



Assoc. of **Healthcare** Internal Auditors

**Certified Healthcare  
Internal Audit Professional®  
(CHIAP®)**



**Certification Program  
Candidate Handbook  
2023-Updated**

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## 1. About this Handbook

This handbook outlines information about the Certified Healthcare Internal Audit Professional® (CHIAP®) Certification Program and how to apply for it. The Association of Healthcare Internal Auditors (AHIA) suggests that all Applicants read this entire handbook before beginning the application process as it provides key information regarding how to obtain and maintain the CHIAP credential.

### This handbook allows a credential-seeking Applicant to:

- Learn about the CHIAP eligibility requirements and application process.
- Find forms and other relevant resources.
- Understand the examination process.
- Understand what is required to maintain and renew your certification.
- Identify where to address questions regarding the CHIAP credential.

### Individuals moving through the certification program process are referred to as:

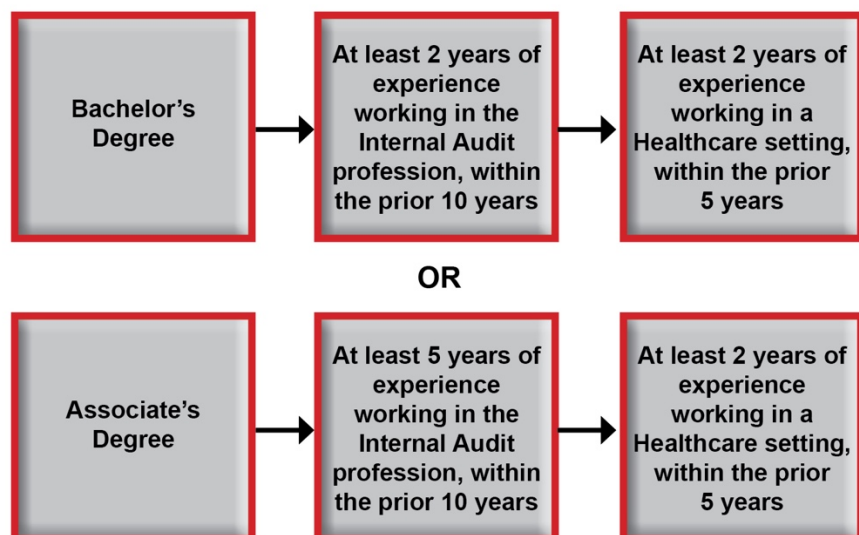
- Applicant - Person who is completing or has completed application form, but has not yet received feedback on the submission.
- Candidate - Person whose application has been approved, but has not yet passed the exam.
- Certificant - Person who has passed the exam and been awarded the CHIAP credential.

## 2. Code of Ethics

In 2011, the AHIA Board of Directors considered the necessary elements of the healthcare internal auditing profession and formally endorsed The Institute of Internal Auditors (IIA) mandatory components of the International Professional Practice Framework (IPPF), which includes the official Definition of Internal Auditing, the International Standards for the Professional Practice of Internal Auditing, and the Code of Ethics. The IPPF is available at [theiia.org](http://theiia.org).

## 3. Eligibility Requirements

### Overview of Eligibility Requirements



### 3.1 Specific Details

- **Education**

Applicant should indicate the name of the accredited colleges or universities and the month/year they obtained any of the following degrees:

- Associate's
- Bachelor's

Applicants without a degree may submit an application but must demonstrate ten (10) years of combined healthcare internal audit experience.

A copy of the diploma conferring degree, official transcript, or letter from your college or university or Education Records Evaluation Services confirming your highest degree achieved must be uploaded at the time of application.

NOTE: If the legal name stated on degrees or transcripts has changed since earning the degree, a Name Change Form (refer to the Appendix section of the Candidate Handbook) must also be submitted with legal documentation of your name change (e.g., marriage license/certificate, divorce decree). All documents and forms uploaded in the online application must be in a PDF format.

- **Professional Work Experience**

Applicants must list work experience completed in order, starting with the current or most recent employer in order to demonstrate the following requirement.

Applicants will be required to upload Employment Verification Forms (refer to the Appendix section of the Candidate Handbook) at the time of application for each employer as needed to demonstrate the required years of work experience. Employment history will be verified. If audited by the AHIA Certification Committee, the Applicant/Candidate authorizes the Committee to contact current or recent employers.

NOTE: To fulfill the professional work experience requirement, the term internal audit profession includes experience in the areas of:

- Operational Internal Auditing.
- External consulting, if it includes working on audits/advisory services for a healthcare entity, with an internal audit/advisory focus. Pure external financial statement audit experience does not qualify as Healthcare Internal Auditing experience.
- Compliance - While compliance experience will be accepted, it is important for Candidates to have knowledge of the principles of healthcare internal auditing in order to be successful on the CHIAP exam.



- **Attest to the AHIA Code of Ethics**

All Applicants will be required to attest that they will adhere to the AHIA Code of Ethics and agree to the Statement of Understanding.

- **Pay the Application and Exam Fee**

Pay the Certification Application and Examination Fee at the time of application.

If an application is denied and the Applicant chooses to reapply, a new application must be submitted, including payment of the Application and Examination fee.



Membership with AHIA is not required to sit for the CHIAP exam; however, members do receive discounts on the Application and Examination fee (refer to the Fees section of the Candidate Handbook).

## 4. Examination Application Process

### Definitions

- Applicant – Individual submitting an application to sit for the exam through the AHIA online
- Certification Management System (CMS)
- Candidate – Individual approved to sit for the exam
- Eligibility Period – Period within which a Candidate may schedule to sit for the exam
- Review – Evaluation of application by AHIA for completeness and sufficiency to meet stated requirements
- Audit – Source verification of application by AHIA

### Applications

Applications must be submitted online using AHIA's CMS. For details on how to access the system, establish a profile, and submit an application, refer to the Appendix section of the Candidate Handbook.

Eligibility requirements and underlying documentation to be provided with the application cover Personal Information, Demographics, Education, and Experience. Refer to the Eligibility Requirements section of the Candidate Handbook for details.

For the Application and Exam Fee, refer to the Fees section of the Candidate Handbook for details. International Applicants will be handled:

- Application and all attachments must be in English.
- Education – Letter of verification from the Applicant's school regarding degrees and equivalency.
- Experience – Letter of verification from the Applicant's employer Human Resources office.
- Payment of Application and Examination Fee must be made with U.S. funds.

An application will be considered incomplete for any of the following reasons:

- Missing one or more elements of required information
- Not executed through the AHIA's CMS

The Applicant may submit a newly executed application for consideration, including payment of the Application and Exam Fee, if a previously submitted application was rejected because it was incomplete.

### Examination Application Review and Audit

- Each application will be reviewed within 10 business days of receipt to assess whether all elements of required information have been completed. An incomplete Application for Certification will be rejected, and the Applicant will be notified by email.

The Candidate Application Review Subcommittee will further review and scrutinize the content of all information included in a complete Application for Certification to verify that the eligibility requirements have been met.

- For disclosures that an Applicant has been convicted of a felony:
  - Applicant will be given an opportunity to explain circumstances.
  - Documentation of the arrest/court proceeding will be required.
- All applications are subject to audit at any time from submission through the end of the Candidate's two (2) year Eligibility Period.
  - Audits will be performed for no less than 10% of all applications

- Applications will be selected randomly.
- Audits will include verifying employment through the employer, using Employment Verification Forms that the Applicant will provide.

## Legal Name Changes

### Before application submission:

- If the name on your educational records is no longer your current legal name, you must upload a Name Change Form and legal documentation of your name change (e.g., marriage license/certificate, divorce decree) during the application process. This form can be found on the AHIA website at [www.ahia.org/certification/resources/forms](http://www.ahia.org/certification/resources/forms) or refer to the Appendix section of the handbook.

### After application submission:

- If your name has been legally changed after your application has been submitted, you must email the Name Change Form and legal documentation of your name change to [info@ahia.org](mailto:info@ahia.org) and the AHIA staff will update your Candidate profile.

## Eligibility Period

- Candidates are eligible to sit for the exam and may schedule their initial certification exam and any retake exams within two (2) years of the date their application was approved. Candidates may take the exam no more than three (3) times during their Eligibility Period. Refer to Register to take Exam, Scheduling an Examination Appointment, and Retaking the Exam sections of the Candidate Handbook for details.
- Refunds will be issued on request. Refer to the Refund Policy section of the Candidate Handbook for details.

## 5. Certification Program Fees

### 5.1 Application and Examination Fee

The appropriate fee for the initial certification examination must be submitted by the Applicant with the completed online application in United States currency.

#### Application and Examination Fee:

AHIA member. . . . . \$495

Non-member . . . . . \$745

Become an AHIA member and enjoy the benefits of membership, including the member rate for your Certification Application and Examination Fee.

Learn about the AHIA Membership Benefits and Join AHIA today.

### 5.2 Refund Policy

The Application and Examination Fee will be:

- Refunded, minus a \$100 processing fee, if the Applicant is determined by AHIA to be ineligible for the initial certification examination
- Forfeited and will not be refunded if the eligible Candidate who is approved to take the examination does not schedule an examination with the 2-year eligibility period or fails to report for an examination appointment.

If the Application and Examination Fee has been refunded or forfeited and the Candidate still wishes to take the certification examination, a new application and the appropriate fee must be submitted.

### 5.3 Other Fees

#### **Re-testing Fee**

In the event that a Candidate fails to pass the certification exam on the first attempt, they will be allowed to retake the exam two (2) additional times during their two (2) year examination eligibility period. For each retake of the exam the Candidate must pay a Re-testing Fee of \$150, prior to scheduling their exam retake appointment.

