2025 | CANDIDATE HANDBOOK

COUNCIL ON PHARMACY STANDARDS

Certification Examination

CPBP

Certified Pharmacy Benefits Pharmacist

Council on Pharmacy Standards

COUNCIL ON PHARMACY STANDARDS

CANDIDATE HANDBOOK

Recognition, Value, Expertise...

It is what certification is all about!

ABOUT CERTIFICATION

Competency-based certification allows pharmacists to demonstrate validated, practice-relevant knowledge in a defined specialty. Through CPS certification, candidates attest to professional accountability, lifelong learning, and safe, effective practice.

The Certification Commission for the Council on Pharmacy Standards (CC-CPS) is the independent body that designs, governs, and maintains CPS certification and recertification programs. CC-CPS operates at arm's length from CPS education and operations, with formal conflict-of-interest controls, documented firewalls, and term limits to preserve independence.

CC-CPS follows recognized best-practice frameworks, including ISO/IEC 17024, the Standards for Educational and Psychological Testing (AERA/APA/NCME), and guidance from ICE and NCCA.

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ELIGIBILITY CRITERIA

All eligibility criteria must be met at the time of application

CURRENT LICENSURE

Candidates must hold a Doctor of Pharmacy (Pharm.D.) or Bachelor of Science in Pharmacy (B.S. Pharm.) degree from a program accredited by the Accreditation Council for Pharmacy Education (ACPE). Graduates of programs outside of the U.S. must hold a degree deemed equivalent and/or possess a Foreign Pharmacy Graduate Examination Committee® (FPGEC) Certificate.

PRACTICE EXPERIENCE

Current/active unrestricted licensure as a pharmacist is required. An "unrestricted" license is not currently subject to any limitations, probation, or disciplinary action.

- **U.S. Licensed Pharmacists**: Must possess an active, unrestricted license to practice pharmacy in at least one U.S. state or territory.
- **International Pharmacists**: Must hold an active and unrestricted license in their country of practice. A certified English translation must be provided if the original license is not in English.

Candidates will need to upload their license or a printout of the verification that includes their name, license number, licensing state or country, and the date the license expires.

SPECIALTY QUALIFICATION

To ensure candidates have foundational knowledge in the specialty, one of the following two pathways must be met:

1. **Standard Pathway**: Completion of one year (12 months) of experience comprised of at least 2000 hours of practice time as a licensed pharmacist in one of the above exam specialties must be documented. **This is not an either/or requirement – both time and hours must be met.**
2. **Certificate Pathway**: The specialty experience requirement is met for candidates who hold an active certificate of completion from a nationally recognized provider in a related subject matter. This includes, but is not limited to, the completion of a relevant PGY residency, fellowship, certificate/training program, or a relevant graduate degree. Recognized providers include:
    - American Society of Health-System Pharmacists (ASHP)
    - American Pharmacists Association (APhA)
    - American College of Clinical Pharmacy (ACCP)
    - American Society of Consultant Pharmacists (ASCP)

RESOURCES

CPS Exam Candidates

Use the Study Guides & Preview Tests page as the official and most current source for all exam materials.

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How to find your materials

1. Visit **pharmacystandards.org/study-guides**.
2. Search by certification name or acronym (e.g., CPOM).
3. Open the items under your credential:
   - **Outline** – Exam content outline & competencies
   - **Guide** – Candidate Guide with policies, sample items, and study tips
   - **Case Study** – Scenario-based practice
   - **Preview** – Short preview quiz
   - **Practice Exam** – Practice test with scoring

Before you register

- Read your Candidate Guide and Testing Guide (remote proctoring rules, ID requirements, system check, reschedule/cancel windows).
- Confirm your name on the account **matches your government ID.**
- Run the **system check** on the device and network you will use on test day.

Need help?

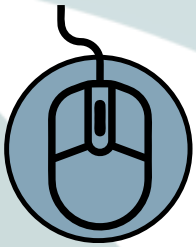
See FAQs or Contact Us from the Study Guides page.

FEES

All fees are non-refundable

Examination Fees

- The total exam fee is $395 (=$50 Application + $345 Examination).
- The $50 application fee is non-refundable.
- If you are found ineligible, CPS refunds the $345 examination portion automatically.
- After you schedule an appointment, reschedule/cancel windows and fees apply (see Administrative Policies, pp. 9–11).
- Payments are online only by Visa, Mastercard, or American Express (U.S. dollars).
- If paid by a third party (e.g., employer), any permitted refund is issued to that payer.
- Applications are not accepted by mail, phone, or fax.



