Physical Therapy Association.
<https://www.apta.org/apta-and-you/leadership-and-governance/policies/code-of-ethics-for-the-physical-therapist>

CFR 42 (Code of Federal Regulations – Public Health)

Compliance Program Guidance for Hospitals (OIG Guidelines) Department of Health and Human Services, Office of Inspector General. <https://oig.hhs.gov/compliance/compliance-guidance/index.asp>

False Claims Act 3729-3733 (1863).
https://www.justice.gov/sites/default/files/civil/legacy/2011/04/22/C-FRAUDS_FCA_Primer.pdf

Social Security Act SSA 1862(a)(1) https://www.ssa.gov/OP_Home/ssact/title18/1862.htm

The Joint Commission (TJC) (jointcommission.org)

2020 Hospital National Patient Safety Goals. TJC.

https://www.jointcommission.org/-/media/tjc/documents/standards/national-patient-safety-goals/2020/simplified_2020-hap-npsgs-eff-july-final.pdf

Celebrate and Sustain Your Hospital Accreditation. TJC.

<https://www.jointcommission.org/accreditation-and-certification/health-care-settings/hospital/sustain/>

Joint Commission Online. (2020. Oct. 28). TJC. <https://www.jointcommission.org/-/media/tjc/newsletters/jc-online-oct-28-2020.pdf>

Means of Egress – LS.02.01.20 Clinical Impact. TJC.

<https://www.jointcommission.org/resources/patient-safety-topics/the-physical-environment/means-of-egress/clinical-impact/>

Human Resources Standards – Applicability of Contracted and Volunteer Personnel. TJC.

<https://www.jointcommission.org/standards/standard-faqs/laboratory/human-resources-hr/000001391/>

Why Achieve Accreditation. TJC.

<https://www.jointcommission.org/accreditation-and-certification/become-accredited/why-achieve-accreditation>

29CFR1910.151(c). Medical Services and First Aid. Occupational Safety and Health Administration.

<https://www.osha.gov/enforcement/directives/std-01-08-002>



Section III. Hospital Processes

The Hospital Processes portion of the MPMC exam accounts for 17% of the exam.

Testing Objectives

| | |
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| 3.1 | Declarative: Identify the key element of the at-will employment policy |
| 3.2 | Declarative: Identify key components of the annual budget process |

| | |
|------|---|
| 3.3 | Declarative: Identify the type of staff needed to provide patient care in an inpatient rehab facility |
| 3.4 | Declarative: Identify the orientation and training requirements for contracted clinical staff by regulatory and accreditation standards |
| 3.5 | Application: Given a scenario, predict what will happen when employees are engaged and satisfied |
| 3.6 | Application: Given a scenario, select the appropriate option to increase staff retention rates |
| 3.7 | Application: Given a scenario, assess strategies that improve staff recruitment |
| 3.8 | Declarative: Specify the TJC annual mandatory requirements on education and training (staff development) |
| 3.9 | Declarative: Define succession planning in the medical rehab environment |
| 3.10 | Application: Given a scenario, describe succession planning |
| 3.11 | Declarative: Define components of the performance management process |
| 3.12 | Declarative: Select the compliant use of physician extenders in IRFs / IRUs |
| 3.13 | Application: Given a scenario, identify approaches to increase appropriate IRF referrals |
| 3.14 | Application: Given a scenario, describe the medical rehab manager's role in physician education regarding compliance |
| 3.15 | Declarative: Describe handwashing strategies to ensure infection prevention |
| 3.16 | Declarative: Explain the National Patient Safety Goal initiative |
| 3.17 | Declarative: Define the role of OSHA in protecting employees in the workplace |
| 3.18 | Application: Given a scenario, describe approaches to lifting that minimizes risk of injury to an employee |
| 3.19 | Declarative: Identify actions taken when a patient incident occurs in a facility |
| 3.20 | Declarative: Define outcomes that measure success of a rehab program |
| 3.21 | Application: Given a data set, identify outcomes that indicate positive program performance |
| 3.22 | Declarative: Define the Plan, Do, Check, Act (PDCA) methodology as it relates to the medical rehab setting |
| 3.23 | Application: Given a scenario, identify an effective method to advocate for rehabilitation/disabilities |
| 3.24 | Application: Given a scenario, identify an approach to improve patient satisfaction |
| 3.25 | Application: Given a problem situation, analyze and identify resources to consider when deciding which course of action to take |