#### **Administrative Fee**

An Administrative Fee of \$150 must be paid to reschedule an exam appointment during the Candidate's two (2) year eligibility period when:

- A scheduled exam appointment is missed by the Candidate because they did not show up for the appointment.
- There were extenuating circumstances claimed by the Candidate which AHIA deemed not in compliance with AHIA's Exam Policies and Procedures on extenuating circumstances.

There is no charge for cancelling and rescheduling an exam appointment one time, if done at least 24 hours before the initially scheduled appointment date.

#### **Certification Renewal Fee**

A Certification Renewal Fee of \$100 for AHIA members/\$150 for non-members is due on the Certificant's specified renewal date for submission of the required Continuing Professional Education (CPE). The same renewal fee applies to Certificants maintaining Inactive status.

A Certificant who fails to timely renew their certification has up to six (6) months after the specified renewal date to submit the required CPE and Certification Renewal Fee, including a Penalty Fee of 50% (i.e., \$150 AHIA members/\$225 non-members).

#### **Certificate Fee**

A hard-copy certificate is provided to all Certificants free of charge at the time the CHIAP is awarded. An additional hard-copy certificate can be requested for a fee of \$50.

### 5.4 Acceptable Payment Methods

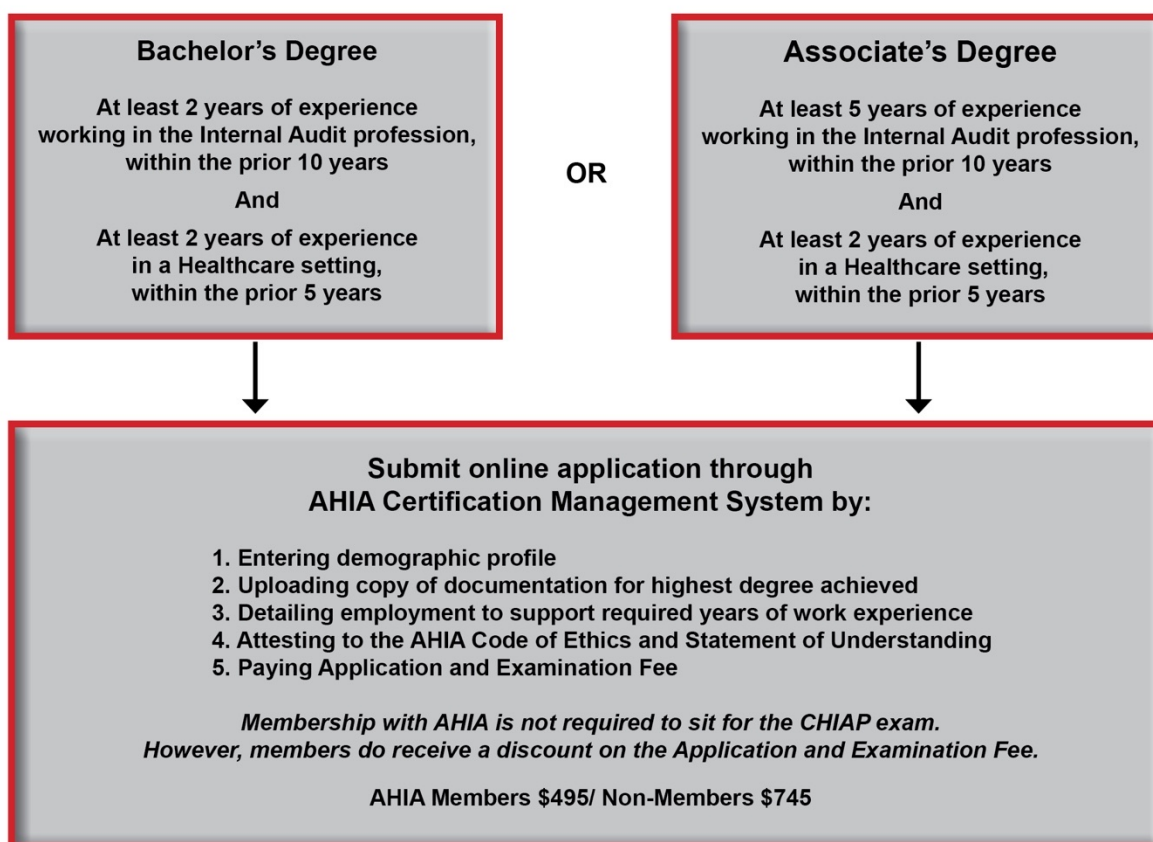
Applicants and Candidates may provide payment by credit card (Visa, MasterCard, American Express, or Discover) or check (payable to Association of Healthcare Internal Auditors). Access to the Certification Management System will not be granted until payment is received in full. Check payments will delay application submissions and review.

## 6. Online Application Certification Management System

After you have thoroughly reviewed this handbook, visit <https://ahia.org/application-process/> to prepare for your online application submission in the Certification Management System (CMS). You will be required to upload forms in your online application, and they should be completed and signed before you begin. All documents and forms uploaded in the online application must be in PDF format. Carefully review the eligibility requirements, instructions, and forms available online and in the Appendix section of this handbook.

When you are ready to submit your application, click 'Apply Now!' at <https://ahia.org/application-process/> and you will be directed to the online store to pay the appropriate certification fee. After checkout, you will be directed into the CMS to complete your candidate profile and submit your online application. Instructional documents with screen shots of the online application system are available at <https://ahia.org/forms/>.

After your application has been reviewed, you will be notified via email with instructions to schedule your online proctored examination.



## 7. Exam Policies and Procedures

### 7.1 About the Exam

The AHIA Certified Healthcare Internal Audit Professional® (CHIAP®) certification examination is a computer based, closed-book (without the use of any online or hard copy reference documents or any assistance from another individual), proctored multiple-choice exam. The exam is comprised of 175 multiple choice questions aligned to the Exam Content Outline (refer to the Exam Content section of the Candidate Handbook for details), which must be completed within four (4) hours. Each exam item is presented to an examinee, with the response then being evaluated against a pre-defined scoring criterion.

The examination will be offered online through Certification Management Services, Inc.'s TestWise™ testing system, with proctors provided by Examity®. Upon approval of the certification application, AHIA will provide candidates with a detailed scheduling guide, provided by Certification Management Services and Examity®. This guide will include all the information required to schedule the MRMC Certification Exam and meet the technical and testing environment requirements for participating in the online proctored exam.

### 7.2 Preparation for the Exam

In preparing for the certification exam Candidates should:

- Read through the entire AHIA CHIAP Certification Program Candidate Handbook
- Visit AHIA's exam preparation page at <https://ahia.org/exam-preparation/>, where you can review exam specifications and content outline
- Review the Technical Requirements and Sitting for Exam - On the Day of Your Examination section in the Candidate Handbook below.

### 7.3 Eligibility for the Exam

#### Application

Applicants become eligible to schedule and take the certification exam once their CHIAP certification application has been approved by AHIA.

AHIA will notify you by email when your application has been successfully validated. The email will also provide you with exam scheduling information. You will have two (2) years from the date your candidate application is approved to successfully complete the exam.

#### Examination Fee

The fee for the registering and sitting for the exam is included in the Application and Examination Fee submitted with your online application (refer to the Fees section of the Candidate Handbook for details).

If you do not pass the exam and wish to apply for an exam retake during your two (2) year candidate eligibility period, you will be required to pay a Re-testing Fee of \$150.

### 7.4 Exam Scheduling, Rescheduling, and Cancellations

After you have applied to sit for the certification exam and received notification of your eligibility by email, you may schedule an examination appointment. You may schedule your examination appointment anytime within the two (2) year eligibility period. Exam appointments are available 24 hours a day, seven days a week. Appointments must be scheduled at least 24 hours before the date of the exam.

Upon application approval, candidates will receive a URL to login to the CMS TESTWise System and schedule their proctored exam. This is the same URL that will be used on your exam date. This is the same URL that will be used to cancel or reschedule your exam.

### **Cancellation of Exam Appointment**

- **Cancellation of Appointment by Candidate**

You may cancel a scheduled exam appointment at any time. If you need to cancel due to an emergency refer to the Extenuating Circumstances section below to view AHIA's policy. There is no charge for cancelling and rescheduling an exam appointment if you do so at least 24 hours before your scheduled appointment date.

If you cancel an appointment less than 24 hours from your scheduled exam date and wish to reschedule for another exam date within your eligibility period, you will be charged a \$150 Administrative Fee (refer to the Retaking the Exam and Other Fees sections of the Candidate Handbook for details) before you will be permitted to book a new exam appointment.

- **No Show**

If you do not show up for your scheduled exam appointment, no Examination Fees will be refunded nor is the Examination Fee transferable to a new exam booking within your eligibility period. You will be entitled to schedule a new exam appointment within your eligibility period; however, you will be charged a \$150 Administrative Fee (refer to the Other Fees section of the Candidate Handbook for details).