$395

TOTAL EXAM FEE

Application + Examination
Includes a **non-refundable $50 application fee**.

Note: If an applicant is determined ineligible, CPS refunds the $345 examination portion. The $50 application fee is non-refundable.

Group Fee Payments

CPS will accept group payments for certification exams from institutions. Details are on the CPS website.

Other Non-refundable Payment Related Fees

Incomplete Application Fee >
All incomplete applications are subject to a non-refundable $30 reprocessing fee upon the submission of proper documentation. See page 9 for more information.

License Verification >
If licensure information is requested requiring an additional submission, the candidate will have two weeks to provide the license with all the correct information and pay the non-refundable $30 reprocessing fee. If this is not provided within the two weeks, the application will be marked ineligible. Ineligible applicants will receive a refund minus the $50.00 non-refundable application fee. There are no refunds or withdrawals for applications using a bulk code.

Credit Card Chargeback >
Assessed only if a credit-card dispute is resolved in CPS's favor. Future registrations may be blocked until balances are cleared.

FEES

All fees are non-refundable

Computer exam candidates can change their scheduled testing date to a **$50 non-refundable fee**.

Candidates may do this from within their CPS account.

Refer to CPS Testing Guide for details.

Other Exam Related Fees

Reschedule (date/time) — $50 >

Allowed ≥ **48 hours** before your appointment via your CPS account. Changes inside 48 hours are not permitted; the **no-show** policy applies.

Exam Change — $125 >

Administrative change to switch to a different exam (before an appointment is scheduled). May require re-review of eligibility.

Withdrawal — $165 >

Cancel your exam before scheduling or ≥ 7 days before your appointment to withdraw. CPS refunds the examination portion ($345) minus $165. Within 7 days, or after a no-show, the examination portion is forfeited. See Administrative Policies (pp. 9–11) for full timelines.

Retest — $395 >

Retest candidates must pay the full application ($50) and examination ($345) fees and must observe a 45-day wait before reapplying.
See Retest Policy (p. 9).

Refunds

Ineligible Computer Testing Applicants will receive a refund of the $345 examination portion (the **$50 application fee is non-refundable**) minus any outstanding charges.

No refunds

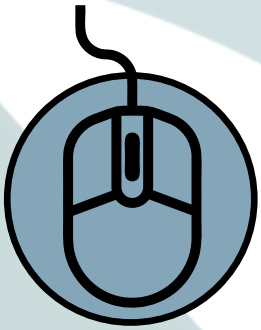
will be issued for the following circumstances:

- Candidates who are not successful in achieving certification.
- No-shows or candidates who fail to test.
- Candidates who are unable to schedule within the eligibility period and do not withdraw per policy.
- Once an exam session has started.

COUNCIL ON PHARMACY STANDARDS

CANDIDATE HANDBOOK

STEPS TO REGISTER



HOW TO REGISTER FOR A CPS EXAM (REMOTE, COMPUTER-BASED)

STEP 1

Confirm eligibility

Review the **Eligibility Criteria** for your credential (link to section).

STEP 2

Submit your application

Submit your application online at the CPS website **PharmacyStandards.org**. Applications can only be submitted online. You cannot submit an application by mail, telephone or fax. Payment must be made online by credit card. Individual or group payments can be made.

STEP 3

Prepare your documents

To get prepared to complete the application - *see the application checklist on the next page*. It is a handy listing of all the information you will need to supply.

STEP 4

Email confirmation of your registration

After completing and submitting the application, you will receive an email confirmation within 30 minutes. **This will be the ONLY confirmation notice you will receive for your application. If you do not receive it, please make sure the email in your profile is accurate and check your email folders.**

STEP 5

Application approval procedure

The application will be reviewed to determine qualification to take the examination. This process can take up to two weeks, depending on the volume of applications received at the time of submission. If the application is incomplete, *see page 10* to learn how to resubmit the application and what fees will need to be paid.

STEP 6

Notification of eligibility to take the exam

If approved, an Eligibility Letter will be emailed and posted in your CPS account with instructions to schedule your exam.

Before scheduling:

- Run the system check on the device/network you will use.
- If you need accommodations, submit your request before booking.
- Ensure your account name matches your government ID.

Eligibility period: You must schedule and test within your 365-day eligibility period (see your letter).

