



Healthcare Management (PAHM®) Designation

When you earn this career-driving professional credential, you'll demonstrate to your colleagues and clients that you have achieved a thorough understanding of the fundamental building blocks of health care management and organizational structures. You'll also benefit from a comprehensive understanding of the basic concepts of health care management, as well as the legislative, regulatory and ethical issues that impact our industry, to help you do your job even better.

Course Outline

Module 1: Evolution of Health Plans

Module 2: Basic Concepts of Health Insurance

Module 3: Health Plan Benefits and Networks

Module 4: Provider Compensation Fee-for-Service to Value-Based Care

Module 5: The Health Maintenance Organization (HMO)

Module 6: Types of HMOs and ACO Basics

Module 7: PPOs and other Health Plan Types

Module 8: Health Plans for Specialty Services

Module 9: Consumer-Directed Health Plans Part I

Module 10: Consumer- Directed Health Plans Part II

Module 11: Provider Organizations and Compensation Modules

Module 12: Network Structure and Management

Module 13: Utilization Management

Module 14: Utilization Review

Module 15: Quality Assessment and Improvement

Module 16: Quality Standards, Accreditation, and Performance Measures

Module 17: Marketing

Module 18: Underwriting, Rating, and Plan Funding

Module 19: Information Management

Module 20: Claims Administration

Module 21: Member Services

Module 22: Federal Laws and Regulation

Module 23: The Affordable Care Act

Module 24: State Laws and Regulation

Module 25: Government Programs: Medicare

Module 26: Government Programs: Medicaid

Module 27: Ethics