- **Extenuating Circumstances**

AHIA understands that there are times when personal emergencies may cause a Candidate to reschedule or cancel an exam less than 24 hours before the scheduled appointment or miss a scheduled exam appointment (resulting in a No-Show status). These cases are referred to as Extenuating Circumstances and would require the following documentation to be submitted to AHIA for evaluation and determination:

- **Medical emergency: Candidate illness**  
Doctor's note and/or emergency room admittance:
  - Must be signed by a licensed doctor
  - Must include the date of medical visit
  - Must include contact information for the licensed doctor
  - Does not need to give details of the illness or emergency, but the doctor should indicate that the Candidate should not test, or that the condition may impact the Candidate's ability to test
- **Medical emergency: Illness in the immediate family (defined as spouse, child/dependent, parent, grandparent, or sibling):**  
Doctor's note and/or emergency room admittance
  - Must be signed by a licensed doctor
  - Must include the date of medical visit
  - Must include contact information for the licensed doctor
  - Does not need to give details of the illness or emergency, but the doctor should state the relationship of the Candidate to the patient being treated
- **Military deployment:**  
Military documentation must be provided
- **Death in the immediate family (defined as spouse, child/dependent, parent, grandparent, or sibling):**  
Must include the date of death and deceased name and relationship to the deceased
- **Court Appearance: Court Subpoena of the Candidate or minor child or Jury Summons of the Candidate**
  - Must include the date
  - Must specifically name of the Candidate or minor child, where necessary
- **Traffic Accident:**  
Police report and/or receipt from the towing company
  - Must include the date and name the Candidate
  - Must include contact information
- **Natural disaster (defined as flood, earthquake, hurricane, or other weather condition causing a state of emergency where the Candidate resides):**
  - Copy of news article or public notices indicating the date of the disaster and area impacted



- Candidate's residential address and map highlighting location within the impacted area

NOTE: Extenuating circumstances do not include work-related circumstances.

If extenuating circumstances force you to either miss your scheduled exam appointment (resulting in a No-Show status) or cancel an exam appointment less than 24 hours of the scheduled date), contact AHIA within 72 hours of the cancellation or missed exam sitting by email at [info@ahia.org](mailto:info@ahia.org) with an explanation and supporting documents (e.g., medical documentation, deployment papers). The extenuating circumstances will be assessed and, if approved by AHIA, the Administrative Fee charged to reschedule an exam will be waived. If your extenuating circumstance claim is not approved or you do not contact AHIA within 72 hours, you will be required to pay the \$150 Administrative Fee to schedule a new exam appointment during your eligibility period (refer to the Other Fees section of the Candidate Handbook for details).

## 7.5 Technical Requirements for Online Examination

Prior to your exam date, candidates should conduct the following verification steps to verify your computer and testing location both meet the minimum requirements for online proctored examination. It is important to perform all of these verification steps from the same location and room where you will take your exam, using the same computer you will use when you take your exam.

### Computer Requirements

Your computer must be a Windows or MAC OSX computer (no phones, tablets, or Chromebooks). You must use a supported browser:

- Chrome
- Firefox
- Edge

*Do not use Safari or Internet Explorer*

**IMPORTANT:** Make sure your computer has installed all updates BEFORE your exam day. If your computer installs updates while you are taking your exam, it will interrupt your testing event and you will most likely NOT be able to continue.



### Proctor Verification

Use this link to verify your computer has the necessary hardware: <https://prod.examity.com/systemcheck/check.aspx>.

NOTE: A 'Ready' status for the webcam and microphone mean the hardware is present in your computer. It does not mean they are operational. Be sure to verify both are operational in the Web Meeting section below.

### Test Delivery Verification

Verify you can take this five-question quiz. You may have issues if you are using a company computer or sitting at work: <https://sei.caveon.com/launchpad/cms-sample-exam-2>.

If you have issues, you may need to use a different computer or take your exam from a different location. If you are using a company computer or sitting at work, you can ask your IT department to follow the instructions in this guide (<https://www.certmanserv.com/assets/help/Whitelist-Process-for-Test-Delivery.pdf>), which may resolve the issues. Make sure you can successfully take the above quiz before your appointment date.

### Meeting Software Verification

You will NOT be sent a meeting number or appointment. Instead, on the day you take your exam, you will click the "Connect to proctor" link to automatically connect to your proctor. They will initiate a GoToMeeting, or if there are issues, they can initiate a Zoom Meeting. Verify both GoToMeeting and Zoom run by using these sample meetings.

Verify your sound, camera, and microphone all function in both sample meetings. If you have any issues, work with your IT department to fix the issue. <https://global.gotomeeting.com/join/594935493> , <https://zoom.us/test>

### **Internet Speed Verification**

If your internet bandwidth is too slow, the proctor will NOT let you take your exam. The bandwidth MUST be at least 2 Mbps down and 2 Mbps up. (10 Mbps down and 3 Mbps are recommended) A wired connection is almost always faster than a Wi-Fi connection. You can test your bandwidth here: <http://www.speedtest.net>

NOTE: It is common to have low bandwidth at home if someone is streaming video.

## **7.6 Sitting for the Exam - On the Day**

Please review the following information prior to your exam date to ensure familiarity with the procedures.

### **Confidentiality**

By taking the AHIA CHIAP examination, the Candidate understands and agrees that the exam, which includes all aspects of the exam, including, without limitation, the test, scenarios/questions, responses, examples, and other information presented or contained in the exam and exam materials belongs to AHIA and constitutes AHIA's confidential information (collectively referred to as "Confidential Information"). The Candidate agrees to maintain the confidentiality of AHIA's Confidential Information at all times and understands that any failure to maintain the confidentiality of AHIA's Confidential Information may result in disciplinary action against the Candidate by AHIA or other adverse consequences, including, without limitation, nullification of his/her exam, loss of his/her credentials, and/or litigation. Specifically, the Candidate understands that he/she may not, for example, discuss, publish, or share any exam scenarios/questions, his/her responses or thoughts on any questions, or the exam's format in any forum or media (e.g., via email, Facebook, LinkedIn).

### **Standard Test Day Rules**

- You must show the proctor a valid (not expired) government issued photo ID. You will be required to hold the ID in front of your webcam. The proctor will need to clearly see your name, photo, and expiration date.
- You must be alone in the room.
- Your desk and area around the desk must be clear. The proctor will ask you to do a complete 360-degree room pan and desk sweep with your webcam to ensure your workspace is clear of any materials unauthorized by your test sponsor. (No papers, Post-its, books, electronic devices, phones, etc.)
- Your computer must be connected to a power source.
- You must use a laptop or desktop computer running Microsoft Windows or Mac OSX (no tablets).
- The only software that is allowed to run on your computer is the meeting software and the web browser where you are logged in to Examity's proctoring portal.
- You can only use one display. If you have a second display, it must be unplugged.
- You cannot leave your seat.
- You cannot use headphones or a phone during the exam.
- You cannot talk except when communicating with the proctor.
- You must have a webcam, microphone, and speakers, which must function and remain on the entire time.
- The proctor must be able to see you for the duration of the exam.
- Pop-ups must be enabled on your computer in order to connect with the proctor.

### **Taking Your Exam**

**IMPORTANT:** The time you spend connecting to the proctor and going through the authentication process does NOT count towards your exam time. The exam time starts when you see your first question.

The following instructions are included with screen shots in the scheduling guide provided after your certification application is approved.

To take your exam:

- Use a Windows or Mac OCX desktop or laptop computer (not a phone, tablet, or Chromebook).
- Use Chrome, Firefox, or Edge. Chrome is the most compatible browser. *Do not use Safari or Internet Explorer*
- Log into “CMS TESTWise” (<https://delivery.itemexperts.com>) up to 30 minutes before your scheduled appointment date/time.
- If popup blockers are enabled, they must be disabled in order to connect to the proctor.
- Click the green ‘Start Exam’ button.
- The Examity® proctoring portal will open in a new web browser tab.
- Click “Begin scheduled exam” and then click “Connect to proctoring”. This notifies Examity that you have arrived. If you have an issue connecting with a proctor, call 1-855-392-6489 or click “Live Chat” for proctor support.

**IMPORTANT:** The earliest the proctor will arrive is 15 minutes before your appointment; however, the proctor may not arrive until your appointment time. When the proctor arrives, a GoToMeeting will automatically be launched. The proctor will come online and provide all the remaining instructions to begin your exam. A proctor usually proctors two appointments simultaneously. If you talk to the proctor during your exam, it may take a few minutes for them to respond if they are helping the other candidate. If there is an issue launching GoToMeeting, the proctor will reinitiate the meeting with Zoom. Your exam time will not begin until you see the first question.

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 CMS Sample Exam interface. At the top, there is a dark blue header bar containing a menu icon, a timer showing 'Exam: 04m 48s', a 'Scratch Pad' button, a 'Calculator' button, and the text 'CMS Sample Exam'. Below the header, a navigation bar shows 'Page: 1 2 3 4 5' with '2' highlighted, and a 'FLAG THIS PAGE' button on the right. The main content area is white and contains a question: '2. What is the name of the star at the center of Earth's solar system?'. Below the question are four radio button options: 'Betelgeuse', 'Regulus', 'Polaris', and '"The Sun"'. Below the options, it says 'Choose 1 option.' and there is a text input field with the placeholder 'Send a comment about this question'. At the bottom of the interface, there are two blue buttons: '← PREVIOUS PAGE' on the left and 'NEXT PAGE →' on the right.

### Retake Attempts

You may take the exam up to three (3) times within the two (2) year candidate eligibility period. In the event you do not pass the exam on the first attempt, you are allowed to apply for a re-test for up to two (2) more times during the candidate eligibility period. The Candidate will be contacted directly by AHIA staff after an exam failure with instructions on how to pay the Re-testing Fee of \$150 and schedule their re-take exam, as well as with information on how many attempts you have left and when the eligibility period expires. Should you fail the exam three (3) times

within the two (2) year eligibility period, you will be required to re-apply for eligibility to sit for the exam and submit the full Application and Examination Fee.

## 7.7 Examination Results

Your Score will appear on-screen after you complete your examination and will indicate “pass” or “fail”, not with a percentage or numerical grade. If you fail the exam, additional detail is provided on your raw scores by major content categories of the exam. A raw score is the number of questions you answered correctly. Your pass/fail status is determined by your raw score. Official results are communicated to the Candidate within 15 business days of the exam completion date to the address listed in the Candidate’s profile in AHIA’s CMS. Once released, your results will also be available in your My CHIAP Profile on the AHIA website. Candidates who pass the AHIA exam earn certification without any further action.