Related Resources

Boyce, J., & Pittet, D., (2002). Guideline for Hand Hygiene in Health-Care Settings. Centers for Disease Control. <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5116a1.htm> MMWR. 51(RR16);1-44

Centers for Medicare & Medicaid Services (CMS.gov)

IMPACT Act of 2014 Data Standardization & Cross Setting Measures. (2021). CMS.
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Post-Acute-Care-Quality-Initiatives/IMPACT-Act-of-2014/IMPACT-Act-of-2014-Data-Standardization-and-Cross-Setting-Measures>

Inpatient Rehabilitation Facility (IRF) Quality Reporting Program (QRP). (2021).
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting>

IRF PAI Manual, Final Rule, October 2020. CMS. <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/IRFPAI>

Medicare Benefit Policy Manual, 100-02 (Chapter 1- Inpatient Hospital Services Covered Under Part A) <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c01.pdf>

Medicare Fee-for-Service Compliance Programs. (2021). CMS.
<https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/Overview>

Medicare Fraud & Abuse: Prevent, Detect, Report. (2021). Medicare Learning Network.
<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/Fraud-Abuse-MLN4649244.pdf>

CFR 42 (Code of Federal Regulations – Public Health), 482.23 (b)(6),

Commission on Accreditation of Rehabilitation Facilities (CARF) (www.carf.org)

CARF Survey Guide, CARF International

2020 Medical Rehabilitation Standards Manual, CARF International

Dingley, C., Daugherty, K., Derieg, M., & Persing, R., (2008). Improving Patient Safety Through Provider Communication Strategy Enhancements. *Advances in Patient Safety: New Directions and Alternative Approaches* (Vol. 3). Agency for Healthcare Research and Quality. Rockville, MD.
<https://www.ncbi.nlm.nih.gov/books/NBK43663/>

Graham, N. (1995). *Quality in Health Care: Theory, Application, and Evolution* HCA. Aspen Publishers, Inc., Gaithersburg, MD.

McLaughlin, D., & Olson, J., (2017). Healthcare Operations Management. Chicago, IL: Health Administration Press; Washington, DC: Association of University Programs in Health Administration.

Muhl, C., (2001). Employment at Will Doctrine: Three Major Exceptions. Bureau of Labor Statistics, Washington D.C. <https://www.bls.gov/opub/mlr/2001/01/art1full.pdf>

Studer Group/Huron

AIDET Patient Communication. Studer Group. <https://www.studergroup.com/aidet>

Gaines, J., (2014). Executing Effective Performance Appraisals. *Huron Learning Lab*.
<https://www.huronlearninglab.com/resources/articles-and-industry-updates/insights/march-%E2%80%8E%E2%80%8E%E2%80%8E2014/executing-effective-performance-appraisals>

The Guide to Good Governance for Hospital Boards. (2009). American Hospital Association's Center for Healthcare Governance. <https://trustees.aha.org/sites/default/files/trustees/09-guide-to-good-governance.pdf>

The Joint Commission (TJC) (jointcommission.org)

About Our Standards. TJC. <https://www.jointcommission.org/standards/about-our-standards/>

2020 Hospital National Patient Safety Goals. TJC.

https://www.jointcommission.org/-/media/tjc/documents/standards/national-patient-safety-goals/2020/simplified_2020-hap-npsgs-eff-july-final.pdf

What is the Plan-Do-Check-Act (PDCA) Cycle? Adapted from The Quality Toolbox, Second Edition, ASQ Quality Press. <https://asq.org/quality-resources/pdca-cycle>

Section IV. Electronic Medical Records (EMR)



The EMR portion of the MRMC exam accounts for 8% of the exam.

