

Topic	What I know	Need more information or review	What I don't know
Office of Inspector General (OIG)			
Elements of an Effective Compliance Plan			
Benefits of an Effective Compliance Plan			
Evaluation and Certification/Accreditation Process			
Components to Plan and Carry Out Audits, Evaluations, Investigations, and Legal Activities			
The Office of Audit Services (OAS)			
Office of Evaluation and Inspections (OEI)			
Office of Investigations (OI)			
The Office of Counsel to the Inspector General (OCIG)			
Potential Enforcement Actions for Noncompliance			
Special Considerations in Individual and Small Group Physician Practices			
Fraud and Abuse Prevention Efforts			
Definitions of "Fraud" and "Abuse"			
Violators of Fraud			
Federal Laws Governing Medicare Fraud and Abuse			
The Anti-Kickback Statute			
Items and Activities that Can Be Considered Kickbacks			
Safe Harbor Regulations			
False Claims Act			
Physician Self-Referral Law (Stark Law)			
Operation Restore Trust (ORT)			
Medicaid Fraud Control Units (MFCUs)			
MFCU Common Characteristics			
MFCU Performance Standards			
Self-Disclosure/Self-Reporting			
Corporate Integrity Agreement (CIA)			
Patient Protection and Affordable Care Act (PPACA)			
Fraud Alerts			
Types of Fraud Alerts			
National (Nonrestricted) Medicare Fraud Alert (NMFA)			
Restricted Medicare Fraud Alert (RMFA)			
ZPIC/CMS Central Office Alert			
Waiver Alert			
Health Insurance Portability and Accountability Act (HIPAA)			
Purpose of HIPAA			

# CCT Exam Content Outline

Topic	What I know	Need more information or review	What I don't know
Health Care Fraud and Abuse Control (HCFA) Program			
Administrative Simplification Provisions			
Electronic Transaction Standards			
Privacy Requirements			
Security Standards			
National Provider Identifier (NPI) Requirements			
Credit and Collections Laws			
Truth in Lending Act			
Fair Credit Billing Act			
Fair Credit Reporting Act			
Fair Debt Collection Practices Act			
Telephone Consumer Protection Act of 1991 (TCPA)			
General Provisions			
Clinical Laboratory Improvement Amendments (CLIA)			
Enrollment Process			
Surveyor Criteria			
Types of Certificates			
Certificate of Waiver			
Accreditation Organizations			
Criteria for Exemption			
Civil Monetary Penalties			
Privacy Rule Violations			
Administrative Sanctions			
Settlements			
Civil Rights Protection in Healthcare			
Emergency Medical Treatment and Active Labor Act (EMTALA)			
Requirements for a Transfer under EMTALA			
Comprehensive Error Rate Testing (CERT) Program			
Requirements and Recommendations			
Monitoring, Review, and Analysis			
Timeframe for Fulfilling Review Requirements			
Health Care Quality Improvement Program (HCQIP)			
Annual Reports on Medicare Payments			
Attempts to Reduce Percentage of Medicare Dollars Paid			
The ICD-10 Code Set			
Two Types of ICD-10 Implementations			
Purpose of the 5010 Transaction			
Benefits of ICD-10			
Institute of Medicine (IOM)			
Reporting Adverse Events			
Types of Reporting Systems			

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Advantages and Disadvantages of Mandatory Reporting Systems			
MedWatch Reporting System			
Health Information Technology for Economic and Clinical Health (HITECH) Act			
Purpose and Functions of EHRs/EMRs			
Medicare Secondary Payer (MSP)			
Recovery Audit Program			
RACs and Their Regions			
RAC Data Warehouse			
Improper Payments			
Services Excluded from an Improper Payment Notification			
Review Processes			
RAC Denials			
Demand Letter			
Appeals			
Redetermination			
Reconsideration			
Administrative Law Judge (ALJ) Hearing			
Appeals Council Review			
Judicial Review			
Zone Program Integrity Contractor/Benefit Integrity Unit			
ZPIC Responsibilities			
ZPIC Priorities			
Complaints			
Medicaid Integrity Program			
Medicaid Integrity Contractors			
Objective of MIC Audits			
Types of MIC Audits			
Notes:			



