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Chapter 002 Electronic Health Records, HIPAA, and HITECH: Sharing and Protectin

Multiple Choice Questions

- 1. Which is necessary and permitted through the HIPAA Privacy Rule for patients' treatment, payment, and health care operations (TPO)?
- A. use of PHI
- B. disclosure of PHI
- C. both use of PHI and disclosure of PHI
- D. neither use of PHI nor disclosure of PHI
- 2. What establishes standards for the exchange of financial and administrative data among covered entities?
- A. Office of Inspector General
- B. Transactions and Code Sets
- C. Department Of Justice
- D. Office Civil Rights
- 3. If a practice is being investigated for fraud, what may be the first document to research?
- A. compliance plan
- B. Privacy Notice
- C. ICD book
- D. HCPCS reference manual
- 4. Which code set is used for billing dental procedures?
- A. ICD
- B. IRS
- C. CDT-4
- D. HCPCS

- 5. Which complies with the HIPAA Security Rule?
- A. selecting a mixture of characters for the password
- B. sharing your password with the office manager or doctor
- C. writing down your password and hiding it
- D. keeping user ID and password the same
- 6. Which is a future benefit of the Affordable Care Act?
- A. legal residents cannot obtain insurance in order to keep premiums low
- B. the cost of pharmaceutical drugs will be lowered
- C. preventative services will be completely covered
- D. the benefits will not change
- 7. Which federal agency detects health care fraud and abuse?
- A. Office for Civil Rights (OCR)
- B. Department of Justice (DOJ)
- C. Office of E-Health Standards and Services (OESS)
- D. Office of the Inspector General (OIG)
- 8. Which federal agency enforces criminal violations under federal law?
- A. Office for Civil Rights (OCR)
- B. Department of Justice (DOJ)
- C. Office of E-Health Standards and Services (OESS)
- D. Office of the Inspector General (OIG)
- 9. Which scenario best describes abuse?
- A. the doctor tells you to bill for an undocumented procedure
- B. the doctor tells you to bill for an unnecessary procedure that was done
- C. the medical assistant cashes an insurance check in their personal account
- D. sending an invoice to multiple insurance companies

- 10. Which scenario best describes fraud?
- A. the doctor tells you to bill for an undocumented procedure
- B. the doctor tells you to bill for an unnecessary procedure that was done
- C. the medical assistant bills for a preauthorized procedure
- D. sending an invoice to multiple insurance companies to see who pays
- 11. Which of the following will be introduced in the future?
- A. patient identifier
- B. health plan identifier
- C. both patient and health plan identifiers
- D. neither patient nor health plan identifiers
- 12. Which measure does **not** enforce the HIPAA Security Rule?
- A. secure internet connections
- B. backup file procedures
- C. transmitting unencrypted data
- D. enforced security policies
- 13. Which is also known as the Stimulus Package?
- A. HITECH
- B. HIPAA
- C. CMS
- D. ARRA
- 14. What is the best description of an encounter?
- A. telephone call
- B. face-to-face meeting
- C. something that should be billed
- D. something that should be investigated

| 15. Which is <u>not</u> a goal of compliance plans? A. prevent fraud and abuse B. enhance patient education guidelines C. ensure compliance with laws D. defend the practice if it is investigated or prosecuted |
|--|
| 16. A social security number is an example of a (n): A. EIN B. code set C. identifier D. NPI |
| 17. Which act requires covered entities to notify affected individuals following the discovery of a breach of unsecured health information? A. HITECH B. HIPAA C. Privacy rule D. breach notification |
| 18. Which law guides the use of federal stimulus money to promote the adoption and meaningful use of health information technology, mainly using electronic health records? A. OIG B. HIPAA C. ARRA D. HITECH |

- 19. What are people or organizations that furnish, bill, or are paid for health care in the normal course of business called?
- A. clearinghouses
- B. insurers
- C. providers
- D. business associates

- 20. What type of program encrypts data traveling between the office and the internet, such as patients' Social Security numbers, so that the information is secure?
- A. medical management
- B. practice management
- C. backup software
- D. data software
- 21. Who has the authority to authorize the release of information on a patient to anyone not directly involved in their care?
- A. doctor
- B. "next of kin"
- C. office manager
- D. legal representative
- 22. What are the Centers for Medicare and Medicaid Services (CMS) responsible for?
- A. implementing annual federal budget acts and laws
- B. lowers the costs of screening procedures for diseases
- C. coding and billing
- D. enforcing new rules and regulations
- 23. A compliance plan does **not** cover which of the following?
- A. EEO (Equal Employment Opportunity)
- B. OSHA (Occupational Safety and Hazard Administration)
- C. coding and billing
- D. referrals and authorizations
- 24. What did the NPI (National Provider Identifier) replace?
- A. NPPES
- B. EIN
- C. Medicare UPIN
- D. CMS

- 25. If a violation is found during a medical practice investigation and a compliance plan is typically followed, what may it indicate to the Office of Inspector General (OIG)?
- A. direct negligence
- B. lack of communication
- C. practice of abuse
- D. may be simple errors
- 26. Which main federal government agency is responsible for health care?
- A. Health Care Financing Administration (HCFA)
- B. Centers for Medicare and Medicaid Services (CMS)
- C. Department of Health and Human Services (HHS)
- D. Health Department
- 27. What is the impermissible use or disclosure of PHI that could pose significant risk to the affected person called?
- A. hack
- B. pirate
- C. breach
- D. decrypt
- 28. What is a medical practice's written plan for complying with regulations?
- A. compliance plan
- B. HIPAA notice
- C. privacy notice
- D. regulation plan
- 29. What is the activity of copying files to another media or off site location so that they will be preserved in case the originals are no longer available?
- A. encrypting
- B. encoding
- C. saving
- D. backup

- 30. Which is **not** a valid component of a compliance plan?
- A. audit and monitor compliance with government regulations
- B. to have inconsistent policies and procedures
- C. provide staff with training and communication
- D. having a guideline by which to correct errors
- 31. Which is the process of encoding information in such a way that only the person (or computer) with the key can decode it?
- A. decoding
- B. encoding
- C. encrypting
- D. decrypting
- 32. Which is (are) elements included in a compliance plan according to the Office of the Inspector General?
- A. training
- B. ongoing communication
- C. both training and ongoing communication
- D. dependents will be covered under their parent's private plan until age 26
- 33. Which is a valid aspect of the Affordable Care Act?
- A. preventive services will be covered by insurance with no copayment required
- B. illegal aliens will not be denied health insurance
- C. pre-existing conditions will not be covered
- D. young adults up to age 22 will remain as a dependent on their parent's private insurance
- 34. Which standards have been set to govern the electronic exchange of health information?
- A. identifiers
- B. code sets
- C. standard transactions
- D. All of these

- Protectin 35. A compliance plan constitutes which of the following A. a written document B. a committee C. both a written document and a committee
- 36. What is any group of codes used for encoding data elements?
- A. ICD
- B. CPT
- C. code set
- D. transaction codes
- 37. Which is a valid Breach Notification Procedure?