CPS is not responsible for lost or misdirected email. ***Please make sure the email in your profile is accurate and check your account 5-7 days after you have registered*** to ensure your application was complete and additional information is not needed. If you do not receive your examination eligibility letter within 2 weeks of your examination application submission confirmation, use the "Contact Us"link on **PharmacyStandards.org** and select "Application I already submitted" from the drop down menu, to inform CPS.

APPLICATION CHECK LIST

Before filing your application look over the below checklist and gather the information needed to complete it.

☐ **PERSONAL INFORMATION:**

You have complete contact details (name as it appears on your government ID, address, phone, email). Your CPS profile email is current and monitored.

☐ **ELIGIBILITY:**

You reviewed the eligibility requirements and meet one pathway (Standard or Certificate/Training)

☐ **LICENSURE:**

You have your pharmacist license or primary-source verification showing name, license number, jurisdiction, type, and expiration date ready to upload. If not in English, include a certified English translation. Non-US grads include FPGEC® Certification (as applicable). Your license name matches your government ID or you have legal name-change proof.

☐ **EMPLOYMENT:**

You know your current employer contact info (address, phone, email) and have 5-year work history (titles, dates, specialty area, supervisor/contact). Include gaps/unemployment where applicable.

☐ **SPECIALTY QUALIFICATION DOCUMENTS:**

You have documentation for your pathway:

- Standard: summary of qualifying duties and estimated 2,000 hours/12 months within the stated window (verifiable).
- Certificate/Training: certificate of completion (or PGY/residency/fellowship/degree) plus syllabus/competency summary.

☐ **APPLICATION AGREEMENT:**

You will check the agreement box to e-sign the statements below. Applications cannot be submitted without consent.

I have read and agree to abide by CPS policies in the Candidate Guide and Testing Guide, including fees, reschedule/withdrawal timelines, and conduct rules. I understand and consent to remote proctoring, including room scan, screen share, and audio/video recording for security and audit. I certify the information provided is true and complete; I understand that false or misleading statements may result in denial, invalidation, or revocation. I understand my application is subject to audit and authorize CPS to contact employers, licensing boards, and education providers to verify information. I acknowledge the $50 application fee is non-refundable and that other refunds are governed by the published policy.

ADMINISTRATIVE POLICIES

Incomplete Application Processing

An application is **incomplete** if any of the following apply:

- Missing or incorrect information.
- Licensure proof missing required data (name, license number, jurisdiction, type, expiration date) or is not in English without a certified translation.
- Payment not authorized or reversed (declined card, return, or chargeback).
- Any issue that prevents CPS from determining eligibility.

Process:

Incomplete applications are returned with instructions to upload the missing items and pay a **non-refundable $30 reprocessing fee**. All filing deadlines continue to apply. If the resubmission does not fully resolve deficiencies, the application is declared ineligible (the **$50 application fee is not refundable**).

Retest Policy

Candidates who wish to retake a CPS exam must submit a **new application**, meet the then-current eligibility criteria, and pay the **full application ($50) and examination ($345) fees**. CPS does not limit lifetime attempts, but the maximum number of attempts in a calendar year is **three (3)**. Each retest uses a different form of the exam.

Mandatory waiting period

- A **45-day wait is required from the date/time of the last attempt before submitting a retest application or scheduling a new appointment.**
- The wait applies to all delivery modes of testing and all exam forms.
- Applications submitted before the 45-day mark are **not accepted**. If submitted in error, the **application fee remains non-refundable**.

Interruption / invalid attempt rules

- If an exam session experiences **candidate-side** failure (device, internet, environment, refusal of proctoring/ID), the attempt is **invalid** and a retest after 45 days is required; fees follow the **No-Refunds** policy.
- If CPS or the test vendor causes the outage, CPS will provide a no-cost reschedule of the same attempt (no 45-day wait) or, if the attempt cannot be restored, a retest after 45 days without additional fees beyond the original exam fee.

Result notice

- The 45-day date is shown on the candidate's **results/attempt notice** and in the CPS account.

All timelines and fees are governed by the most current online policy at pharmacystandards.org; online versions supersede print.

All policies and procedures are subject to change without notice

CANDIDATE HANDBOOK

ADMINISTRATIVE POLICIES

Changes & Withdrawals

Reschedule (date/time) — $50 non-refundable

For the same exam, you may change your appointment ≥ 48 hours before the start time via your CPS account.

- Must remain within your 365-day eligibility period.
- Limit: 1 reschedule per registration (additional changes require a withdrawal + new registration).
- No changes allowed < 48 hours before the appointment or on exam day.
- See Fees for no-show rules.

