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*ANCC-CMGT-BC
Nursing Case Management Certification*

Questions & Answers PDF

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Question: 1

The five components of a nursing case management framework identified by the American Nurses Credentialing Center are:

- A. planning, organizing, coordinating, advocacy, and monitoring.
- B. assessment, planning, implementation, evaluation, and interaction.
- C. communication, planning, facilitation, advocacy, and monitoring.
- D. evaluation, linking, coordination, advocacy, and monitoring.

Answer: B

Explanation:

Assessment, planning, implementation, evaluation, and interaction. Nursing case management is a process of meeting an individual's health care needs through collaboration and coordination. It requires assessment to determine client needs, planning to identify and engage resources, timely implementation to reduce service fragmentation, evaluation to ensure quality care and effective clinical outcomes, and interaction in an ongoing fashion to realize all client goals and outcomes.

Question: 2

The "Pareto Principle," as related to nursing case management, indicates that:

- A. resource allocation must be multidisciplinary to be cost effective.
- B. a systematic and dynamically adaptable framework is required.
- C. about 80% of all health resources are used by 20% of the population.
- D. no professional discipline owns the practice of case management.

Answer: C

Explanation:

About 80% of all health resources are used by 20% of the population. The "Pareto Principle" (also known as the "80-20 rule," the law of the "vital few," and the principle of "factor sparsity") states that, for many real-world events, roughly of the effects come from 20% of the causes. Applied to case management, it means that approximately 20% of all patients consume 80% of all medical resources. This resource-intensive population must be identified and carefully "case managed" so that their health care is of high quality, efficiently delivered (i.e., meeting expected outcomes), and cost-effective.

Question: 3

Client assessment in case management is best described as:

- A. completion of a thorough physical exam to identify all health issues.
- B. interviews of collateral contacts to understand the client better.
- C. a thorough client interview to evaluate identified needs.
- D. an in-depth evaluation, including interviews and record reviews.

Answer: D

Explanation:

An in-depth evaluation, including interviews and record reviews. Clients identified for case management assessment are at-risk for or in need of intensive services either because of complex health problems or high-resource use. Thus, assessment for purposes of case management involves an in-depth evaluation of a client and his or her complete situation. It incorporates interviews with the client and other relevant sources, along with an intensive review of all pertinent records from health care institutions, involved professionals, employers, caregivers, school and military sources, and health care providers, among others. The goal is to obtain insights into a client's physical, psychosocial, cultural, developmental, economic, lifestyle, and spiritual circumstances sufficient to uncover all significant health care issues.

Question: 4

Case management systems should be adapted to accommodate all of the following EXCEPT the:

- A. political or cultural views of the case manager.
- B. organizational setting in which the services are provided.
- C. socioeconomic needs of the population being served.
- D. developmental characteristics of the clients being seen.

Answer: A

Explanation:

Political or cultural views of the case manager. The focus of case management is on optimum client care, regardless of the political, cultural, or other personal views of any given case manager. While broad guidelines for case management are provided by credentialing bodies, the specific features of the case management system used should be tailored to meet the age, function, developmental capabilities, mental illnesses, economics, cultural characteristics, and capacities of the clients who are served and the service delivery organization that is involved.

Question: 5

A pediatric theorist who focused on the social environment of children is:

- A. B. F. Skinner.
- B. Alfred Adler.

- C. Erik Erikson.
- D. Jean Piaget.

Answer: C

Explanation:

Erik Erikson. Erik Erikson's theories incorporated insights into the social environment of children, illuminating issues, such as peer pressure, that may influence their willingness to adhere to prescribed treatment regimens and medication usage. B. F. Skinner emphasized behavioral issues that were treated with rewards, bargaining, and other behavioral modification techniques. Jean Piaget developed cognitive theories of pediatric interaction, clarifying, for example, the need of children for comfort and parental support more than reasoning, explaining, and rationally addressing the need for any given procedure or intervention. Alfred Adler was not a pediatric theorist.

Question: 6

A financial evaluation is completed for all of the following reasons EXCEPT to:

- A. identify available resources for health care and stability.
- B. determine the client's eligibility for case management services.
- C. ensure any requisite preapprovals for proposed health care treatments and services.
- D. assist a client and family to apply for additional benefits that may be necessary for health care needs.

Answer: B

Explanation:

Determine the client's eligibility for case management services. Clients are referred for case management services based on need, risk and resource usage, not on their ability to pay for the services. While the extent of services offered may correlate with an ability to pay for those services, financial status is not a prerequisite to case management. A failure to evaluate a client's financial status properly can lead to overlooked resources, services, and even available treatments. Further, failure to complete an evaluation of insurance benefits and coverage may lead to denials of referrals, treatments, and services, and even to costs unnecessarily billed to patients because of a failure to identify, preauthorize, or bill properly for needed treatments and services.

Question: 7

If a necessary medical treatment or service is denied to a patient, a case manager's options include all of the following EXCEPT:

- A. editing the client's financial status to meet benefit eligibility.
- B. requesting a benefit plan exception for circumstances of hardship.
- C. seeking community resources to provide coverage as needed.
- D. advocating for a longer stay to meet patient needs, pending the availability of other options.