D. neither a written document nor a committee

- A. Notify patients of breaches "without reasonable delay" within 90 days
- B. Notice to business associates from covered entities
- C. Notice to ex-spouses on breaches involving patients who are deceased.
- D. None of these
- 38. Which code set is for specifying diseases, injuries, impairments, and other health related problems?
- A. ICD
- B. CPT
- C. HCPS
- D. CDT-4
- 39. Which are covered entities under HIPAA/HITECH that must follow the regulations?
- A. Patients
- B. Health Providers
- C. Business Associates
- D. Collection Agencies

- 40. A retention schedule
- A. explains what records to keep
- B. explains how long records must be saved
- C. covers the method(s) of record storage
- D. all of these
- 41. The standards for written documentation include
- A. clarity
- B. legibility
- C. signed and dated entries
- D. all the above
- 42. Which one of these would be the most secure password?
- A. 123456
- B. july14
- C. f1H*%4hs
- D. forwork
- 43. What standards are set under the rules of the HIPAA Electronic Health Care Transactions and Code Sets?
- A. electronic formats
- B. identifiers
- C. codes
- D. All of these
- 44. In electronic health records, documents may be created in a variety of ways, but they are
- A. ultimately viewed on a computer screen
- B. always printed out in the medical office
- C. always annotated by handwriting
- D. None of these

- 45. The provider owns the actual medical records, but the information in a record belongs to
- A. any medical professional
- B. the patient
- C. the payer
- D. None of these
- 46. Which of the following is fraudulent behavior?
- A. making a mistake on a claim
- B. deception with the intent to benefit
- C. Both making a mistake on a claim and deception with the intent to benefit
- D. Neither making a mistake on a claim nor deception with the intent to benefit
- 47. The HIPAA Privacy Rule is enforced by the OCR. What does OCR stand for?
- A. Office for Claim Returns
- B. Office for Certified Rules
- C. Office for Civil Rights
- D. Office for Civil Responsibility
- 48. Under what conditions should a medical assistant change the facts on an insurance claim?
- A. if the patient requests the change
- B. if the patient fails to make a payment
- C. if the change will save the practice money
- D. The facts must never be changed
- 49. When can information about a patient's drug abuse be disclosed without authorization?
- A. if a prospective employer requests it
- B. if a physician from another practice requests it
- C. if the patient's spouse requests it
- D. None of these

- 50. A standard and unique identifier for health care providers to use in filing health care claims is called
- A. Employer Identification Number (EIN)
- B. National Provider Identifier (NPI)
- C. research data
- D. code sets
- 51. The HIPAA Privacy Rule is enforced by
- A. the OIG
- B. the OCR
- C. CMS
- D. HHS
- 52. Collecting payment in full for a procedure from both the patient and the insurance carrier is an example of
- A. liability
- B. fraud
- C. libel
- D. audits
- 53. Altering a patient's chart to increase the payment the physician receives is an example of
- A. medical liability
- B. subpoena
- C. accountability
- D. fraud
- 54. SOAP is a format for patients' medical
- A. documentation
- B. records
- C. both documentation and records
- D. neither documentation nor records

- 55. What do patients' medical records contain about their health history?
- A. facts
- B. observations
- C. findings
- D. All of these
- 56. Entries in patients' medical records should be descending or ascending in what type of order?
- A. chronological
- B. alphabetical
- C. numerical
- D. the order is not important
- 57. The abbreviation TPO refers to
- A. treatment, payment, and health care operations
- B. terms, policies, and financial obligations
- C. treatment, providers, and organizations
- D. terms, providers, and organizations
- 58. What type of schedule do medical offices use to control how long patient information is stored?
- A. financial schedule
- B. retention schedule
- C. referral schedule
- D. None of these
- 59. The abbreviation PHI stands for
- A. physician health information
- B. provider health information
- C. protected health information
- D. primary health information

- 60. For up to how long can a medical office's financial records be audited after a patient's last visit (assuming that embezzlement or government funding has not occurred)?
- A. 3 years
- B. 7 years
- C. 5 years
- D. 10 years
- 61. A form signed by a patient to permit release of medical information under specific stated conditions is called a(n)
- A. acceptance form
- B. authorization to disclose information
- C. medical release form
- D. None of these
- 62. A clearinghouse is a company that helps medical offices and health plans exchange
- A. claim data in correct formats
- B. employment records
- C. accounts payable
- D. record retention schedules
- 63. Under HIPAA, patients' protected health information may be shared without authorization for:
- A. payment
- B. health care operations
- C. treatment
- D. All of these

| 64 Releasing protected health information for reasons other than treatment, payment or health care operations requires which type of patient authorization? A. written B. verbal C. either written or verbal D. None of these; it cannot be released |
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| 65. What is the relationship between documentation and billing?A. If a service is not documented, it did not happen.B. If a service is not documented, it cannot be billed.C. If a service is not billed, the documentation can be destroyed.D. If a service has been billed, the documentation can be shredded. |
| 66. Which of these subjects would you not expect to find information about in a patient's medical record? A. medical allergies and reactions B. a record of missed or canceled appointments C. employment and salary records D. biographical and personal information |
| 67. A medical office's compliance plan should include A. staff training B. internal communications C. a record of all subpoenas received recently D. both staff training and internal communications |
| 68. Under what circumstances might a patient's protected health information be shared without authorization? A. court orders B. workers' compensation cases |