Testing Objectives

| | |
|-----|--|
| 4.1 | Application: Given a scenario, identify a common issue for medical rehab concerning implementation of EMRs |
| 4.2 | Application: Given a scenario, identify a solution to a common EMR issue |

| | |
|-----|--|
| 4.3 | Application: Given a scenario, identify potential adaptations to an EMR system |
| 4.4 | Application: Given a scenario, identify critical input to advocate for rehab EMR |

Related Resources

Centers for Medicare & Medicaid Services (CMS.gov)

Inpatient Rehabilitation Therapy Services: Complying with Documentation Requirements. Medicare Learning Network. https://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnproducts/downloads/inpatient_rehab_fact_sheet_icn905643.pdf

Medicare Benefit Policy Manual, 100-02 (Chapter 1- Inpatient Hospital Services Covered Under Part A), 110.1.3, 110.1.4, 110.1.5 110.2.5. <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c01.pdf>

Rehabilitation Facility Patient Assessment Instrument (IRF-PAI). (2021). CMS. <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-PAI-and-IRF-PAI-Manual>

CFR 42 (Code of Federal Regulations – Public Health), 612.622

Section V. Strategic Plan: Tactical Components



The Strategic Plan: Tactical Components portion of the MRMC exam accounts for 14% of the exam.

Testing Objectives

| | |
|-----|--|
| 5.1 | Declarative: Define the parts of a SWOT analysis (Strengths, Weaknesses, Opportunities, Threats) |
| 5.2 | Declarative: Identify approaches to influence the strategic plan |

Related Resources

Cunningham, L. (2015). Strategic Planning that Gets Results. *Studer Group*. <https://www.huronlearninglab.com/resources/articles-and-industry-updates/insights/february-2015/strategic-planning-that-gets-results>

SWOT Analysis; How to Develop a Strategy for Success (2021). *Mind Tools*. https://www.mindtools.com/pages/article/newTMC_05.htm



Section VI. Leadership Skills

The Leadership Skills portion of the MRMC exam accounts for 17% of the exam.

Testing Objectives

| | |
|-----|---|
| 6.1 | Declarative: Identify components of effective communication |
| 6.2 | Declarative: Define active listening |
| 6.3 | Application: Given a scenario, describe how an individual would use active and reflective listening |

Related Resources

Carer Gateway (2021). *Effective Communication Techniques*.

https://media.healthdirect.org.au/publications/CarerGateway_Resource_02_Effective_communication_techniques_v03.pdf

Griffith, J., & White, K. (2007). *The Well-Managed Healthcare Organization*. Chicago, IL. Health Administration Press.

Jahromi, V., Tabatabaee, S., Abdar, Z., & Rajabi, M. (2016, Mar 8). Active Listening: The Key of Successful Communication in Hospital Managers. *Electronic Physician*. 8(3): 2123–2128.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4844478/>

Online Proctored Exam

The examination will be offered online through Certification Management Services, Inc.'s TESTWise™ testing system, with proctors provided by Examity®. During the exam, you can move freely between pages. If you intend to come back to a question, use the flag this page feature in the top right corner to keep track of the questions you skip. There is an Exam timer in the top left corner for your reference. You may add a comment about any question.

The screenshot displays the TESTWise online proctored exam interface. At the top, a dark blue header bar contains a clock icon and the text "Exam: 04m 35s" on the left, and "CMS Sample Exam" with a menu icon on the right. Below the header, a navigation bar shows "Page:" followed by buttons for pages 1, 2, 3 (highlighted), 4, and 5. To the right of the page buttons is a "FLAG THIS PAGE" button. The main content area is a white box with a question: "3. What is the largest organ of the body?". Below the question are four radio button options: "Brain", "Heart", "Kidney", and "Skin". The "Skin" option is selected, indicated by a blue dot. Below the options, the text "Choose 1 option." is displayed. At the bottom of the question box is a button labeled "Send a comment about this question". At the very bottom of the interface, there are two buttons: "< SAVE & GO TO PREVIOUS PAGE" on the left and "SAVE & GO TO NEXT PAGE >" on the right.

Upon approval of the certification application, AMRPA will provide candidates with a detailed scheduling guide, provided by Certification Management Services and Examity®. For complete information on the technical and testing environment requirements for participating in the online proctored exam, review the Candidate Handbook available on the AMRPA website.

