CPGS/GPHSH CERTIFICATION BOOTCAMP

MAMSS is excited to host
TMG University's Certification Boot Camp

April 21st & 22nd starting at 8:00 am CPCS 11 hours of training CPMSM 15 hours of training

*Includes a 1-hr break to allow time for lunch on your own.

A variety of nearby dining options are available

Crowne Plaza, Plymouth MN

A minimum of 15 registrations is required to hold this class - no registration changes are allowed after 1/14/26

Rooms will be available at a discount at the Crowne Plaza - details will be shared closer to the event date

CPCS/CPHSM CERTIFICATION BOOTCAMP

Attendees will receive instruction interleaved with interactive activities that cover every facet of credentialing and recredentialing, from primary source verification and healthcare governance frameworks to regulatory and accreditation requirements. You'll also explore performance improvement, ongoing monitoring, and departmental operations.

CPMSM® candidates receive an additional four hours focused on hospital, managed care, practice management, and CVO environments, plus provider enrollment, healthcare law, leadership, and management practices

When you attend Certification Boot Camp, you'll also receive TMG
University's Accreditation Wizard and Certification Compass – your truste
guides for continued study and exam preparation.



Questions?

danielle.larson@aspirus.org or info@mnamss.org

CPCS/CPMSM CERTIFICATION BOOTCAMP REGISTRATION

To Register Online:

https://www.mnamss.org/education/other-mamssevents/conference-registration/

OR

- 1. Go to the MAMSS website: www.mnamss.org
- 2. Click on the Education Tab → 2026 MAMSS Certification Boot Camp
- 3. Complete the online registration form
- 4. Click on the continue to payment button to launch to the paypal site. Complete the transaction using your paypal account or credit card. Please note a 4% fee is included to offset online processing expenses.
- 5. You will receive a confirmation after your payment has processed.





CPCS/CPMSM IFICATION BOOTCAN REGISTRATION

To register by mail, please complete and mail as below:

Name		
Crede	ntials: Title:	
Facilit	y:	
Addre	SS <u>:</u>	
City: _	State/Zip:	
Phone	: Email:	
	Please check one:	
	CPCS \$360.00	
	CPMSM \$400.00	

Please mail registration form and check payable to MAMSS (411891785) to:

Terri Winter, MAMSS Treasurer



611 N 9th St

St. Peter, MN 56082

theresa.winter@hcmed.org