C. both court orders and workers' compensation cases

D. it can never be shared

- 69. What is one way that providers can follow the guidelines for the HITECH rule?
- A. frequently change passwords
- B. access controls
- C. make copies of all data
- D. all of these
- 70. Following OIG's guidance can help in the defense against which of the following?
- A. a false claims accusation
- B. a workers' compensation claim
- C. unemployment claim
- D. breach of ethical conduct
- 71. If a physician requests that you bill a procedure that is not documented, what would be the best course of action?
- A. bill whatever the doctor requests
- B. say that you will comply and avoid the request altogether
- C. report it to CMS
- D. report it to the compliance officer
- 72. If a practice has discovered that the security or privacy of more than 500 people's PHI has been breached, which establishment must be notified (through the HITECH Act)?
- A. prominent media outlets
- B. Office of the Inspector General
- C. all credit bureaus
- D. it can never be shared

Multiple Choice Questions

- 1. Which is necessary and permitted through the HIPAA Privacy Rule for patients' treatment, payment, and health care operations (TPO)?
- A. use of PHI
- B. disclosure of PHI
- C. both use of PHI and disclosure of PHI
- D. neither use of PHI nor disclosure of PHI

Both use and disclosure of PHI are necessary and permitted for patients' treatment, payment, and health care operations (TPO).

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Remember

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

CAHIIM: III. B. 3. Release patient-specific data to authorized users.

- 2. What establishes standards for the exchange of financial and administrative data among covered entities?
- A. Office of Inspector General
- **B.** Transactions and Code Sets
- C. Department Of Justice
- D. Office Civil Rights

HIPAA Electronic Transactions and Code Sets (TCS) establishes standards for the exchange of financial and administrative data among covered entities.

ABHES: 8.B Prepare and maintain medical records ABHES: 8.I. Establish and maintain a petty cash fund

Blooms: Remember

CAAHEP: VII.P.3. Complete insurance claim forms

CAAHEP: VIII.C.1. Describe how to use the most current procedural coding system

CAHIIM: I. D. 2. Apply policies and procedures to comply with the changing regulations among various payment systems for healthcare services such as Medicare, Medicard, managed care, and so forth (NEW)

services such as Medicare, Medicaid, managed care, and so forth. (NEW)

CAHIIM: I. D. 3. Support accurate billing through coding, chargemaster, claims management, and bill reconciliation processes.

CAHIIM: I. D. 4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding Initiative.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-05

Topic: HIPAA Transactions and Code Sets

- 3. If a practice is being investigated for fraud, what may be the first document to research?
- A. compliance plan
- B. Privacy Notice
- C. ICD book
- D. HCPCS reference manual

A compliance plan helps to defend a practice if it is being investigated for fraud.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAHIIM: I. B. 2. Apply policies and procedures to ensure organizational compliance with regulations and standards.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-07 Topic: Compliance Plans

4. Which code set is used for billing dental procedures?

A. ICD

B. IRS

C. CDT-4

D. HCPCS

Current Dental Terminuteology-4 (CDT-4) is the code set for billing procedures.

ABHES: 8.B Prepare and maintain medical records ABHES: 8.I. Establish and maintain a petty cash fund

Blooms: Remember

CAAHEP: VII.P.3. Complete insurance claim forms

CAAHEP: VIII.C.1. Describe how to use the most current procedural coding system

CAHIIM: I. D. 2. Apply policies and procedures to comply with the changing regulations among various payment systems for healthcare services such as Medicare, Medicaid, managed care, and so forth. (NEW)

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CAHIIM: I. D. 4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding Initiative.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-05

Topic: HIPAA Transactions and Code Sets

5. Which complies with the HIPAA Security Rule?

A. selecting a mixture of characters for the password

- B. sharing your password with the office manager or doctor
- C. writing down your password and hiding it
- D. keeping user ID and password the same

Selecting a mixture of characters for the password complies with the HIPAA Security Rule.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: IV. D. 1. Apply confidentiality and security measures to protect electronic health information.

- 6. Which is a future benefit of the Affordable Care Act?
- A. legal residents cannot obtain insurance in order to keep premiums low
- B. the cost of pharmaceutical drugs will be lowered
- C. preventative services will be completely covered
- D. the benefits will not change

As a future benefit, preventive services will be completely covered for all patients in health plans.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAAHEP: X.C.1. Differentiate between legal, ethical, and moral issues affecting healthcare

CAHIIM: IV. A. 4. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the

electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.

Difficulty: 1 Easy
Est Time: 0-1 minute
Learning Outcome: 02-02
Topic: Health Care Regulations

- 7. Which federal agency detects health care fraud and abuse?
- A. Office for Civil Rights (OCR)
- B. Department of Justice (DOJ)
- C. Office of E-Health Standards and Services (OESS)
- **D.** Office of the Inspector General (OIG)

The Office of the Inspector General (OIG) is the federal agency that enforces against and detects health care fraud and abuse.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: VIII.A.1. Work with physician to achieve the maximum reimbursement

CAAHEP: VIII.C.2. Define upcoding and why it should be avoided

CAHIIM: I. C. 4. Adhere to current regulations and established guidelines in code assignment.

CAHIIM: I. C. 5. Validate coding accuracy using clinical information found in the health record.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-06 Topic: Avoiding Fraud and Abuse

- 8. Which federal agency enforces criminal violations under federal law?
- A. Office for Civil Rights (OCR)
- **B.** Department of Justice (DOJ)
- C. Office of E-Health Standards and Services (OESS)
- D. Office of the Inspector General (OIG)

The Department of Justice (DOJ) is the federal agency that enforces federal law.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings

CAHIIM: I. C. 4. Adhere to current regulations and established guidelines in code assignment. CAHIIM: I. C. 5. Validate coding accuracy using clinical information found in the health record.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-06 Topic: Avoiding Fraud and Abuse

- 9. Which scenario best describes abuse?
- A. the doctor tells you to bill for an undocumented procedure
- **B.** the doctor tells you to bill for an unnecessary procedure that was done
- C. the medical assistant cashes an insurance check in their personal account
- D. sending an invoice to multiple insurance companies