- **Passing Score**

Candidates who have successfully completed their examination will be awarded the Certification and provided a hard- copy Certificate (refer to the CHIAP Certificate section of the Candidate Handbook for details). The Certification remains the property of AHIA, which may withdraw, cancel, revoke, change the scope of, or otherwise annul the Certification for cause.

- **Failing an Exam**

Candidates who did not successfully complete the examination will be notified at the time they receive their official Score Report with instructions for retaking the exam

NOTE: Scoring the results of an initial offering of a new CHIAP examination form may take up to six (6) weeks from the end of the exam cycle. (Refer to the Examination Results, Scoring section in the Candidate Handbook for details.)

For subsequent examination cycles, a preliminary Score Report will be provided to each Candidate prior to leaving the test center location, with the official Score Report being mailed within 15 business days to the Candidate’s address within AHIA’s CMS. Candidates should ensure their profile within AHIA’s CMS reflects their current mailing address.

### The Scoring Process

The certification exam passing score is determined using sound analysis and tried and true psychological measurement techniques. Healthcare internal audit subject matter experts from a broad base within the healthcare internal auditing practice, including members of AHIA, created the exam questions and, after extensive analysis of test data, set a passing score that ensures the exam’s difficulty is within a healthy margin.

All certification programs establish a level that must be met by each Candidate in order to earn a certification and the passing score defines that threshold. Some of the reasons that AHIA chose to maintain the passing score in confidence are outlined below:

- Some certification programs establish a “scaled score”, which they share with Candidates. This involves statistically converting a Candidate’s correctly answered questions on the exam to a scaled score. AHIA opted against using this methodology due to concerns of causing confusion to many people.
- Furthermore, in the certification community it is common practice to retire or remove certain questions from an exam after the exam has been exposed to a number of Candidates. As the AHIA CHIAP certification program grows and more Candidates complete the exam, AHIA will create new forms of the exam, ensuring that the same level of difficulty is present in each subsequent exam form. However, each new exam version will ultimately have a slightly different passing score. AHIA’s opted approach avoids this method of scoring in order to avoid potential confusion to test takers.
- Scores cancelled by AHIA or CMS – AHIA is responsible for the integrity of the scores it reports. On occasion, occurrences such as computer malfunction or misconduct by a Candidate may cause a score to be suspect. AHIA is committed to rectifying such discrepancies as expeditiously as possible. AHIA may void examination results if, upon investigation, violation of its regulations is discovered.

## Record Retention Requirements

AHIA applies best business practices with regards to retention, security, and disposal of paper and electronic records received from Applicants, Candidates, and Certificants. These processes are reviewed annually and may be modified at any time for compliance with local, state, and federal laws affecting record retention.

Certification records are considered confidential information, including but not limited to transcripts, education records, continuing education documents, as defined by the Family Educational Rights and Privacy Act (FERPA) of 1974, and financial data and individual identifiable information/unique identifiers under Payment Card Industry (PCI) Data Security Standards and Federal Regulations.

Candidates are required to upload certification records into the AHIA Certification Management System (CMS), the repository for all certification and recertification applications, files, and pertinent and associated information. Information entered into the AHIA Certification Management System remains a permanent electronic record. In the event of a circumstance involving litigation, disposal of any documents pertaining to the litigation may be suspended.

All documents submitted for application or recertification consideration become the property of AHIA. At such time that these certification records are no longer required for the processing of an application or valued for its information, they will be destroyed per the AHIA Records Management and Retention Policy. Individuals should retain copies of their records for personal use. AHIA is under no obligation to return or issue copies of these documents for future use by a Certificant. Failure to submit the required documentation or fees or the submission of duplicate information surrounding eligibility requirements will delay the review and approval of an application.

## Certification Exam Score Review and Appeals

AHIA is responsible for and committed to accurate tabulation and reporting of the examination scores. Under current AHIA examination development processes, exam items are written, reviewed, and validated by qualified healthcare internal audit professionals. The AHIA periodically conducts a review of all exams to identify questions that may be flawed or performing poorly and issues a new version of each item as needed. Even with these processes, an occasional flawed question may remain unidentified. The appeals process is designed not only to ensure fairness for all Candidates, but also as an additional mechanism to improve the quality of our exams.

If you have concerns about one or more specific questions on the exam or you receive a failing score in your results and wish to challenge it, you may submit a formal complaint/appeal to the AHIA. A complaint/appeal must be submitted to AHIA in writing through postal mail (refer to the Complaint Process and Appeal Process sections of the Candidate Handbook for details).

AHIA will acknowledge receipt of a complaint/appeal in accordance with the AHIA Complaint and Appeal processes. During the complaint/appeal process, the AHIA will review your exam results along with your specific question challenges. If the AHIA finds the question(s) you have challenged to be faulty or flawed and it is determined that the results of your exam were affected by the question(s), a new score may be calculated.

## 7.8 CHIAP Certificate

Once a Candidate has successfully completed the examination, AHIA will mail a hard-copy AHIA CHIAP certificate to the Certificant.

Additionally, a digital pdf file containing a printable certificate will be available in your My CHIAP Profile, accessible online at <https://ahia.org/my-chiap-profile/>. The digital certificate can be accessed by the Certificant during their two (2) year certification cycle.

A re-issue of the hard-copy AHIA CHIAP certificate may be requested by a Certificant in good standing by email to [info@ahia.org](mailto:info@ahia.org); a \$50 Certificate Fee must be submitted to AHIA prior to re-issuance.



## 7.9 Use of Credential

### Use of CHIAP® and Certified Healthcare Internal Audit Professional® Credential

Once you have satisfied all AHIA CHIAP criteria and been awarded the credential, you are known as a Certificant. A Certificant in good standing is authorized to use the CHIAP (block letters) or Certified Healthcare Internal Audit Professional® designation after their name on business cards, email and hard copy signatures, individual name on letterhead and stationery, resumes, LinkedIn profile and other social media sites, and employment or professional association directory listings and websites.

Your exam result will contain information on how to maintain and renew the CHIAP® credential and a copy of AHIA's Use of Credential Policy.

Correct use of the marks is outlined below:

- Always use capital letters when displaying the acronym, CHIAP
- Never use a period after each letter
- Use the ® symbol when referencing CHIAP or Certified Healthcare Internal Audit Professional for the first time in a document or publication; thereafter, the symbol is not required

Refer to the Appendix, Example of Mark Usages section of the Candidate Handbook for further details on the correct use of the marks.

No provisional or interim use of the certification marks is allowed. Retired, Suspended, or Expired status Certificants may not refer to themselves as a CHIAP or Certified Healthcare Internal Audit Professional.

In adherence with the AHIA's Code of Ethics, you will only use the CHIAP designations in the manner stated above and will not use the designations in company names, domain names, product names, or any other unauthorized manner.

Permission to use the CHIAP® mark may be terminated at any time by AHIA for any breach of AHIA policies, procedures, or terms.

AHIA retains all registered certification marks and other ownership rights concerning its marks. Therefore, AHIA reserves and may use, the full range of legal remedies and related sanctions available under applicable laws and corporate policies to protect the marks. Infringement of AHIA's marks will be challenged.

Questions concerning the proper use of the marks should be submitted in writing to AHIA at [info@ahia.org](mailto:info@ahia.org) and should include the phrase "Use of AHIA Certification Marks" in the subject line.

## 7.10 Retaking the Exam

In the event that a Candidate fails to pass the certification exam on the first attempt, they will be allowed to retake the exam two (2) additional times during their two (2) year examination eligibility period. There is a waiting period of a minimum of 30 days between each examination attempt.

Candidates who fail to pass the certification exam will be contacted by AHIA within two (2) business days with instructions for submitting the required Re-testing Fee of \$150, and subsequently schedule an exam retake appointment with CMS.



## 8. Special Accommodations

Candidates who require a special testing accommodation must complete the AHIA Special Accommodations Request Form at the time of initial application or subsequent to being approved as a Candidate for the exam before scheduling their exam date (refer to the Special Accommodations section of the Candidate Handbook for details).

- Candidates who require a special testing accommodation can notate the request in their online certification application and upload the Special Accommodations Request Form at that time. If a condition arises after the application has been submitted and/or approved, an Applicant/Candidate should complete the AHIA Special Accommodations Request Form and send it to AHIA at [info@ahia.org](mailto:info@ahia.org) before scheduling their exam date. (Refer to the Appendix section of the Candidate Handbook to access the Form.)
- Submitted documentation must follow ADA guidelines in that psychological or psychiatric evaluations must have been conducted within the last three (3) years. All medical/physical conditions require documentation of the treating physician's examination conducted within the previous three (3) months.
- Candidates will receive further information on scheduling an examination with accommodations once their request has been reviewed and approved.
- AHIA's exam provider, CMS, will provide reasonable accommodations for Candidates with disabilities. Verification of the disability and a statement of the specific type of assistance needed must be made in writing to AHIA at least 45 calendar days prior to your desired examination date by completing the Special Accommodations Request Form. All special accommodation requests must be accompanied by supporting medical or health-related documentation for review by AHIA.

Please contact AHIA at [info@ahia.org](mailto:info@ahia.org) if you need any additional assistance to apply for the certification exam or request your accommodations.

## 9. Certification Maintenance and Renewal

The Association of Healthcare Internal Auditors (AHIA) is an international organization dedicated to the advancement of the healthcare internal auditing profession, which includes auditing disciplines such as operational, compliance, clinical/ medical, financial and information technology.