Exam or Eligibility-Window Change — $125 non-refundable

Use this to switch to a different CPS exam or to adjust your eligibility period (no appointment scheduled yet).

- Re-establish eligibility for the new exam; CPS may request additional documentation.
- Any approved change uses the original 365-day period (no reset).
- Request must be submitted ≥ 30 days before the end of your eligibility period.
- Limit: 1 exam/window change per registration.
- No refunds of original fees or the change fee.

Rescheduling (same exam): $50 | Exam change: $125

All candidates requesting a change MUST:

- Submit the change request within one calendar year from the first date of their original assigned eligibility period.
- Cancel their exam date (if they have one scheduled), before submitting a change. Scheduled exams may also be canceled using the "Schedule" link in your account.
- Use the CPS website online Change Request Form.
- Submit a non-refundable fee of $125 with the Change Request Form.

Not permitted

- Changes on exam day or after the appointment start time.
- Switching exams after check-in begins.
- Only CPS pharmacy credentials may be selected.

To change examination category:

- Eligibility must be re-established for the new exam category, and additional documentation and fees may be required.
- The time to consider eligibility for the new category will count toward the original assigned computer testing window.
- ***Examinees must take the exam for which they have been determined eligible. No changes will be permitted on examination day***. If a candidate knowingly or unknowingly takes an examination other than they were found eligible to take, the examination will not be scored. No refunds will be allowed, and all fee policies will apply if the candidate reapplies for an examination.
- Candidates must submit their request at least 30 days prior to the end of their 365-day eligibility period.

ADMINISTRATIVE POLICIES

Withdrawal Policy - Computer Testing

- Only the applicant/candidate may request a withdrawal.
- When you may withdraw:
  - Before scheduling an appointment, or
  - ≥ 7 days before your scheduled appointment time (withdrawal cancels the appointment).
- Refund: CPS refunds the examination portion ($345) minus a $165 withdrawal fee → $180. The $50 application fee is not refundable. Any outstanding charges are deducted from the refund.
- Requests < 7 days before the appointment or after a no-show are not eligible for any refund.

Withdrawal Policy - Bulk Purchase Voucher

Withdrawals are not allowed after eligibility is determined. Refunds are governed by the bulk purchase agreement; CPS does not issue refunds for redeemed codes. (Institutions manage reassignment within their terms.)

Substitution Policy

Candidate substitutions are not allowed. The name on the registration must match the government ID presented on test day. Name changes require legal documentation before scheduling.

Score Cancellation

CPS may cancel scores and/or invalidate an attempt for irregularities (e.g., identity mismatch, prohibited items, coaching, tampering, exam content disclosure, policy violations) with or without proof of intent. Fees are not refunded. CPS may impose waiting periods or bar future testing per policy.

Auditing Applications

Applications are subject to audit. Candidates must provide requested documentation (e.g., licensure, employment verification, training certificates) within 14 days. Failure to respond or verify may result in denial or revocation. By submitting an application, you authorize CPS to contact employers, licensing boards, and education providers for verification.

All policies and procedures are subject to change without notice

GENERAL POLICIES

How Exams are Scored

CPS exams are **criterion-referenced**: your outcome is compared to a predefined performance standard, **not** to other candidates. The passing standard is set through periodic **standard-setting studies** (e.g., Angoff/Bookmark) conducted with subject-matter experts and approved by the CPS Board.

CPS uses **item response theory (IRT)** and **test equating** to place different forms of the exam on a common scale. Because some forms may be slightly harder or easier, equating ensures fairness—candidates meeting the standard on any form receive the **same pass/fail decision**.

Score reports provide:

- Your **overall result** (Pass/Fail).
- **Content-area diagnostics** to guide study. These diagnostics are **not percent correct** and are **not comparable** across candidates or attempts. Labels indicate performance **relative to the standard** (e.g., **Below Target / Near Target / At Target / Above Target**).

The passing standard may be reviewed periodically to reflect current practice and blueprint updates.

Retention of Computer Answer Strings

CPS retains computer answer strings and operational testing data for a minimum of 3 years and may retain longer for quality assurance and legal/regulatory purposes. Identity verification media (e.g., audio/video from remote proctoring) are retained per the CPS Privacy & Data Retention Policy.

Test Disclosure

CPS does not release live test questions, answer keys, or full forms. Using, sharing, soliciting, or possessing exam content—before or after testing—is a security violation and may result in score invalidation, revocation, and suspension of testing privileges.