To bill when the task was not done is fraud; to bill when it was not necessary is abuse.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.T. Perform diagnostic and procedural coding

Blooms: Understand

CAAHEP: VIII.A.1. Work with physician to achieve the maximum reimbursement

CAAHEP: VIII.C.2. Define upcoding and why it should be avoided

CAHIIM: I. C. 4. Adhere to current regulations and established guidelines in code assignment. CAHIIM: I. C. 5. Validate coding accuracy using clinical information found in the health record.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-06 Topic: Avoiding Fraud and Abuse

10. Which scenario best describes fraud?

<u>A.</u> the doctor tells you to bill for an undocumented procedure

B. the doctor tells you to bill for an unnecessary procedure that was done

C. the medical assistant bills for a preauthorized procedure

D. sending an invoice to multiple insurance companies to see who pays

To bill when the task was not done is fraud; to bill when it was not necessary is abuse.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

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Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-06 Topic: Avoiding Fraud and Abuse

11. Which of the following will be introduced in the future?

A. patient identifier

B. health plan identifier

C. both patient and health plan identifiers

D. neither patient nor health plan identifiers

Two identifiers—for employers and for providers—have been set up by the federal government, and two—for patients and for health plans—are to be established in the future.

ABHES: 8.B Prepare and maintain medical records

ABHES: 8.I. Establish and maintain a petty cash fund

Blooms: Remember

CAAHEP: VII.P.3. Complete insurance claim forms

CAAHEP: VIII.C.1. Describe how to use the most current procedural coding system

CAHIIM: I. D. 2. Apply policies and procedures to comply with the changing regulations among various payment systems for healthcare services such as Medicare, Medicaid, managed care, and so forth. (NEW)

CAHIIM: I. D. 3. Support accurate billing through coding, chargemaster, claims management, and bill reconciliation processes.

CAHIIM: I. D. 4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding

Initiative.
Difficulty: 1 Easy

Est Time: 0-1 minute Learning Outcome: 02-05

Topic: HIPAA Transactions and Code Sets

- 12. Which measure does **not** enforce the HIPAA Security Rule?
- A. secure internet connections
- B. backup file procedures
- C. transmitting unencrypted data
- D. enforced security policies

Security measures that help to enforce the HIPAA Security Rule are secure internet connections, backup file procedures, access controls, and enforced security policies. All data transmissions must be protected with encryption.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: IV. D. 1. Apply confidentiality and security measures to protect electronic health information.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-04 Topic: HIPAA Security Rule

- 13. Which is also known as the Stimulus Package?
- A. HITECH
- B. HIPAA
- C. CMS
- **D.** ARRA

The American Recovery and Reinvestment Act (ARRA) of 2009, also known as the Stimulus Package, contains additional provisions concerning the standards for electronic transmission of health care data.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAAHEP: X.C.1. Differentiate between legal, ethical, and moral issues affecting healthcare

CAHIIM: IV. A. 4. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the

electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-02 Topic: Health Care Regulations

- 14. What is the best description of an encounter?
- A. telephone call
- B. face-to-face meeting
- C. something that should be billed
- D. something that should be investigated

An encounter is a face-to-face meeting between a patient and a provider in a medical office, clinic, hospital, or other location.

ABHES: 8.B Prepare and maintain medical records ABHES: 8.I. Establish and maintain a petty cash fund

Blooms: Remember

CAAHEP: V.C.6. Describe various types of content maintained in a patient's medical record

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-01 Topic: Medical Records

- 15. Which is **not** a goal of compliance plans?
- A. prevent fraud and abuse
- **B.** enhance patient education guidelines
- C. ensure compliance with laws
- D. defend the practice if it is investigated or prosecuted

The goal of a compliance plan is to prevent fraud and abuse, ensure compliance with laws, and defend the practice if it is investigated or prosecuted.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAHIIM: 1. B. 2. Apply policies and procedures to ensure organizational compliance with regulations and standards.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-07 Topic: Compliance Plans

16. A social security number is an example of a (n):

A. EIN

B. code set

C. identifier

D. NPI

Identifiers are numbers of predetermined length and structure, such as a person's Social Security number.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Remember

CAAHEP: VII.P.3. Complete insurance claim forms

CAAHEP: VIII.C.1. Describe how to use the most current procedural coding system

CAHIIM: I. D. 2. Apply policies and procedures to comply with the changing regulations among various payment systems for healthcare services such as Medicare, Medicaid, managed care, and so forth. (NEW)

CAHIIM: I. D. 3. Support accurate billing through coding, chargemaster, claims management, and bill reconciliation processes.

CAHIIM: I. D. 4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding Initiative.

Difficulty: 1 Easy
Est Time: 0-1 minute
Learning Outcome: 02-05

Topic: HIPAA Transactions and Code Sets

17. Which act requires covered entities to notify affected individuals following the discovery of a breach of unsecured health information?

A. HITECH

- B. HIPAA
- C. Privacy rule
- D. breach notification

The HITECH Act requires covered entities to notify affected individuals following the discovery of a breach of unsecured health information.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: IV. D. 1. Apply confidentiality and security measures to protect electronic health information.

18. Which law guides the use of federal stimulus money to promote the adoption and meaningful use of health information technology, mainly using electronic health records?

A. OIG

B. HIPAA

C. ARRA

D. HITECH

HITECH is the law that guides the use of federal stimulus money to promote the adoption and meaningful use of health information technology, mainly using electronic health records.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAAHEP: X.C.1. Differentiate between legal, ethical, and moral issues affecting healthcare

CAHIIM: IV. A. 4. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the

electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.

Difficulty: 1 Easy
Est Time: 0-1 minute
Learning Outcome: 02-02
Topic: Health Care Regulations

19. What are people or organizations that furnish, bill, or are paid for health care in the normal course of business called?

A. clearinghouses

B. insurers

C. providers

D. business associates

Health care providers are people or organizations that furnish, bill, or are paid for health care in the normal course of business.

Blooms: Remember

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAAHEP: X.C.1. Differentiate between legal, ethical, and moral issues affecting healthcare

CAHIIM: IV. A. 4. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the

electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-02 Topic: Health Care Regulations

- 20. What type of program encrypts data traveling between the office and the internet, such as patients' Social Security numbers, so that the information is secure?
- A. medical management
- **B.** practice management
- C. backup software
- D. data software

Practice management programs (PMs) encrypt data traveling between the office and the internet, such as patients' Social Security numbers, so that the information is secure.