Answer: A

Explanation:

Editing the client's financial status to meet benefit eligibility. It would be unethical for a case manager to misrepresent (or to coach a client to misrepresent) the client's financial status regardless of cause or need. Such misrepresentation constitutes fraud and can lead to civil and even criminal liability. All other options noted above, however, are within the case managers purview. Indeed, they are obligations of quality practice and proper client advocacy, as they represent the full development of a patient-centered plan that seeks evidence-based interdisciplinary facilitated outcomes.

Question: 8

Implementation of a plan of care involves all the following EXCEPT:

- A. goal setting.
- B. negotiation.
- C. contracting.
- D. delegation.

Answer: D

Explanation:

Delegation. A plan that is developed and approved by all involved parties (including the treating physician, the patient and family, and the payer) is not delegated but is implemented by the nurse case manager. While various aspects of treatment and service provision may be delegated to the various disciplines involved, the case manager must not abdicate his or her responsibility to continue the implementation and management of the treatment and service plan. To this end, the case manager uses necessary skills and education in critical thinking, knowledge, evaluation, negotiating, contracting, and decision-making. Goals must be patient-specific and relevant. Negotiation involves building relationships, trust, and flexibility. Contracting is required to engage organizations and vendors to provide the necessary treatments and services.

Question: 9

The tendency of health care professionals to work in "silos" means:

- A. having a multidisciplinary perspective and appreciation.
- B. referring clients to other providers as needed.
- C. working independently and without collaboration.
- D. accepting and receiving consultation as needed.

Answer: C

Explanation:

Working independently and without collaboration. Professional training has the effect of focusing practitioners primarily on their specialized knowledge base. Thus, there is a natural tendency to practice independently and without collaboration. Consequently, a primary goal of nursing case management is to bring diverse specialties together to address common patient treatment goals and to share unique expertise to meet the identified goals of care. This process of collaboration is primarily carried out by consultation and referral.

Question: 10

Polypharmacy is best defined as:

- A. having medications dispensed from more than one pharmaceutical source.
- B. the pharmaceutical compounding of medicinal blends to provide individually tailored medications and dosages.
- C. using a team of pharmacists when addressing patient medication issues.
- D. using multiple medications in a single patient.

Answer: D

Explanation:

Using multiple medications in a single patient. The situation tends to result from the involvement of multiple physician providers who have little or no interactions with each other and who, thus, prescribe medications without full regard for the other medications the patient is already taking. Polypharmacy situations readily arise in situations of complex chronic conditions and increase the risk of problematic drug interactions, sensitivity, and unanticipated overdose. Issues of unnecessary cost also arise. Competent case managers are uniquely positioned to reduce untoward polypharmacy.

Question: 11

Appropriate methods of professional and interdisciplinary communication include all of the following EXCEPT:

- A. chart notes.
- B. cafeteria consults.
- C. telephone discussions.
- D. team meetings.

Answer: B

Explanation:

Cafeteria consults. The phrase "cafeteria consults" suggests communications about privileged patient information in a public setting. Principles of confidentiality require professionals to take reasonable steps to prevent the untoward dissemination of patient information to uninvolved or otherwise inappropriate parties. Other appropriate venues of information sharing

include properly directed e-mails and faxes, written narratives, teleconferences, face-to-face discussions, and multidisciplinary rounds. Accurate information sharing, summarization without distortion, and ethnically and culturally sensitive communication that is tailored to the hearers educational level is very important.

Question: 12

The process of identifying key issues, understanding each party's perspective, considering possible solutions and outcomes, determining best options, agreeing on contingencies, and monitoring and evaluating outcomes is known as:

- A. critical thinking and problem-solving.
- B. brainstorming and collaboration.
- C. program evaluation and implementation.
- D. goal setting and assessment.

Answer: A

Explanation:

Critical thinking and problem-solving. Critical thinking and problem-solving use the processes identified in the question. Successful critical thinking and problem-solving require creativity, flexibility, quality assessment, communication skills, and organizational proficiency. Applying critical thinking and problem-solving skills enables nurse case managers to anticipate and recognize problems before they become overwhelming, develop workable solutions, and maintain high-quality continuity of care.

Question: 13

The process of establishing patient goals, continuously gathering provider information measuring progress, and modifying interventions as needed is called:

- A. evaluation.
- B. outcomes measurement.
- C. clinical assessment.
- D. monitoring.

Answer: D

Explanation:

Monitoring. Nurse case management involves the monitoring of established plans, their goals, patients' progress, intervention outcomes, and cost and service delivery. When goals are not met, the treatment or intervention plans must be modified. Involved providers must be kept informed about their collaborative role in the treatment process so that they can optimize their services and maximize the benefits to their patients. The monitoring process is integral to the continuous quality improvement required of health care entities for purposes of accreditation, and it formalizes the role of the nurse case manager.

Question: 14

From a case management perspective, the difference between gross savings and net savings with reference to a service plan is:

- A. any savings realized.
- B. the sum of all potential charges less realized charges.
- C. the inclusion of case management fees.
- D. the difference between costs and benefits.

Answer: C

Explanation:

The inclusion of case management fees. Gross savings can be calculated by subtracting actual charges from the known potential charges realized without case management benefits (i.e., usual costs minus avoided charges, discounts, and negotiated charges). Net savings is defined as gross savings less the fees from case management. Gross savings and net savings are the primary parts of an overall "cost-benefit" analysis.