All policies and procedures are subject to change without notice

GENERAL POLICIES

ADA and Nondiscrimination Policies

CPS does not discriminate on the basis of **age, sex, pregnancy, race, color, religion, national origin, ethnicity, disability, marital status, sexual orientation, gender identity or expression, military/veteran status, or genetic information**.
Testing accommodations. CPS provides **reasonable accommodations** consistent with the Americans with Disabilities Act (ADA) for qualified candidates. Requests must be **submitted with the application and before scheduling** an appointment, using the CPS Accommodation Request Form (see **pharmacystandards.org/accommodations**). Documentation must be **current** and signed by a qualified clinician describing the functional limitations and recommended accommodations. CPS will acknowledge requests within **5 business days** and issue a determination within **15 business days** of receiving complete documentation. Information is **confidential** and used only for accommodation determinations. Denials may be **appealed** per the Appeals Procedure below.

Appeals Procedure

Candidates may appeal eligibility determinations, accommodation decisions, exam administration irregularities, or policy applications. Appeals must be **submitted in writing within 60 days** of the decision or event and should include relevant facts and supporting documents. CPS will acknowledge receipt within **5 business days** and render a written decision within **30 days** (or notify if additional time is required). Appeals are reviewed by the **CPS Policy Review Committee**, independent of the original decision maker, and may be escalated to the **Board of Directors**.
CPS does **not** release exam content or answer keys; score verification involves **administrative/technical re-scoring only**.

Revocation

Certification may be denied, suspended, or revoked for: falsification or misrepresentation; **exam security violations** (cheating, proxy testing, item disclosure); misuse of CPS names, logos, or marks; failure to meet or maintain eligibility/recertification requirements; **loss or restriction of the license to practice pharmacy**; nonpayment of required fees; or other material policy violations.
Prior to action, CPS will provide **written notice** of the allegations and an opportunity to **respond**. A written decision (which may include sanctions and eligibility to reapply after a specified period) will be issued and may be **appealed** under this policy.

Designation Authorization

Certification is a non-transferable, revocable, limited, non-exclusive license to use the certification designation, subject to compliance with the policies and procedures, as may be revised from time to time.

Any use or display of CPS certification marks and/or logos without the prior written permission of the CPS is prohibited. Any candidate or certificant who manufacturers, modifies, reproduces, distributes or uses a fraudulent or otherwise unauthorized CPS certificate, CPS designation or other credential may be subject to disciplinary action, including denial or revocation of eligibility or certification. Any individual who engages in such behavior also may be subject to legal action.

All policies and procedures are subject to change without notice

GENERAL POLICIES

Renew Your Certification

CPS requires **recertification every three (3) years** to verify ongoing competence in each credential's core knowledge areas.

Recertification Steps

Earn the required credit using either:

1. Continuing Education (CE) that fits your topics, or
2. Approved professional activities (e.g., teaching, publications, precepting, quality-improvement/projects, committee work).
3. Finish within 3 years, upload documentation, and keep records for audit.

Lapse & Reinstatement

If requirements are **not met by the deadline**, the credential **expires**. Expired credentials may be regained only through **re-examination**, subject to the then-current eligibility criteria. CE completed **after** expiration cannot be applied retroactively.

Audits & Recordkeeping

CPS randomly audits recertification applications. If selected, you must provide CE certificates and short activity descriptions within the requested timeframe. Maintain CE documentation **throughout the cycle and until approval**.

For further details, visit the CPS website **PharmacyStandards.org** and download the recertification catalog for a full description of the recertification process. Click on **Renew your Certification** on the home page.

Verification of Your Credential

CPS provides **third-party verification** of active credentials on request.

- **When available:** After official results post to your CPS account and your digital certificate is issued.
- **What is verified:** Credential name and ID (if applicable), **status** (active/expired), **original certification date**, and **current expiration date**.
- **How to request:** From the CPS website (see **pharmacystandards.org/verification**), select **Request a Verification**, enter the recipient's email, and submit payment.
- **Fee & delivery: $30 per request.** Verifications are sent by email to the designated party.
- **Notes:** CPS cannot verify until certification is achieved. Ensure your name and profile information are accurate before submitting a request.

All policies and procedures are subject to change without notice

EXAM CONTENT OUTLINE

How to Study

CPS does not provide review courses or study materials for the examination. CPS views the examinations as an evaluative process. Eligibility criteria have been established to identify minimum levels of preparation for the examinations. CPS believes your practice experience is your best preparation. Candidates can review detailed test outlines and suggested resources in the Candidate Guides.

Domain 1: Formulary and Utilization Management (25%)

Task 1: Manage the Pharmacy & Therapeutics (P&T) committee process.