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: IV. D. 1. Apply confidentiality and security measures to protect electronic health information.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-04 Topic: HIPAA Security Rule

- 21. Who has the authority to authorize the release of information on a patient to anyone not directly involved in their care?
- A. doctor
- B. "next of kin"
- C. office manager
- **D.** legal representative

Only a patient or their legal representative has the authority to authorize the release of information on a patient to anyone not directly involved in their care.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Remember

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

CAHIIM: III. B. 3. Release patient-specific data to authorized users.

- 22. What are the Centers for Medicare and Medicaid Services (CMS) responsible for?
- **<u>A.</u>** implementing annual federal budget acts and laws
- B. lowers the costs of screening procedures for diseases
- C. coding and billing
- D. enforcing new rules and regulations

The Centers for Medicare and Medicaid Services (CMS) are responsible for implementing annual federal budget acts and laws, recommending new rules (such as increased coverage of screening procedures for diseases), and ensuring quality of healthcare.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAAHEP: X.C.1. Differentiate between legal, ethical, and moral issues affecting healthcare

CAHIIM: IV. A. 4. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the

electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.

Difficulty: 2 Medium
Est Time: 0-1 minute
Learning Outcome: 02-02
Topic: Health Care Regulations

- 23. A compliance plan does **not** cover which of the following?
- A. EEO (Equal Employment Opportunity)
- B. OSHA (Occupational Safety and Hazard Administration)
- C. coding and billing
- **D.** referrals and authorizations

Compliance plans cover all areas of government regulation of medical practices, such as Equal Employment Opportunity (EEO) regulations, Occupational Safety and Health Adminuteistration (OSHA) regulations, and especially coding and billing.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAHIIM: I. B. 2. Apply policies and procedures to ensure organizational compliance with regulations and standards.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-07 Topic: Compliance Plans

24. What did the NPI (National Provider Identifier) replace?

A. NPPES

B. EIN

C. Medicare UPIN

D. CMS

Medicare had previously used the UPIN as a provider identifier. Many health plans—including Medicare, Medicaid, and private health insurance issuers—and all health care clearinghouses must now accept and use the NPI (National Provider Identifier) in standard transactions.

ABHES: 8.I. Establish and maintain a petty cash fund

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAAHEP: VIII.C.3. Describe how to use the most current diagnostic coding classification system

CAHIIM: I. D. 4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding

Initiative.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-05

Topic: HIPAA Transactions and Code Sets

25. If a violation is found during a medical practice investigation and a compliance plan is typically followed, what may it indicate to the Office of Inspector General (OIG)?

A. direct negligence

B. lack of communication

C. practice of abuse

<u>D.</u> may be simple errors

Having a plan in place shows that efforts are made to understand the rules and correct errors. This indicates to OIG that the problems may not add up to a pattern or practice of abuse, but may simply be errors.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAHIIM: I. B. 2. Apply policies and procedures to ensure organizational compliance with regulations and standards.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-07 Topic: Compliance Plans

- 26. Which main federal government agency is responsible for health care?
- A. Health Care Financing Administration (HCFA)
- **B.** Centers for Medicare and Medicaid Services (CMS)
- C. Department of Health and Human Services (HHS)
- D. Health Department

Centers for Medicare and Medicaid Services (CMS) is the main federal government agency that is responsible for health care.

Blooms: Remember

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAAHEP: X.C.1. Differentiate between legal, ethical, and moral issues affecting healthcare

CAHIIM: IV. A. 4. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the

electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-02 Topic: Health Care Regulations

- 27. What is the impermissible use or disclosure of PHI that could pose significant risk to the affected person called?
- A. hack
- B. pirate
- C. breach
- D. decrypt

Breach is the impermissible use or disclosure of PHI that could pose significant risk to the affected person.

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: IV. D. 1. Apply confidentiality and security measures to protect electronic health information.

28. What is a medical practice's written plan for complying with regulations?

A. compliance plan

B. HIPAA notice

C. privacy notice

D. regulation plan

A compliance plan is a medical practice's written plan for complying with regulations.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAHIIM: I. B. 2. Apply policies and procedures to ensure organizational compliance with regulations and standards.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-07 Topic: Compliance Plans

29. What is the activity of copying files to another media or off site location so that they will be preserved in case the originals are no longer available?

A. encrypting

B. encoding

C. saving

D. backup

Backing up is the activity of copying files to another medium so that they will be preserved in case the originals are no longer available.

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: IV. D. 1. Apply confidentiality and security measures to protect electronic health information.

- 30. Which is **not** a valid component of a compliance plan?
- A. audit and monitor compliance with government regulations
- **B.** to have inconsistent policies and procedures
- C. provide staff with training and communication
- D. having a guideline by which to correct errors

A compliance plan and committee are responsible for monitoring compliance with government regulations, having policies and procedures that are consistent, providing ongoing staff training and communication, and to respond to and correct errors.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Remember

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAHIIM: I. B. 2. Apply policies and procedures to ensure organizational compliance with regulations and standards.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-07 Topic: Compliance Plans

- 31. Which is the process of encoding information in such a way that only the person (or computer) with the key can decode it?
- A. decoding
- B. encoding
- **C.** encrypting
- D. decrypting

Encrypting is the process of encoding information in such a way that only the person (or computer) with the key can decode it.

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: IV. D. 1. Apply confidentiality and security measures to protect electronic health information.

- 32. Which is (are) elements included in a compliance plan according to the Office of the Inspector General?
- A. training
- B. ongoing communication
- C. both training and ongoing communication
- D. dependents will be covered under their parent's private plan until age 26

Both training and ongoing communication are parts of a compliance plan.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAAHEP: X.C.1. Differentiate between legal, ethical, and moral issues affecting healthcare

CAHIIM: IV. A. 4. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the

electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.