"In 2011, The AHIA Board formally endorsed The Institute of Internal Auditors' (IIA) mandatory components of the International Professional Practice Framework (IPPF). They are the official Definition of Internal Auditing, the International Standards for the Professional Practice of Internal Auditing, and the Code of Ethics. The IPPF is available at [theiia.org](https://theiia.org)<sup>1</sup> Among other areas, these standards address continuing education. Specifically, Standard 1230 – Continuing Professional Development states internal auditors must enhance their knowledge, skills, and other competencies through continuing professional development.

<sup>1</sup> <https://ahia.org/professionalstandards/>

## Overview of CPE Requirements

<b>Continuing Education Requirements</b>	<ul style="list-style-type: none"> <li>• CHIAP certificate holders must earn forty (40) hours of Continuing Professional Education (CPE) every two (2) years, including two (2) hours related to Ethics</li> <li>• At least ten (10) hours of CPE must be earned each year.</li> <li>• Carryover of hours is not allowed</li> </ul>
<b>Renewal Requirements</b>	<ul style="list-style-type: none"> <li>• Renewal cycle begins on January 1st following the date certification is awarded</li> <li>• Must renew by December 31 every two years and report the CPE hours earned</li> <li>• Renewal Fee: AHIA Members \$100/ Non-Members \$150</li> <li>• Certificate holders are subject to audit to verify compliance with the renewal requirements. Supporting documentation does not need to be submitted with your renewal unless you are selected for audit.</li> <li>• Certificate holders who fail to renew their certification and report CPE requirements by the reporting deadline will be automatically placed in 'suspended' status and lose the privilege to use their certification until all renewal requirements are met.               <ul style="list-style-type: none"> <li>◦ You may return to 'active' status by reporting your CPE hours and paying your renewal fee with additional penalty of 8 CPE hours and late fee</li> <li>◦ If your certification status remains 'suspended' for more than six (6) months, your certification will be classified as 'expired' and you will have to reapply and take the exam to be certified.</li> </ul> </li> </ul>

## 9.1 CPE Requirements

### Continuing Education Requirements

AHIA requires active certificate holders to earn forty (40) hours of Continuing Professional Education (CPE) every two (2) years, including two (2) hours related to ethics. Each year shall include at least ten (10) hours of continuing education credit. Carryover of continuing education hours to future recertification periods is not allowed. Certificate holders classified as Retired status are not required to renew Certification.

### Qualifying CPE Activities

- **Eligible Training Courses**

Training courses which are approved/provided by the following groups qualify for continuing education credits:

- Approved by the National Association of State Boards of Accountancy (NASBA)
- Approved/accepted by an individual State licensure board
- Provided by AHIA, the Health Care Compliance Association (HCCA), Institute of Internal Auditors (IIA), and Association of Certified Fraud Examiners (ACFE)

The most recent issue of The Statement on Standards for Continuing Professional Education (CPE) Programs, effective December 31, 2019, may be found at: <https://www.nasbaregistry.org/the-standards>.

- **Authoring or Contributing to Publications**

CHIAPs who author or contribute to publications may obtain CPE credits for their work, as long as their contributions pertain to subject areas in the CHIAP Body of Knowledge (BOK).

- Qualifying Professional Association Publications:
  - AHIA - New Perspectives
  - Other healthcare internal auditing professional journals (e.g., HCCA, IIA, HFMA, ACUA, ACFE)
- Calculation of CPE Credits:
  - Author:
 

An author of a published article may receive CPE credit for their research and writing time to the extent it maintains or improves their professional competence. For the writer to receive CPE credit, the article must be formally reviewed by a content reviewer other than the writer (for example, in the case of New Perspectives, an individual on the AHIA Editorial Committee).

CPE credits can only be claimed at the time the article is published. Credits for authoring or contributing to books, research and white papers, or articles would be calculated as 1 CPE credit hour per 200 words.

- **Content Reviewer:**

A content reviewer is an Individual associated with the publishing of articles, books, research, and white papers who is qualified in the subject matter and is other than those who developed the content. Content reviewers who review an item submitted for publishing may receive .5 CPE credit for every 200 words, up to a maximum of 8 CPE credits permitted.

Certificants may claim up to 8 CPE credits within a Renewal Reporting Period for Author and Content Reviewer activities.

- **Presentations at Professional Association Events or Teaching College Courses**

CHIAPs who deliver oral presentations (e.g., seminars, conferences, educational offerings, webinars, roundtables or teach college courses) may obtain CPE credits for their effort, as long as their contributions pertain to subject areas in the CHIAP BOK. Subsequent presentation of the same material may be reported as presentation time only.

- **Qualifying Professional Associations:**

- AHIA
- Other healthcare internal auditing professional associations (e.g., HCCA, IIA, HFMA, ACUA, ACFE)

- **Calculation of CPE Credits:**

Instructors, discussion leaders, or speakers who:

- Present a learning activity for the first time may receive 1 CPE credit for each 50 minutes of presentation time, plus credit for preparation time equivalent to two (2) times the number of presentation time CPE credits.
- Subsequently present the same material may receive CPE credit for the presentation time only, based on 1 CPE credit for each 50 minutes of presentation time, up to a maximum of 3 CPE credits.

Certificants may claim up to 15 CPE credits within a Renewal Reporting Period for activities associated with Presenting at Professional Association Events and Teaching College Courses.

- **CHIAP Item Writer Sub-Committee Exam Content Contributor**

- Members of the Item Writer Sub-Committee directly participating in the development of new exam questions may earn 1 CPE credit for each submitted question that is accepted, up to a maximum of 20 CPE credits permitted.
- Members of the Item Writer Sub-Committee performing a technical review of submitted exam questions may earn .5 CPE credit for each accepted question.

Certificants may claim up to 20 CPE credits within a Renewal Reporting Period for Item Writer Sub-Committee Exam Content Contributions.

## 9.2 Renewal Cycle Timeline

### Renewal Requirements

The AHIA requires active certified individuals to renew their certification by December 31 every two (2) years, including reporting they have met the CHIAP CPE requirements to continue using their AHIA certification. No CPE is required in the year in which Certification is granted. Thus, after initially being awarded the certification, the Certificant must report their CPE and apply to renew their certification by the third December 31. Certificants are subject to audits verifying compliance with renewal requirements. Supporting documentation does not need to be submitted with your renewal unless your renewal is selected for audit.

### Failure to Renew by December 31

Failure to renew your certification and report CPE requirements by the reporting deadline will result in you automatically being placed in Suspended status. (Refer to the Appendix section of this handbook for a complete list of certification status definitions.) This will result in your loss of the privilege to use your certification until all renewal requirements are met. You may convert your certification to Active status within six (6) months by reporting your required continuing education hours and eight (8) additional CPE hours (penalty education hours), paying the renewal fee, plus paying an additional 50% penalty fee. If your certification status remains suspended for more than six (6) months, your certification will be classified as Expired and you will have to reapply for certification, including taking the certification examination.

### Electing Inactive Status at Renewal

At the time of renewal, if a certificate holder has temporarily left the healthcare internal audit profession or is unable to meet the recertification requirements due to unusual and/or extenuating circumstances beyond their control (e.g., unemployment, military assignment, medical condition), they may request a change to Inactive status and pay the Inactive Renewal Fee. (Refer to the Appendix section of this handbook for further details regarding electing Inactive Status.)

### Inactive Status Renewal

A CHIAP assigned to an Inactive status is exempt from CPE reporting requirements until such time as they wish to return to Active status. To maintain Inactive status, the Certificant must pay the Inactive Renewal Fee by the last month (December) of their current two-year Inactive status period. Failure to renew will result in a transfer to Suspended status (Refer to Section 14.7 Certification Status Definitions of this handbook.)

### Sample of Renewal Timeline

CHIAP® Certification Renewal Conditions	Key Certification Renewal Cycle Dates
<b>Applicant is awarded certification...</b>	August 2022
<b>Certificant's CPE Renewal Cycle begins on...</b>	January 1, 2023
<b>Certificant's CPE Renewal Cycle ends on...</b>	December 31, 2024
<b>Reminder notice sent to all Certificants</b> to submit renewal fee and report required CPE...	October 1, 2024
Certificant's <b>recertification renewal payment and reporting of CPE</b> is due no later than...	December 31, 2024
If renewal payment and reporting of CPE is not submitted by the end of the two-year certification renewal cycle, <b>Certificant is placed in Suspended status</b> effective...	January 1, 2025
If within six (6) months of being placed in Suspended status the Certificant has not reported the required CPE plus the CPE penalty of an additional eight (8) hours, and paid the Renewal Fee, the <b>Certificant's credential expires on...</b>	July 1, 2025

## 9.3 CPE Reporting and Recertification Application Process

### Renewal Requirements

Certificants should submit continuing education credits earned in support of recertification of their CHIAP through the [AHIA Membership Portal](#). CPE can be entered throughout the two-year reporting cycle. The system is set up to track the requirement of 40 total CPE, with no less than 10 per year; thus, it will automatically tally how many credits have been submitted and how many are still required. Certificants are not required to enter each CPE activity individually. Instead, you may make one entry for each year of your reporting cycle, with the total CPE hours earned in each year. (Refer to the Appendix section of this handbook for instructional documents with screen shots of the CPE reporting process, also available at [www.ahia.org/certification/resources/forms](http://www.ahia.org/certification/resources/forms).)

A Certificant who has been placed in Suspended status can enter continuing education credits earned plus the eight (8) hours of penalty CPE after the recertification cycle has ended (in the example above, the period of 1/1/2025 through 6/30/2025).