Prepare and present clinical and economic monographs for drug formulary review.

Critically evaluate drug pipelines and their potential impact on the formulary.

Develop agenda items and supporting materials for P&T committee meetings.

Implement P&T committee decisions regarding formulary placement and utilization management criteria.

Ensure the P&T committee process is compliant with accreditation and regulatory standards (e.g., CMS).

Task 2: Design and maintain the drug formulary.

Design a formulary based on clinical efficacy, safety, and net cost, incorporating value-based (VBID) principles.

Develop and manage a preferred drug list, including strategies for biosimilar adoption.

Implement formulary tiers and associated member cost-sharing structures.

Manage the process for adding new drugs and removing obsolete drugs from the formulary.

Assess the role of pharmacogenomics and precision medicine in formulary and benefit design.

Task 3: Develop and manage prior authorization (PA) criteria.

Develop evidence-based clinical criteria for medications requiring prior authorization.

Translate clinical guidelines and FDA-approved labeling into clear, objective PA criteria.

Ensure PA criteria are designed to promote safe, effective, and cost-conscious prescribing.

Manage the process for reviewing and approving or denying PA requests.

Periodically review and update all PA criteria to reflect new evidence and products.

Task 4: Develop and manage step-therapy protocols.

Design clinically sound step-therapy protocols that require the use of first-line agents before second-line agents.

Identify appropriate first-line therapies based on evidence of efficacy, safety, and cost.

Develop a clear process for members and providers to request an exception to a step-therapy protocol.

Ensure that step-therapy protocols do not create undue barriers to medically necessary care.

Stay current with state and federal legislation that may regulate the use of step therapy.

Task 5: Develop and manage quantity limit (QL) policies.

Establish QL programs based on FDA-approved labeling, safety data, and typical dosing regimens.

Design QLs to prevent overuse, hoarding, and reduce the risk of adverse events.

Develop a process for reviewing requests for quantity limit overrides based on medical necessity.

Differentiate between QLs based on dose limits versus duration limits.

Periodically review and update QLs to align with current clinical practice.

Task 6: Manage the formulary exception and appeals process.

Develop a clear and compliant process for members to request an exception for a non-formulary drug.

Review formulary exception requests for medical necessity against established criteria.

EXAM CONTENT OUTLINE

Understand the multi-level appeals process for denied exception requests, including internal and external review.

Ensure that all decisions and appeals are processed within the timeframes mandated by CMS and other regulators.

Analyze appeals data to identify issues with formulary design or PA criteria.

Domain 2: PBM Operations and Network Management (20%)

Task 1: Oversee pharmacy claims adjudication.

Understand the flow of a pharmacy claim from submission to final payment.

Interpret NCPDP standards and transaction formats used in claims processing.

Troubleshoot and resolve common claim rejection codes.

Ensure that utilization management edits (PA, ST, QL) are applied correctly at the point of sale.

Manage the process for claims reversal and resubmission.

Task 2: Manage the pharmacy network.

Design a pharmacy network that provides adequate member access while managing costs.

Differentiate between broad, narrow, and preferred pharmacy networks.

Oversee the pharmacy credentialing and re-credentialing process.

Analyze the terms of a pharmacy provider contract, including reimbursement rates and performance requirements.

Understand different reimbursement models for network pharmacies (e.g., MAC, AWP-based).

Task 3: Oversee mail order and specialty pharmacy operations.

Evaluate the clinical and financial case for using a mandatory or voluntary mail order pharmacy.

Manage the relationship and performance of a contracted mail order or specialty pharmacy vendor.

Ensure that specialty pharmacies are providing required high-touch clinical services.

Manage the distribution of limited distribution drugs (LDDs) through the specialty pharmacy network.

Oversee credentialing and compliance for the specialty pharmacy network, including policies on white/brown bagging.

Task 4: Manage pharmacy network audits and performance.

Design and manage a pharmacy audit program to ensure compliance with contract terms and prevent FWA.

Analyze audit findings and manage the process for financial recoveries.

Evaluate the structure and impact of Direct and Indirect Remuneration (DIR) fees.

Design and manage provider performance-based reimbursement models aligned with quality metrics (e.g., Star Ratings, outcomes-based pay).

Oversee compliance of 340B contract pharmacy arrangements within the network.

Task 5: Oversee member and provider services.

Ensure that customer service representatives are properly trained on the pharmacy benefit.

Develop and maintain scripts and job aids for pharmacy-related inquiries.