Difficulty: 2 Medium
Est Time: 0-1 minute
Learning Outcome: 02-07
Topic: Health Care Regulations

33. Which is a valid aspect of the Affordable Care Act?

A. preventive services will be covered by insurance with no copayment required

- B. illegal aliens will not be denied health insurance
- C. pre-existing conditions will not be covered
- D. young adults up to age 22 will remain as a dependent on their parent's private insurance

Under the Affordable Care Act, preventive services will be covered by insurance with no copayment required.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAAHEP: X.C.1. Differentiate between legal, ethical, and moral issues affecting healthcare

CAHIIM: IV. A. 4. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the

electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.

Difficulty: 2 Medium
Est Time: 0-1 minute
Learning Outcome: 02-02
Topic: Health Care Regulations

34. Which standards have been set to govern the electronic exchange of health information?

A. identifiers

B. code sets

C. standard transactions

D. All of these

The three standards that have been set to govern the electronic exchange of health information are standard transactions, identifiers, and code sets.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.I. Establish and maintain a petty cash fund

Blooms: Remember

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting CAHIIM: I. D. 4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding

Initiative.
Difficulty: 1 Easy
Est Time: 0-1 minute
Learning Outcome: 02-05

Topic: HIPAA Transactions and Code Sets

35. A compliance plan constitutes which of the following

A. a written document

B. a committee

C. both a written document and a committee

D. neither a written document nor a committee

A compliance plan should set up procedures to check the medical office's compliance with government regulations through a written document and a compliance officer or committee.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAHIIM: I. B. 2. Apply policies and procedures to ensure organizational compliance with regulations and standards.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-07 Topic: Compliance Plans

36. What is any group of codes used for encoding data elements?

A. ICD

B. CPT

C. code set

D. transaction codes

A code set is any group of codes used for encoding data elements.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.I. Establish and maintain a petty cash fund

Blooms: Remember

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings

CAHIIM: I. D. 4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding

Initiative.
Difficulty: 1 Easy
Est Time: 0-1 minute
Learning Outcome: 02-05

Topic: HIPAA Transactions and Code Sets

- 37. Which is a valid Breach Notification Procedure?
- A. Notify patients of breaches "without reasonable delay" within 90 days
- B. Notice to business associates from covered entities
- C. Notice to ex-spouses on breaches involving patients who are deceased.
- **D.** None of these

Notices should be sent within 60 days, from BA's (business associates) to CE's (covered entities), and to "next of kin".

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.B Prepare and maintain medical records

Blooms: Understand

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: IV. D. 1. Apply confidentiality and security measures to protect electronic health information.

38. Which code set is for specifying diseases, injuries, impairments, and other health related problems?

A. ICD

B. CPT

C. HCPS

D. CDT-4

ICD is a code set used for specifying diseases, injuries, impairments, and other health related problems.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.I. Establish and maintain a petty cash fund

Blooms: Remember

CAAHEP: VIII.C.1. Describe how to use the most current procedural coding system

CAHIIM: I. D. 4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding

 ${\it Initiative}.$

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-05

Topic: HIPAA Transactions and Code Sets

- 39. Which are covered entities under HIPAA/HITECH that must follow the regulations?
- A. Patients
- B. Health Providers
- C. Business Associates
- D. Collection Agencies

Health Providers are covered entities under HIPAA/HITECH that must follow the regulations.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Remember

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

CAHIIM: IV. A. 4. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the

electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-02 Topic: Health Care Regulations

40. A retention schedule

- A. explains what records to keep
- B. explains how long records must be saved
- C. covers the method(s) of record storage
- **D.** all of these

A retention schedule guides the office what records to keep, for how long, and using what storage method(s).

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Remember

CAAHEP: IX.C.1. Discuss legal scope of practice for medical assistants CAHIIM: III. B. 3. Release patient-specific data to authorized users.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-03 Topic: HIPAA Privacy Rule

41. The standards for written documentation include

- A. clarity
- B. legibility
- C. signed and dated entries
- **D.** all the above

Written documentation must be clear, readable, and signed/dated by the documenter.

ABHES: 8.B Prepare and maintain medical records

Blooms: Understand

CAAHEP: V.C.6. Describe various types of content maintained in a patient's medical record

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-01 Topic: Medical Records

42. Which one of these would be the most secure password?

A. 123456

B. july14

<u>C.</u> f1H*%4hs

D. forwork

Of these choices, f1H*%4hs is the best password because it is not easy for someone else to guess.

ABHES: 8.B Prepare and maintain medical records

Blooms: Understand

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: IV. D. 1. Apply confidentiality and security measures to protect electronic health information.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-04

Topic: Avoiding HIPAA Security Rule

43. What standards are set under the rules of the HIPAA Electronic Health Care Transactions and Code Sets?

A. electronic formats

B. identifiers

C. codes

D. All of these

Electronic formats, identifiers such as the NPI, and code sets are established under the rules of the HIPAA Electronic Health Care Transactions and Code Sets.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.I. Establish and maintain a petty cash fund

Blooms: Remember

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings

CAHIIM: I. D. 4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding

Initiative.
Difficulty: 1 Easy
Est Time: 0-1 minute
Learning Outcome: 02-05

Topic: HIPAA Electronic Health Care Transactions and Code Sets

- 44. In electronic health records, documents may be created in a variety of ways, but they are **A**. ultimately viewed on a computer screen
- B. always printed out in the medical office
- C. always annotated by handwriting
- D. None of these

In electronic health records, documents may be created in a variety of ways, but they are ultimately viewed on a computer screen.

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: V.C.6. Describe various types of content maintained in a patient's medical record

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-01 Topic: Medical Records

- 45. The provider owns the actual medical records, but the information in a record belongs to
- A. any medical professional
- **B.** the patient
- C. the payer
- D. None of these

The provider owns the actual medical records, but the information in a record belongs to the patient.