### Failure to Meet Continuing Education Requirements by December 31

Failure to fully adhere to the AHIA CPE requirements for recertification will result in a CPE penalty of eight (8) additional hours of continuing education. Non-compliance would include not meeting one or more of the following requirements:

- Forty (40) hours of CPE over the two-year reporting cycle
- At least ten (10) hours in each reporting year
- Two (2) hours related to ethics during the two-year reporting cycle

The eight (8) CPE penalty hours must be completed and reported prior to the end of the six (6) month Suspended status period (in the example above this would be June 30, 2022), otherwise the Certificant's credential expires. The credits earned toward the CPE penalty requirement may not be counted towards the CPE requirements for the subsequent recertification reporting period.

### Recertification Application

The Certificant will attest that the information in their profile and the CPE activity submitted are accurate when remitting the Renewal Fee. (Instructional documents with screen shots of recertification payment and application process will be provided prior to September 1, 2022).

### Audit

AHIA will audit a sample of recertification applications submitted for each renewal cycle. The CMS has functionality, which will randomly select the applications to be audited based on criteria defined by the AHIA Certification Committee. The Certificant will be notified via an automatic system email that their recertification application has been selected for audit. The email will include instructions regarding documentation to be provided by the Certificant. Failure to comply with an audit request or failure to pass the audit will result in the Certificant's credential being revoked.

## 9.4 Certification Renewal Fee

Active certificate holder is a member in good standing with the AHIA . . . . . \$100 fee to renew certification  
 Active certificate holder is a non-member of AHIA . . . . . \$150 fee to renew certification

Inactive certificate holder is a member in good standing with the AHIA . . . . . \$50 fee to renew certification  
 Inactive certificate holder is a non-member of AHIA . . . . . \$75 fee to renew certification

Refer to the Other Fees section of the Candidate Handbook for details.

## 10. Exam Content

The CHIAP Certification Exam consists of 175 multiple choice questions to be completed in a four (4) hour time limit. Each item in the examination was carefully developed in accordance with the Body of Knowledge (BOK) established for AHIA through a job analysis study of the healthcare internal audit industry. This study was implemented and analyzed with the assistance of our exam development vendor, PSI, by the AHIA Job Analysis Advisory Committee (JAAC).

The BOK is guided by overarching internal audit principles, as well as principles for compliance and privacy. These principles are applied in the acute care, post-acute care, ambulatory care, and health plan settings. The exam items were distributed among the BOK topics, which cover four categories: Business Aspects of Care Setting, Revenue Cycle, Regulatory Environment, and Core Business Functions, shown in Exhibit 1.

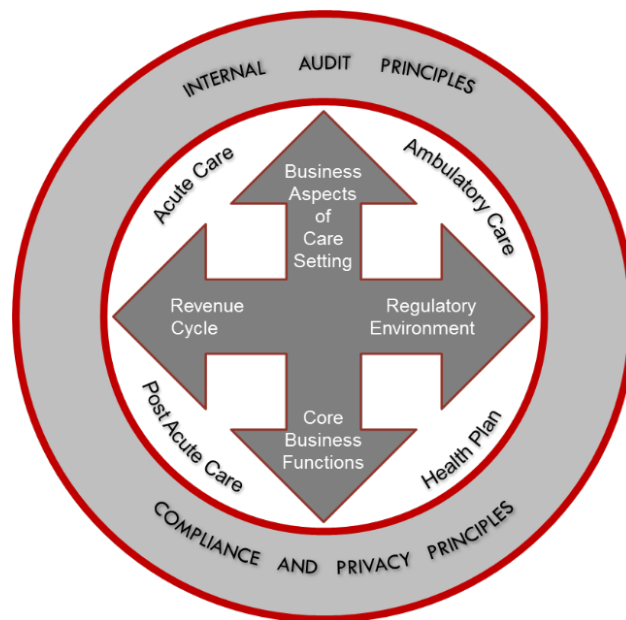
After significant analysis and discussion, a detailed content outline was developed, encompassing 45 tasks and 80 topics. Exhibit 2 specifies the industry knowledge that is relevant to a healthcare internal auditor.

The exam questions will integrate the internal audit tasks that are summarized in Exhibit 3 with the healthcare BOK (Exhibit 1). For example, a question might ask about risk assessment when performing a radiology operational audit. Exhibit 3 shares the examination task specifications.

In addition to content development, the JAAC also considered the cognitive complexity of the content. Exam questions require the Candidates to demonstrate recall, application, or analysis level thinking with 50 questions involving recall, 80 covering application, and 20 applying analysis level thinking, plus 25 pre-test questions.

Refer to the Exam Preparation section of this handbook and review the sample examination questions online at <https://ahia.org/exam-preparation/>.

Going forward the Certification Committee will continue to administer and oversee the Certification Program, ensuring a bank of questions for future certification exams is maintained. Additionally, on a bi-annual basis the committee will re-assess the current exam pool and revise the exam content as needed.



*Exhibit 1 – Healthcare Internal Audit Body of Knowledge*



Exhibit 2 – Industry Knowledge Specifications

Association of Healthcare Internal Auditors (AHIA) Examination Specifications			
1. Business Aspects of Care Setting		30	
A. Core Care Settings			
1. Physician Practices (professional fee services)			
2. Acute Care Hospitals (including emergency department, ancillary departments, and other clinical care activities)			
3. Post-Acute Care (rehab, behavioral, skilled nursing facilities, home care, assisted living, durable medical equipment, hospice, retail pharmacy)			
B. Other Care Settings			
1. Urgent Care Centers			
2. Ambulatory Surgery Centers			
3. Freestanding Imaging Centers			
4. Freestanding Emergency Departments			
5. Specialty Hospitals			
6. Medical Office Buildings			
7. Virtual Medicine			
2. Revenue Cycle		40	
A. Health Insurance Provider Revenue Cycle Elements			
1. Enrollment and eligibility			
2. Benefits administration			
3. Reimbursement fee schedule			
4. Claims processing			
5. Claim appeals			
B. Health Care Provider Reimbursement			
1. Medicare			
2. Medicaid			
3. Advantage Programs			
4. Commercial Payors			
5. Self Pay			
6. Research Sponsors			
C. Health Care Provider Revenue Cycle Elements			
1. Scheduling			
2. Preregistration			
3. Registration / Patient Access			
4. Provision of Services and Documentation			
5. Charge Capturing			
6. Discharge			
7. Coding			
8. Billing			
D. Revenue Deductions			
1. Contractual adjustments			
2. Administrative adjustments			
3. Charity care			
4. Bad debt writeoffs			
5. Payment Posting			
6. Collections			
7. Management Monitoring / Key Performance Indicators			
3. Regulatory Environment		20	
A. Regulatory Bodies			
1. CMS			
2. OIG			
3. OCR			
4. DEA			
5. FDA			
6. The Joint Commission			
7. State Regulators			
B. Regulations			
1. HIPAA			
2. Stark and Anti-Kickback			
3. False Claims Act			
4. CMS Conditions of Participation			
5. CMS Conditions of Payment			
6. Affordable Care Act			
7. Physician Payment Sunshine Act			
8. EMTALA			
9. IRS Regulation 501(r)			
4. Core Business Functions		60	
A. Operational / Financial			
1. Payroll			
2. Procurement			
3. Materials Management			
4. Foundations			
5. Cash Management			
6. Human Resources			
7. Joint Ventures			
8. Finance / Accounting			
9. Contract/Vendor Management			
10. Business Continuity			
11. Research			
B. Information Technology			
1. Electronic Medical Record Systems			
2. Revenue Cycle Systems			
3. Information Governance			
4. Cybersecurity			
5. Biomedical Devices			
6. Clinical Systems			
C. Compliance			
1. Corporate Compliance / Legal			
2. Privacy			
3. Credentialing and Privileging			
4. Accreditation			
5. Conflict of Interest			
D. Administrative Functions			
1. Risk Management			
2. Enterprise Risk Management			
3. Quality			
4. Patient Safety			
5. Organizational Governance			
6. Strategic Planning			
Totals			150

Source: A Job Analysis Study of the Healthcare Internal Auditor 2017.

Exhibit 3 – Examination Task Specifications

<b>1. Risk Assessment</b>	<b>35 items</b>
<ul style="list-style-type: none"> <li>A. Identify organizational objectives for a process.</li> <li>B. Identify key components of a process and all stakeholders impacted.</li> <li>C. Identify risks inherent in the process (e.g., operational, fraud, reputational, legal, financial).</li> <li>D. Document the process as designed.</li> <li>E. Establish control expectations.</li> <li>F. Identify control gaps in a process.</li> <li>G. Use data analytics to identify potential risk areas.</li> </ul>	
<b>2. Planning</b>	<b>40 items</b>
<ul style="list-style-type: none"> <li>A. Research industry best practices, organizational policies, control frameworks, and regulations related to a project.</li> <li>B. Collaborate with key departments (e.g., compliance, legal, risk management) to identify risk and coordinate work.</li> <li>C. Define scope and objectives of audit project.</li> <li>D. Design an audit program to evaluate controls and operational processes.</li> <li>E. Design special examination or consulting procedures as requested by management.</li> <li>F. Identify data needs to conduct audit procedures.</li> <li>G. Notify audit client of upcoming project.</li> <li>H. Assess independence and objectivity of assigned project staff.</li> </ul>	
<b>3. Fieldwork</b>	<b>40 items</b>
<ul style="list-style-type: none"> <li>A. Conduct entrance meeting.</li> <li>B. Execute the designed audit program or special</li> <li>C. Modify the audit program as circumstances necessitate.</li> <li>D. Determine adequacy and sufficiency of relevant information technology controls.</li> <li>E. Analyze results of testing and data analysis.</li> <li>F. Identify issues that require evaluation by other departments (e.g., compliance, legal).</li> <li>G. Validate exceptions noted with the audit client.</li> <li>H. Perform root cause analysis for identified issues.</li> <li>I. Formulate recommendations to address identified issues.</li> <li>J. Conduct periodic status report meetings with the audit client.</li> <li>K. Verify all audit procedures were performed.</li> <li>L. Document procedures performed and conclusions reached.</li> <li>M. Review work papers for completeness, accuracy, and compliance with IIA Standards.</li> </ul>	
<b>4. Reporting and Audit Closure</b>	<b>20 items</b>
<ul style="list-style-type: none"> <li>A. Draft a detailed report and executive summary of the audit project.</li> <li>B. Conduct exit conference with the audit client.</li> <li>C. Reach consensus with the audit client on facts and effectiveness of management action plan.</li> <li>D. Ensure that the final report presents a clear, factual representation of the results of the audit.</li> <li>E. Ensure that the final report is issued.</li> <li>F. Obtain audit client feedback to evaluate audit project.</li> </ul>	