Oversee the pharmacy help desk that supports providers and pharmacy staff.

Analyze call center data to identify common member and provider issues.

Develop and maintain the pharmacy benefit section of the member and provider portals.

Task 6: Manage Pharmacy Benefit Manager (PBM) vendor performance.

Participate in the PBM request for proposal (RFP) and vendor selection process.

Understand the key terms and service level agreements (SLAs) within a PBM contract.

Conduct regular oversight meetings to monitor PBM performance against contractual guarantees.

EXAM CONTENT OUTLINE

Validate PBM reporting on clinical, financial, and operational performance.

Manage the implementation process when transitioning to a new PBM.

Domain 3: Financial Management and Rebate Contracting (25%)

Task 1: Analyze and manage pharmacy drug trend.

Define and calculate the components of drug trend: utilization, unit cost, and mix.

Analyze claims data to identify the key drug classes and products driving overall trend.

Develop forecasts for future drug spend based on historical trends and pipeline analysis.

Differentiate between gross drug spend and net drug spend after rebates.

Prepare and present regular drug trend reports to leadership and clients.

Task 2: Evaluate the drug pipeline and forecast budget impact.

Monitor the pipeline of new drugs and biologics awaiting FDA approval.

Assess the potential clinical and financial impact of new high-cost or high-volume drugs.

Develop budget impact models (BIMs) to forecast the cost of new drugs to the plan.

Identify upcoming patent expirations and forecast the savings from new generics and biosimilars.

Develop proactive management strategies for significant pipeline drugs before they launch.

Task 3: Manage pharmaceutical rebate contracting.

Understand the principles of formulary rebate contracting with pharmaceutical manufacturers.

Differentiate between different types of rebates (e.g., flat, market share-based).

Analyze a rebate contract to ensure its terms are favorable and auditable.

Validate that all earned rebates have been collected from manufacturers.

Analyze the impact of rebates on the net cost of drugs in a therapeutic class.

Task 4: Understand and apply drug pricing benchmarks and models.

Define and differentiate between key pricing benchmarks (AWP, WAC, ASP, NADAC).

Understand how different benchmarks are used in pharmacy reimbursement and rebate calculations.

Analyze the spread between different pricing benchmarks and its financial implications.

Understand how Maximum Allowable Cost (MAC) pricing is used to reimburse for generic drugs.

Differentiate between transparent, pass-through, and spread pricing models.

Task 5: Analyze and manage specialty drug spend.

Define what constitutes a specialty drug based on cost, complexity, and other factors.

Analyze data to identify the key drivers of specialty drug trend.

Develop and implement strategies to manage specialty drug utilization and cost.

Evaluate the impact of site-of-care programs for provider-administered specialty drugs.

Differentiate management strategies for medical benefit versus pharmacy benefit specialty drugs.

Task 6: Design and evaluate value-based contracts.

Differentiate between traditional rebate contracts and value-based or outcomes-based contracts.

Identify appropriate disease states and drugs for value-based contracting.

Design contract terms based on measurable clinical or economic outcomes (outcomes-based drug rebates).

EXAM CONTENT OUTLINE

Evaluate the data infrastructure required to track and measure outcomes.

Assess the operational feasibility and financial risk of implementing a value-based contract.

Domain 4: Quality, Clinical Programs, and Member Relations (15%)

Task 1: Manage Medication Therapy Management (MTM) programs.

Understand the CMS requirements for the Medicare Part D MTM program.

Develop and manage the eligibility criteria for MTM services.

Oversee the delivery of Comprehensive Medication Reviews (CMRs) and Targeted Medication Reviews (TMRs).

Measure and report on the outcomes of the MTM program.

Ensure that MTM services are delivered in a cost-effective and compliant manner.

Task 2: Manage programs to improve quality scores.

Develop and implement programs to improve performance on medication-related quality measures (e.g., HEDIS, Star Ratings).

Design targeted interventions to improve medication adherence for chronic conditions.

Implement programs to reduce the use of high-risk medications in the elderly.

Collaborate with providers to close gaps in care related to medication use.

Analyze data to identify the members and providers who are driving poor performance.

Task 3: Manage member grievance and appeals processes.

Ensure the organization has a compliant process for handling member grievances and appeals.

Differentiate between a grievance, a coverage determination, and an appeal.

Oversee the clinical review of appeals for denied services.

Ensure all decisions are made within the required regulatory timeframes.

Analyze appeals data to identify opportunities to improve benefit design or communication.

Task 4: Integrate health equity and social determinants of health (SDOH) into benefit design.