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: V.C.6. Describe various types of content maintained in a patient's medical record

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-01 Topic: Medical Records

- 46. Which of the following is fraudulent behavior?
- A. making a mistake on a claim
- **B.** deception with the intent to benefit
- C. Both making a mistake on a claim and deception with the intent to benefit
- D. Neither making a mistake on a claim nor deception with the intent to benefit

Fraud means deceptive behavior with the intent to benefit.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.T. Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.A.1. Work with physician to achieve the maximum reimbursement

CAAHEP: VIII.C.2. Define upcoding and why it should be avoided

CAHIIM: I. C. 4. Adhere to current regulations and established guidelines in code assignment. CAHIIM: I. C. 5. Validate coding accuracy using clinical information found in the health record.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-06 Topic: Avoiding Fraud and Abuse

- 47. The HIPAA Privacy Rule is enforced by the OCR. What does OCR stand for?
- A. Office for Claim Returns
- B. Office for Certified Rules
- C. Office for Civil Rights
- D. Office for Civil Responsibility

OCR stands for the Office for Civil Rights.

ABHES: 4.C. Follow established policies when initiating or terminuteating medical treatment

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: III. B. 1. Adhere to the legal and regulatory requirements related to the health information infrastructure.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-06 Topic: Avoiding Fraud and Abuse

- 48. Under what conditions should a medical assistant change the facts on an insurance claim?
- A. if the patient requests the change
- B. if the patient fails to make a payment
- C. if the change will save the practice money
- **D.** The facts must never be changed

A medical assistant should never change the facts on an insurance claim.

ABHES: 8.T. Perform diagnostic and procedural coding

Blooms: Understand

CAAHEP: VIII.A.1. Work with physician to achieve the maximum reimbursement

CAHIIM: I. C. 4. Adhere to current regulations and established guidelines in code assignment. CAHIIM: I. C. 5. Validate coding accuracy using clinical information found in the health record.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-06 Topic: Avoiding Fraud and Abuse

- 49. When can information about a patient's drug abuse be disclosed without authorization?
- A. if a prospective employer requests it
- B. if a physician from another practice requests it
- C. if the patient's spouse requests it
- D. None of these

Drug abuse information cannot be released to an employer, another physician, or family member without the patient's authorization.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Remember

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

CAHIIM: III. B. 3. Release patient-specific data to authorized users.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-03 Topic: HIPAA Privacy Rule

- 50. A standard and unique identifier for health care providers to use in filing health care claims is called
- A. Employer Identification Number (EIN)
- **B.** National Provider Identifier (NPI)
- C. research data
- D. code sets

A National Provider Identifier, or NPI is a standard and unique identifier for health care providers to use in filing health care claims.

ABHES: 4.C. Follow established policies when initiating or terminuteating medical treatment

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Remember

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings

CAHIIM: III. B. 1. Adhere to the legal and regulatory requirements related to the health information infrastructure.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-05

Topic: HIPAA Transactions and Code Sets

51. The HIPAA Privacy Rule is enforced by

A. the OIG

B. the OCR

C. CMS

D. HHS

The Office for Civil Rights (OCR) enforces the HIPAA Privacy Rule.

ABHES: 4.C. Follow established policies when initiating or terminuteating medical treatment

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: III. B. 1. Adhere to the legal and regulatory requirements related to the health information infrastructure.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-06 Topic: Avoiding Fraud and Abuse

- 52. Collecting payment in full for a procedure from both the patient and the insurance carrier is an example of
- A. liability
- B. fraud
- C. libel
- D. audits

Collecting payment in full for a procedure from both the patient and the insurance carrier is an example of fraud.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

ABHES: 8.T. Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.A.1. Work with physician to achieve the maximum reimbursement

CAHIIM: I. D. 3. Support accurate billing through coding, chargemaster, claims management, and bill reconciliation processes.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-06 Topic: Avoiding Fraud and Abuse

- 53. Altering a patient's chart to increase the payment the physician receives is an example of
- A. medical liability
- B. subpoena
- C. accountability
- **D.** fraud

Altering a patient's chart to increase the payment the physician receives is an example of fraud.

ABHES: 8.T. Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.A.1. Work with physician to achieve the maximum reimbursement

CAHIIM: I. C. 5. Validate coding accuracy using clinical information found in the health record.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-06 Topic: Avoiding Fraud and Abuse

- 54. SOAP is a format for patients' medical
- A. documentation
- B. records
- **C.** both documentation and records
- D. neither documentation nor records

SOAP is a documentation format for patients' medical records.

ABHES: 8.B Prepare and maintain medical records

Blooms: Understand

CAAHEP: V.C.6. Describe various types of content maintained in a patient's medical record

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-01 Topic: Medical Records

- 55. What do patients' medical records contain about their health history?
- A. facts
- B. observations
- C. findings
- **D.** All of these

Patients' medical records contain facts, observations, and findings about their health.

ABHES: 8.B Prepare and maintain medical records

Blooms: Understand

CAAHEP: V.C.6. Describe various types of content maintained in a patient's medical record

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-01 Topic: Medical Records

56. Entries in patients' medical records should be descending or ascending in what type of order?

A. chronological

B. alphabetical

C. numerical

D. the order is not important

Entries in patients' medical records should be descending or ascending in chronological order.

ABHES: 8.B Prepare and maintain medical records

Blooms: Understand

CAAHEP: V.C.6. Describe various types of content maintained in a patient's medical record

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-01 Topic: Medical Records

57. The abbreviation TPO refers to

A. treatment, payment, and health care operations

- B. terms, policies, and financial obligations
- C. treatment, providers, and organizations
- D. terms, providers, and organizations

TPO stands for treatment, payment, and health care operations.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Remember

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

CAHIIM: III. B. 3. Release patient-specific data to authorized users.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-03 Topic: HIPAA Privacy Rule

- 58. What type of schedule do medical offices use to control how long patient information is stored?
- A. financial schedule
- **B.** retention schedule
- C. referral schedule
- D. None of these

Medical offices establish and maintain a retention schedule to control storage of patient information.

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: V.C.6. Describe various types of content maintained in a patient's medical record

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-01 Topic: Medical Records

- 59. The abbreviation PHI stands for
- A. physician health information
- B. provider health information
- C. protected health information
- D. primary health information

PHI stands for protected health information.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Remember

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

CAHIIM: III. B. 3. Release patient-specific data to authorized users.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-03 Topic: HIPAA Privacy Rule

- 60. For up to how long can a medical office's financial records be audited after a patient's last visit (assuming that embezzlement or government funding has not occurred)?
- A. 3 years
- **B.** 7 years
- C. 5 years
- D. 10 years

A medical office's financial records be audited for up to 7 years after a patient's last visit (assuming that embezzlement or government funding has not occurred).