<b>5. Follow-up</b>	<b>5 items</b>
A. Validate that management plans have been carried out to resolve identified issues. B. Report status of open issues to management. C. Escalate unresolved issues to management. D. Track and trend recurring issues across an organization.	
<b>6. Other Professional Responsibilities</b>	<b>10 items</b>
A. Represent internal audit at company meetings. B. Keep abreast of company strategies and initiatives. C. Keep abreast of business environment. D. Follow the IIA's International Professional Practices Framework. E. Monitor ongoing regulatory changes to identify emerging risk areas. F. Identify opportunities to improve audit effectiveness and efficiency. G. Identify opportunities for continuous auditing.	

## 11. Exam Preparation

### AHIA's Virtual Learning - Audit Resource Center

AHIA's Virtual Learning Audit Resource Center is free to AHIA members and designed to enhance your professional knowledge in internal auditing in the healthcare industry. Within this member-only healthcare internal audit specific clearing house of AHIA resources you will find a variety of searchable educational content from publication articles, educational recordings/presentations, and other materials to help you prepare for the CHIAP certification exam. They system will be continuously updated with materials as they are developed.

#### *What AHIA educational content is available in the Virtual Learning Audit Resource Center?*

- Conference Proceedings
- Recorded Webinars and Tech Talks
- New Perspectives Articles
- White Paper

### Body of Knowledge Webinar Series Recordings

AHIA has developed a series of webinars designed to cover, at a high level, key points for topics included in the Body of Knowledge upon which the CHIAP exam is based. It is not intended to teach to the exam, but rather to the AHIA Body of Knowledge of Healthcare Internal Auditing.

Webinar topics include: Business Aspects of Care Setting, Regulatory Environment, Compliance, Revenue Cycle, Operational/Financial Functions, Administrative Functions, and Information Technology. Participants who attend these webinars will gain a basic understanding of these areas and receive references, as needed, for further study.

For more information on these resources, and updates on upcoming AHIA offerings to help you prepare, visit <https://ahia.org/exam-preparation/>.

## 12. Complaint Process

The Association of Healthcare Internal Auditors (AHIA) has established the following process in an effort to provide fairness to any Certified Healthcare Internal Audit Professional® (CHIAP®) facing discipline for noncompliance to certification requirements, CPE sponsors, and others. The process provides the accused (Respondent), via a formal complaint, an opportunity to respond to the complaint before taking action. Below is a description of how the process works.

### ***Who can submit a Complaint?***

Complaints may originate from the public, another CHIAP, a current or former employer, and/or other sources. AHIA itself may also initiate a complaint. The AHIA Complaint and Appeals Committee will investigate all submitted complaint forms, regardless of their source.

### ***How do I file a Complaint?***

If you believe a CHIAP has violated certification requirements or if you have concerns about CPE sponsor administration or program content and any efforts to resolve the issue have been unsuccessful, you may file a complaint by completing the Complaint Form ("Complaint"). (Refer to the Appendix section of the Candidate Handbook to access the Form.)

### **Complaints:**

- Must be in writing.
- Must detail the specific claim(s) against the individual and/or sponsor.
- Must include facts supporting the alleged violation.
- Must include supporting documentation and other evidence that corroborates and supports the allegation. (Examples include copies of correspondence, documents and/or pictures that substantiate the allegation)
- Should redact all sensitive and confidential information. (You may be contacted if this type of information is needed during the investigation)
- Should include the complainant's signature. However, this is not required. (See Anonymous Complaints below.)
- Must be mailed to the following address:  
     AHIA Certification Program - Complaints  
     111 W. Jackson Blvd. Suite 1412  
     Chicago, IL 60604 USA

NOTE: Do not email Complaint Forms. The AHIA is not responsible for sensitive information transmitted electronically. The Complaint and Appeals Committee does not accept complaints filed verbally or by facsimile.

The accused (Respondent) will receive notification of the complaint via a letter from the AHIA Complaints and Appeals Committee to the Respondent's last known address. The letter will include a copy of the complaint, as well as the complainant's identity, if known.

### ***Can I file a Complaint Anonymously?***

You may file your complaint anonymously, but you still need to submit the Complaint Form. If the AHIA Complaint and Appeals Committee is unable to contact you for insufficient information within the complaint, the complaint will not be investigated and will be considered closed without any action taken.

### ***What types of Complaints do you receive?***

Complaints vary.

Complaints investigated by the AHIA Complaint and Appeals Committee include, but are not limited to:

- CHIAP credential use by expired certifications and non-certified healthcare auditors.
- Misrepresentations.
- Failure to disclose a conflict of interest.
- Failure to maintain competency (includes CPE requirements).
- Felony conviction.
- Failure to provide professional care.
- Ethics violations.
- Examination questions and scoring concerns.
- CPE program administration.
- CPE program content.

- Complaints not investigated by the AHIA Complaint and Appeals Committee include:
- Fee disputes.
- Minor errors or mistakes.

### ***What happens to my complaint once received by AHIA?***

Upon receipt of a written complaint, the AHIA Complaint and Appeals Committee completes an initial review. The AHIA Complaint and Appeals Committee may:

- Request an Informal Fact-Finding Conference Call (IFF) to determine if probable cause exists to initiate an investigation. (See Informal Fact-Finding Conference Call section below for further details.)
- Assign a Presiding Officer and begin the investigation process due to evidence substantiating the complaint.
- Forward and/or file a complaint to the National Association of State Boards of Accountancy (NASBA) for CPE courses recognized by NASBA.

The Presiding Officer must complete the investigation within a reasonable amount of time. The type and difficulty of the complaint, cooperation of the Respondent, workload, and required assistance all factor into the length of the investigation and resolution time. The AHIA Complaint and Appeals Committee's goal is to close a complaint within 180 days from the receipt of a complaint. Upon completion of the investigation, the Presiding Officer will draft an Opening Letter (see Opening Letter section below) to the CHIAP or CPE Sponsor involved (Respondent).

### ***What is an Informal Fact-Finding Conference Call?***

An Informal Fact-Finding Conference Call (IFF) provides an opportunity for the AHIA Complaint and Appeals Committee and the Respondent to speak directly to one another. The purpose of the IFF is for the AHIA Complaint and Appeals Committee to ask and the Respondent to answer questions related to the complaint. Prior to the convening of an IFF, the Respondent receives notice that contains the specific allegations, and any information that the AHIA Complaint and Appeals Committee will rely upon in making a decision. The Complainant (if known) receives notice of the IFF and may participate on the call. An IFF may result from the request of an AHIA Complaint and Appeals Committee member, or the Respondent. Complainants cannot request an IFF. If necessary, witnesses will be asked to participate. In addition, the Complainant may need to answer questions or to clarify a specific allegation. Dismissal of the matter will occur if there is not enough evidence to substantiate a violation of certification requirements. Investigations occur if the AHIA Complaint and Appeals Committee believes there is sufficient evidence to determine that a violation of certification requirements was committed or upon validation of CPE administration or program content concerns.

### ***What is an Opening Letter?***

The Opening Letter (sent by certified mail, e-mail, or both, to the Respondent's last known address) will:

- Inform the Respondent of the role of the Presiding Officer and describe the purpose of the investigation.
- Identify the complaint.
- Identify whether the Respondent is subject to adverse action.
- Ask for a detailed description of the Respondent's participation and involvement in the activities that are the subject of the investigation.
- State that the Respondent has an opportunity to defend themselves through a written response ("Answer").
- State that the Respondent has an opportunity to defend themselves through a hearing, upon Respondent's request ("Hearing").
- Provide a reasonable time to respond.

### ***What is the purpose of the Respondent's Answer?***

The purpose of the Respondent's Answer is to provide the Respondent with an opportunity to present factual data or proof concerning the facts and circumstances surrounding the alleged violation to the AHIA Complaint and Appeals Committee. Respondent will have thirty (30) calendar days to provide an Answer before any action against the Respondent occurs.

### ***How do I request a Hearing?***

The Respondent may request a Hearing by contacting the assigned Presiding Officer. The Presiding Officer will coordinate with the Respondent to schedule the Hearing. The Hearing will be by telephone and will be scheduled within a reasonable amount of time, which is determined solely by the AHIA Complaint and Appeals Committee. The Respondent may waive having a Hearing.

### ***What is the Hearing Procedure?***

The Presiding Officer shall conduct the Hearing via telephone.