SAMPLE ITEMS

1. Using the World Health Organization ICF model, a patient with new stroke is at risk for which impairments?
 - A. Atrial fibrillation
 - B. Diabetes and hypertension
 - C. Body functions and structures
 - D. Congestive heart disease

2. Which situation demonstrates an interdisciplinary team model?
 - A. A family conference held with the case manager, patient and the patient's mother
 - B. A weekly conference attended by a case manager, PT, OT, RN, and rehabilitation physician
 - C. Care plan coordination and completion only by the medical provider
 - D. A nurse and nursing assistant are at the bedside giving a shift report

3. A manager is about to start team conference. The physician calls to report he will be unavailable for 4 hours. How should the manager proceed with the conference?
 - A. Cancel the meeting for the week
 - B. Reschedule the conference for the afternoon
 - C. Ask a resident physician to lead the meeting
 - D. Document the physician was there anyway

4. Which situation is essential to avoid reimbursement denial?
 - A. Face-to-face physician visit every day
 - B. Patient participation in therapy 3 hours per day, 5 days per week
 - C. Conducting multidisciplinary team conferences monthly
 - D. Allowing "patient choice" to determine how much therapy a patient receives

5. Which statement would be reason for a Medicare reimbursement denial?
 - A. The H&P is dictated by the rehabilitation physician within 24 hours after the patient's admission.
 - B. The plan of care is completed by the interdisciplinary team and signed by the physician on day 3 after the patients admission.
 - C. The initial team conference is held on day 6 after the patients admission.
 - D. The physician completes two face to face visits within the first week after the H&P completion by the physician extender.

6. Which staff members are required to provide patient care in an inpatient rehabilitation facility?
 - A. Massage therapist, respiratory therapist, and physician extender
 - B. Psychologist, occupational therapy assistant, and midwife
 - C. Recreation therapist, music therapist, and dietician
 - D. Occupational therapist, registered nurse, and rehabilitation physician

7. What is a duty that a physician extender can execute in an Inpatient Rehabilitation Facility (IRF)?
 - A. Determine if a patient meets the admission criteria
 - B. Lead a team conference
 - C. Review team care plans with patients
 - D. Serve as medical director

8. A new Inpatient Rehab Facility (IRF) is opening in a large acute care hospital. What is a strategy the rehab manager can use to get appropriate referrals?
 - A. Offer financial incentives to physician referral sources for each patient admitted
 - B. Host education series for hospital departments about IRF admission criteria
 - C. Invite physicians to golf course to celebrate hospital expansion
 - D. Have nursing assistants float in acute care to identify appropriate patients

9. Which outcome measure demonstrates a successful inpatient rehabilitation program?
 - A. High functional change score
 - B. High percentage of acute care discharges
 - C. High new pressure injury rate
 - D. High fall rate

10. Senior administration is establishing a work group to assess the purchase of a new EMR. Why should administration include leadership from the inpatient rehabilitation facility (IRF)?
 - A. Guarantee the cost of the new EMR is within the budget established
 - B. Verify the software requirements will be met by current hardware
 - C. Persuade the group that the chosen EMR only works well for IRF patients
 - D. Ensure documentation addresses IRF-PAI quality measure requirements

11. A manager identifies the Plans of Care (POC) are not being updated. It appears that each day staff are bringing forward the prior day's documentation without making any changes. What should the manager do to ensure the EMR reflects the patient's progress in the POC?
 - A. Eliminate the POC from the daily documentation. Inform staff that they will only document the POC on the initial assessment.
 - B. Develop scripted text for the POC. Have staff use this text so the POC is the same for all patients during the IRF admission.
 - C. Remove the auto-recall feature for the POC. Educate staff on the importance of updating the POC throughout the IRF admission.
 - D. Use a free text box for the POC. Instruct staff to copy and paste the same POC for every patient.

12. A rehab manager is walking down the hallway and hears a patient crying in her room. How could the manager display active and reflective listening toward the patient?
- A. Ask the patient if she would like the door closed and the lights turned off
 - B. Ask the patient if she would like to call someone and bring her tissues
 - C. Ask the patient to share her concerns and repeat them back in the form of a question
 - D. Find the patient's nurse and ask him to speak to the patient

Answer Key

- | | | |
|-------|-------|--------|
| 1.) C | 5.) D | 9.) A |
| 2.) B | 6.) D | 10.) D |
| 3.) B | 7.) C | 11.) C |
| 4.) B | 8.) B | 12.) C |