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

CAHIIM: I. C. 4. Adhere to current regulations and established guidelines in code assignment.

CAHIIM: I. D. 4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding

 ${\it Initiative}.$

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-06 Topic: Avoiding Fraud and Abuse

- 61. A form signed by a patient to permit release of medical information under specific stated conditions is called a(n)
- A. acceptance form
- **B.** authorization to disclose information
- C. medical release form
- D. None of these

An authorization to disclose information is the form signed by a patient to permit release of medical information under specific stated conditions.

ABHES: 8.B Prepare and maintain medical records

Blooms: Understand

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

CAHIIM: III. B. 3. Release patient-specific data to authorized users.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-03 Topic: HIPAA Privacy Rule

- 62. A clearinghouse is a company that helps medical offices and health plans exchange
- A. claim data in correct formats
- B. employment records
- C. accounts payable
- D. record retention schedules

A clearinghouse is a company that helps medical offices and health plans exchange claim data in correct formats.

ABHES: 8.U. Prepare and submit insurance claims

Blooms: Understand

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

CAHIIM: IV. A. 4. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the

electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-02 Topic: Health Care Regulations

- 63. Under HIPAA, patients' protected health information may be shared without authorization for:
- A. payment
- B. health care operations
- C. treatment
- **D.** All of these

Under HIPAA, patients' protected health information may be shared without authorization for treatment, payment, or health care operations.

ABHES: 8.B Prepare and maintain medical records

Blooms: Understand

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

CAHIIM: III. B. 3. Release patient-specific data to authorized users.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-03 Topic: Medical Records

| 64 | Releasing protected health information for reasons other than treatment, payment, |
|---|---|
| or health care operations requires which type of patient authorization? | |

A. written

B. verbal

C. either written or verbal

D. None of these; it cannot be released

Releasing protected health information for reasons other than treatment, payment, or health care operations requires written patient authorization.

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

CAHIIM: III.A.1. Apply current laws, accreditation, licensure, and certification standards related to health information initiatives from the

national, state, local, and facility levels.

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-03 Topic: Medical Records

65. What is the relationship between documentation and billing?

A. If a service is not documented, it did not happen.

B. If a service is not documented, it cannot be billed.

C. If a service is not billed, the documentation can be destroyed.

D. If a service has been billed, the documentation can be shredded.

The standard guideline is, if a service is not documented, whether or not it was provided, it cannot be billed.

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: V.C.6. Describe various types of content maintained in a patient's medical record

Difficulty: 1 Easy
Est Time: 0-1 minute
Learning Outcome: 02-01
Topic: Medical Records

- 66. Which of these subjects would you not expect to find information about in a patient's medical record?
- A. medical allergies and reactions
- B. a record of missed or canceled appointments
- **C.** employment and salary records
- D. biographical and personal information

Employment and salary records are not part of a patient's medical record.

ABHES: 8.B Prepare and maintain medical records

Blooms: Remember

CAAHEP: V.C.6. Describe various types of content maintained in a patient's medical record

Difficulty: 1 Easy Est Time: 0-1 minute Learning Outcome: 02-01 Topic: Medical Records

- 67. A medical office's compliance plan should include
- A. staff training
- B. internal communications
- C. a record of all subpoenas received recently
- **D.** both staff training and internal communications

A compliance plan should include the topics of staff training and internal communications.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAHIIM: I. B. 2. Apply policies and procedures to ensure organizational compliance with regulations and standards.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-07 Topic: Compliance Plans

- 68. Under what circumstances might a patient's protected health information be shared without authorization?
- A. court orders
- B. workers' compensation cases
- C. both court orders and workers' compensation cases
- D. it can never be shared

A patient's protected health information can be shared under court order and for workers' compensation cases without authorization to release.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Understand

CAAHEP: IX.P.3. Apply HIPAA rules in regard to privacy/release of information

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-03 Topic: HIPAA Privacy Rule

- 69. What is one way that providers can follow the guidelines for the HITECH rule?
- A. frequently change passwords
- B. access controls
- C. make copies of all data
- **D.** all of these

Providers follow this rule through the use of encryption, access control, passwords,

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: IV. D. 1. Apply confidentiality and security measures to protect electronic health information.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-04 Topic: HIPAA Security Rule

70. Following OIG's guidance can help in the defense against which of the following?

A. a false claims accusation

B. a workers' compensation claim

C. unemployment claim

D. breach of ethical conduct

Following (OIG) Office of the Inspector General's guidance can help in the defense against a false claims accusation.

ABHES: 4.B. Institute federal and state guidelines when releasing medical records or information

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAHIIM: I. B. 2. Apply policies and procedures to ensure organizational compliance with regulations and standards.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-07 Topic: Compliance Plans

71. If a physician requests that you bill a procedure that is not documented, what would be the best course of action?

A. bill whatever the doctor requests

B. say that you will comply and avoid the request altogether

C. report it to CMS

<u>D.</u> report it to the compliance officer

Do not code or bill services that are not supported by documentation, even if instructed to do so by a physician. Instead, report this kind of situation to the practice's compliance officer.

ABHES: 4.F Comply with federal, state, and local health laws and regulations

Blooms: Understand

CAAHEP: IX.P.8. Apply local, state, and federal health care legislation and regulation appropriate to the medical assisting practice setting

CAHIIM: I. B. 2. Apply policies and procedures to ensure organizational compliance with regulations and standards.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-07 Topic: Compliance Plans

- 72. If a practice has discovered that the security or privacy of more than 500 people's PHI has been breached, which establishment must be notified (through the HITECH Act)?
- **A.** prominent media outlets
- B. Office of the Inspector General
- C. all credit bureaus
- D. it can never be shared

Notice to "prominent media outlets" on breaches involving more than 500 individuals.

ABHES: 8.B Prepare and maintain medical records

Blooms: Understand

CAAHEP: IX.C.3. Describe the implications of HIPAA for the medical assistant in various medical settings CAHIIM: IV. D. 1. Apply confidentiality and security measures to protect electronic health information.

Difficulty: 2 Medium Est Time: 0-1 minute Learning Outcome: 02-04 Topic: HIPAA Security Rule