Analyze pharmacy data to identify health disparities among different member populations.

Design benefit structures that reduce barriers to access for underserved communities.

Integrate programs that address SDOH, such as medication delivery or nutritional support, with the pharmacy benefit.

Ensure member communications are culturally competent and available in multiple languages.

Evaluate the impact of clinical programs on reducing health disparities.

Task 5: Evaluate and integrate digital health solutions.

Assess the clinical and financial value of digital therapeutics and mobile health applications.

Integrate digital health solutions and remote monitoring into clinical programs to support medication adherence and disease management.

Evaluate the role of telepharmacy in improving member access to clinical services.

Ensure that any integrated digital health tools are compliant with privacy and security standards.

Develop strategies for the reimbursement and formulary placement of digital therapeutics.

Task 6: Ensure compliance with behavioral health parity requirements.

Apply the Mental Health Parity and Addiction Equity Act (MHPAEA) to the pharmacy benefit.

Analyze utilization management criteria and benefit design to ensure parity between medical/surgical and mental health/substance use disorder benefits.

EXAM CONTENT OUTLINE

Conduct and document comparative analyses of non-quantitative treatment limitations (NQTLs).

Ensure that there are no separate, discriminatory treatment limitations applied to mental health conditions.

Remediate any identified parity violations in the benefit design or operations.

Domain 5: Regulatory, Compliance, and Audit Oversight (15%)

Task 1: Manage compliance with CMS Medicare and Medicaid regulations.

Oversee the annual formulary submission and review process for Medicare Part D.

Manage compliance with regulations for transition fills, protected classes, and other coverage requirements.

Differentiate and manage the specific compliance requirements for Medicaid managed care pharmacy benefits.

Ensure all member and provider communications meet CMS marketing guidelines.

Prepare for and manage CMS and state Medicaid program audits of the pharmacy benefit.

Task 2: Manage compliance with state PBM laws, FTC rules, and ERISA.

Apply state-specific laws governing PBM practices, such as MAC pricing transparency and fiduciary duties.

Monitor and ensure compliance with Federal Trade Commission (FTC) investigations and transparency rules.

Differentiate the regulatory requirements for fully insured versus self-funded (ERISA) employer plans.

Apply ERISA principles and fiduciary responsibilities to the management of employer-sponsored plans.

Monitor the evolving landscape of state and federal PBM legislation.

Task 3: Oversee fraud, waste, and abuse (FWA) monitoring.

Design and manage a comprehensive FWA program for the pharmacy benefit.

Apply the federal Anti-Kickback Statute and False Claims Act to PBM and pharmacy operations.

Use data analytics to identify and investigate suspicious patterns of prescribing, dispensing, or billing.

Manage the process for reporting potential FWA to the OIG and other government agencies.

Ensure all employees and downstream entities complete required FWA training.

Task 4: Manage HIPAA and data privacy in a PBM context.

Apply the HIPAA Privacy and Security Rules to the large-scale use of pharmacy claims data.

Oversee the execution and management of Business Associate Agreements with clients and vendors.

Manage the de-identification and use of data for analytics and research.

Develop and manage an incident response plan for data breaches.

Ensure compliance with state-specific data privacy laws.

Task 5: Prepare for and manage client and regulatory audits.

Develop a state of continuous readiness for audits from clients, regulators (CMS, state DOI), and accreditation bodies.

Manage the collection and submission of all requested audit documentation.

Serve as the subject matter expert and primary point of contact during an audit.

Develop and implement corrective action plans (CAPs) to address any audit findings.

Track and report on the resolution of all audit findings to leadership.

ABOUT CPS

The Council on Pharmacy Standards (CPS) develops and administers professional certification programs for pharmacists. CPS awards credentials to qualified candidates who meet eligibility requirements and successfully pass the appropriate examination. Our programs validate advanced competence in contemporary practice areas, helping candidates demonstrate specialized expertise and employers verify it.

CPS certifications span pharmacy law and compliance, sterile and non-sterile compounding, immunization and public health, point-of-care testing, medication safety and quality, controlled substances stewardship, pharmacogenomics, telepharmacy, veterinary compounding, specialty pharmacy, and pharmacy informatics.

CPS PHILOSOPHY OF CERTIFICATION

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CPS encourages candidates to verify how certification relates to state licensure requirements, institutional policies, the standards of relevant professional organizations, and local employer expectations. For specific guidance, candidates should consult state boards of pharmacy, colleges and schools of pharmacy, professional associations, and prospective or current employers.