

/// *Preparing For Case Management Certification*

And now offering *Case Management 101*

/// **Date/Location:**

Friday, March 9, 2012 8:00 am – 4:30 pm *and*

Saturday, March 10, 2012 8:00 am – 4:00 pm

New England Sinai Hospital, 150 York St., Stoughton, MA

/// **Faculty:**

Sandra Lowery, BSN, RN, CRRN, CCM, CNLCP
President, CCMI Associates

Jackie Birmingham, RN, MS
VP, Curaspan Health Group

/// **Overview**

This course is designed to provide the practicing case manager with information to assist them in preparing for the exam for the Certified Case Manager (CCM) credential. The course will commence with an overview of the CCM process and exam. It then follows the CCM guide for examination content, focusing on the domains of essential case management knowledge. It will provide intensives for focused review in three key areas: workers' compensation/disability management systems, public insurance and benefit programs, and federal resources/laws. The course will include some sample questions and an exercise in self-assessment to guide participants in developing a self-study module for any particular area requiring further study. The first day's content is also appropriate for those who are seeking a basic course in case management practice. A comprehensive course syllabus, 7 (1 day) or 14 (2 days) contact hours for nurses and meals will be provided.

/// **Fees**

Day 1 Friday only \$179 CMSNE Member \$199 Non-member

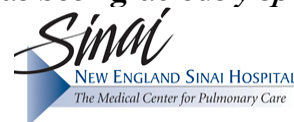
Full 2 Days \$239 CMSNE Member \$279 Non-member

Fee includes course syllabus and meals.

This course is co-sponsored by:



The site has been graciously sponsored by:



For additional information or a brochure call CMSNE at 603-329-7481 or email CCMI@lowery.mv.com

Mail completed registration form with a check payable to CCMI Associates, 2 Nashua Rd., Pelham, NH 03076. Prior registration and payment is required by, February 23, 2012, sorry no credit cards. CCMI Federal Tax ID#: 02-0522841.

Name: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Day phone: _____

Please fax or email me a confirmation/directions to the program:

Fax: _____ Email Address: _____

1 Day - Friday only CMSNE member, \$179 non-member, \$199

2 Full Days CMSNE member, \$239 non-member, \$279