1. The Presiding Officer will introduce the Respondent and AHIA Complaints and Appeals Committee members.
2. The Presiding Officer will give a brief explanation of the Hearing's purpose.
3. The Presiding Officer will explain how the Hearing will proceed.
4. The Presiding Officer will present the alleged violation.
5. The Presiding Officer will then allow the Respondent to speak in defense of the Answer.
6. Upon completion of the Respondent's testimony, the Presiding Officer may ask the Respondent questions.
7. The Presiding Officer will dismiss the Respondent from the Hearing once the Presiding Officer is satisfied with the oral testimony of the Respondent.
8. The Presiding Officer and the AHIA Complaint and Appeals Committee will deliberate to reach a decision.

### ***What are the possible complaint outcomes?***

The Presiding Officer, and members of the AHIA Complaint and Appeals Committee, shall review the evidence and determine whether the Respondent violated certification requirements. The Presiding Officer must provide a written decision ("Determination") to the Respondent within a reasonable amount of time informing them of one of the following outcomes:

- The AHIA Complaint and Appeals Committee closes the investigation if they determine the party is compliant with certification or CPE requirements. The Complainant and the Respondent will receive copies of a resolution letter.
- If the investigation indicates that non-compliance has occurred, the Respondent will be required to correct issues in accordance with a written Consent Order.
- Serious non-compliance matters will result in penalties.

Failure to respond to AHIA's request to correct non-compliance matters or to provide evidence that appropriate action occurred will also result in penalties. Penalties for non-compliance may include:

- Reprimand.
- Probation.
- Additional or specific CPE.
- Monitoring.
- Certification suspension or revocation.
- Revocation of CPE Sponsor's participation with AHIA, including immediate removal of CPE logos from all promotional material.

### ***What do I do if I disagree with the outcome?***

Respondents that disagree with the complaint's outcome are encouraged to follow the AHIA Appeals Process.



## 13. Appeal Process

The Association of Healthcare Internal Auditors (AHIA) has established the following process in an effort to provide fairness to any Certified Healthcare Internal Audit Professional® (CHIAP®), CPE sponsors, and others that have received an adverse decision from the complaint process. The process provides a Complaint Respondent an opportunity to request a formal appeal of the adverse action. Below is a description of how the process works.

### ***Who can submit an Appeal?***

Appeals may originate from anyone receiving an adverse decision originating from the complaint process. The AHIA Appeals Officer will investigate all submitted Appeal Forms, regardless of their source.

### ***How do I file an Appeal?***

If you have received an adverse decision originating from the complaint process, you may file an appeal with the AHIA's Appeal Officer by completing the Appeal Form ("Appeal"). (Refer to the Appendix section of the Candidate Handbook to access the Form.)

#### **Appeals:**

- Must be in writing
- Must be received within fourteen (14) calendar days after the determination
- Must specify the reasons for reconsideration
- Must be mailed to the following address:  
     AHIA Certification Program - Appeals  
     111 W. Jackson Blvd. Suite 1412  
     Chicago, IL 60604 USA

NOTE: Do not email Appeal Forms. AHIA is not responsible for sensitive information transmitted electronically. The Appeal Officer does not accept Appeals filed verbally or by facsimile.

### ***Can I file an Appeal anonymously?***

The AHIA does not accept anonymous appeals. While the AHIA may make reasonable accommodations to protect the identity of the person filing the appeal, the AHIA cannot guarantee anonymity in any case.

### ***What types of appeals do you receive?***

Appeals vary. Appeals investigated by the Appeals Officer include, but are not limited to:

- CHIAP Application Denials
- CHIAP Examination Score Reviews
- CPE Sponsorships
- AHIA Complaint and Appeals Committee Complaint Decisions

### ***What happens to my Appeal once received by the Appeals Officer?***

Upon receipt of a written appeal, the Appeal Officer, or designee, will complete an initial review. The Appeal Officer will schedule a hearing date for a conference call ("Appeal Hearing"). The Appeal Officer shall conduct the Hearing via telephone. The Appeal must address procedural errors or factual errors that may have occurred during the process. The Appeal may not introduce new information. The agenda for the Hearing is:

1. The Appeal Officer will introduce the parties.
2. The Appeal Officer will give a brief explanation of the Appeal Hearing's purpose.
3. The Appeal Officer will explain how the Appeal Hearing will proceed.
4. The Respondent will present the testimony regarding the Appeal.
5. Upon completion of the Respondent's testimony, the Appeals Officer may ask the Respondent questions.

6. The Appeal Officer may allow the Presiding Officer assigned during the complaint process to respond to the Respondent's testimony.
7. The Appeal Officer will dismiss the Respondent and the Presiding Officer from the Hearing once the Appeal Officer is satisfied with their testimonies.

The Appeal Officer must complete the Appeal Hearing within a reasonable amount of time. The time varies depending on the nature of the appeal and cooperation of the involved parties. The AHIA Appeal Officer's intention is to close appeals within ninety (90) days.

### ***What are the possible Appeal outcomes?***

The Appeal Officer shall review the evidence and make one of the following determinations:

- Upholds and closes the appeal, if they determine the original decision is the correct action. The person filing the appeal will receive a letter detailing the decision.
- If the original decision is inaccurate, the original decision will be overturned. The person filing the appeal will receive a letter detailing the decision. The Appeal Officer will also share the reason(s) for the overturned decision to the AHIA Governance Committee and others involved in the original decision-making process in an attempt to educate and prevent future appeals.

### ***What happens once an Appeal is closed?***

You can appeal an adverse decision once. All Appellate Rulings are final. All investigations of a CHIAP Certificant remain permanently on record. Determinations and Appellate Rulings are not public records.



## 14. Appendix

### 14.1 Contact Information

For general questions contact [info@ahia.org](mailto:info@ahia.org)

For technical assistance with the application system or requirements contact [info@ahia.org](mailto:info@ahia.org).

### 14.2 Online Application System

All Instructions are available at <https://ahia.org/forms/>.

- Step-by-Step Application System Instructions
- Step-by-Step CPE Reporting Instructions

### 14.3 Forms

All Certification related forms are available at <https://ahia.org/forms/>.

NOTE: All documentation and forms uploaded into the online application must be in PDF format. Word documents (.doc) will not be accepted.

- Appeal Form
- Complaint Form
- Employment Verification Form
- Name Change Form
- Special Accommodations Request Form
- Status Change Request Form

### 14.4 Frequently Asked Questions (FAQs)

Frequently Asked Questions are available at [www.ahia.org/forms/](http://www.ahia.org/forms/).

### 14.5 Certification Management Services

Exam scheduling guide available at [www.ahia.org/forms](http://www.ahia.org/forms).

### 14.6 Sample Examination Questions

Sample examination items are available at <https://ahia.org/exam-preparation/>.

### 14.7 Certification Status Definitions

#### Active Status/In Good Standing

Once you earn the healthcare internal auditor credential and become a Certificant, your certification is considered to be in “active” status. When you earn and record the required 40 Continuing Professional Education (CPE) credits and

renew your credential before the two-year certification cycle ends, you will remain a credential holder in good standing and considered to be in Active status.

### **Suspended Status**

If you do not satisfy the 40 CPE and complete the certification maintenance cycle process by submitting a Renewal of Certification Status application within the active certification cycle, your certification will be “suspended.” The suspension period lasts for six (6) months, unless you submit a Renewal of Certification Status application and demonstrate completion of the required 40 CPE before the suspension period ends.

If you are in a Suspended status, you may not refer to yourself as a healthcare internal auditor Certificant or use the credential designation until you earn the 40 CPE, complete the renewal process, submit the renewal fee, and receive notification of re-instatement from AHIA.

The dates of the Certificant’s next CPE cycle or certification cycle will not change after his or her certification is reinstated and changed from Suspended status back to Active status.

### **Inactive Status**

If you are temporarily leaving the health care internal audit profession or are unable to meet the recertification requirements due to unusual and/or extenuating circumstances beyond your control (e.g., unemployment, military assignment, medical condition), you may request that your certification status be changed to Inactive.

To be eligible for Inactive status, you must be a Certificant in good standing and submit the Status Change Request form no later than December 31st of the year the Certificant is due to recertify. Otherwise, after December 31st, the Certificant will be moved to Suspended status and must first successfully recertify by June 30th, before applying for Inactive status.

An individual on Inactive status is allowed to keep the designation, but may not display the physical CHIAP certificate issued by AHIA or use the title “Certified Healthcare Internal Audit Professional” or “CHIAP” in any manner, oral or written.

A CHIAP who has been approved for Inactive status is exempt from the CPE reporting requirements until such time that they wish to return to Active status.

A Certificant may remain in Inactive status indefinitely, as long as the Inactive Status Renewal Fee is paid by the last month (December) of their current two-year Inactive status period.

An Inactive Certificant in good standing may request a return to Active status at any time during their current two-year Inactive status period by submitting a Re-certification Application in the CMS.

### **Expired Status**

If you do not earn the required 40 CPE and do not complete the certification maintenance cycle process within the suspension period, you will lose your credential status and be assigned an “expired” status. You may not refer to yourself as a healthcare internal auditor credential holder or use the credential designation when in an Expired status. The Certificant’s certification number will be expired at the end of the month in which the suspension period ends and will no longer be valid. To regain the credential of healthcare internal auditor, the individual must apply to take and pass the exam.

### **Retired Status**

If you wish to relinquish your Active status, you are eligible to apply for “retired” status. To qualify, you must no longer earn your primary income as a healthcare internal audit practitioner.

To apply for Retired status, submit an email request to [info@ahia.org](mailto:info@ahia.org). AHIA will send you guidelines about the Retired status, applicable fees, and a form to complete. Once approved for Retired status, the Certificant’s certification number

will be expired at the end of the current two-year period of certification, as indicated on the certificate and will no longer be valid.

If you return to the practice of healthcare internal auditing, you can apply for Active status again by contacting AHIA. In your application for re-instatement, you will be required to document you have completed 40 CPE within the most recent two (2) years.



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