

MULTIPLE CHOICE

1. Understanding what you read is called:
 - a. application.
 - b. comprehension.
 - c. communication.
 - d. interpretation.

ANS: B REF: 14

2. Sending and receiving information through mutually understood methods is called:
 - a. application.
 - b. comprehension.
 - c. communication.
 - d. interpretation.

ANS: C REF: 14

3. When you stick with a task until it is completed, you are:
 - a. diligent.
 - b. reticent.
 - c. obstinate.
 - d. obedient.

ANS: A REF: 15

4. When you have honest, ethical, and moral principles, you are said to have:
 - a. objectivity.
 - b. practicality.
 - c. flexibility.
 - d. integrity.

ANS: D REF: 15

5. If you are not influenced by personal feelings, biases, or prejudice, you have:
 - a. objectivity.
 - b. practicality.
 - c. flexibility.
 - d. integrity.

ANS: A REF: 15

6. To write down important lecture facts in one's own words is called:
 - a. outlining.
 - b. plagiarizing.
 - c. documenting.
 - d. paraphrasing.

ANS: D REF: 16

7. Organizing daily responsibilities according to their importance is called:
- a. colonizing.
 - b. multitasking.
 - c. prioritizing.
 - d. categorizing.

ANS: C

REF: 15

8. College entry-level skills necessary for success as a health insurance professional include all of the following, except:
- a. coding.
 - b. basic business math.
 - c. English and grammar skills.
 - d. keyboarding and computer skills.

ANS: A

REF: 14

9. Success in getting the most out of one's education and optimizing career potential facilitates:
- a. lifelong learning.
 - b. autonomy.
 - c. career identity.
 - d. individuality.

ANS: A

REF: 15

10. In order to develop effective study skills, it is suggested that students generate a _____ chart.
- a. career objective
 - b. time management
 - c. professional education
 - d. goal oriented

ANS: B

REF: 15

11. The nationally recognized job title for individuals who specialize in medical insurance claims submission is:
- a. insurance billing specialist.
 - b. health insurance professional.
 - c. health information technician.
 - d. none; there is no nationally recognized title.

ANS: D

REF: 14

12. One method of enhancing one's career as a health insurance professional is to acquire:
- a. certification.
 - b. nationalization.
 - c. legalization.
 - d. specialization.

ANS: A

REF: 19

13. Many of those who work in healthcare say the most important reward is:

- a. earning a good salary.
- b. getting promoted.
- c. becoming certified.
- d. helping people.

ANS: D REF: 20

14. Career opportunities for a health insurance professional include:

- a. physician's offices.
- b. healthcare organizations.
- c. nursing homes.
- d. all of the above.

ANS: D REF: 18

15. In this chapter, experts in generating, submitting, and tracking insurance claims are referred to as:

- a. medical assistants.
- b. health insurance professionals.
- c. medical office specialists.
- d. physicians' assistants.

ANS: B REF: 17

16. The focus of the health insurance professional's career is:

- a. the insurance claim.
- b. becoming certified.
- c. patient account collections.
- d. medical records documentation.

ANS: A REF: 21

17. The new version of HIPAA's standard for filing electronic claims is:

- a. CMS-1500.
- b. AXC4.
- c. Version 5010.
- d. 4010A1.

ANS: C REF: 22

18. The compliance date for all covered entities to convert to the new ICD-10 diagnostic coding system is no sooner than:

- a. 2012.
- b. 2013.
- c. 2015.
- d. 2020.

ANS: C REF: 22

19. The key innovation that has dramatically transformed the health insurance industry that focuses on accuracy and efficiency rather than manual processes is the:

- a. computer.
- b. multiline telephone.

- c. copy machine.
- d. calculator.

ANS: A REF: 21

20. When a covered entity can clearly demonstrate the ability to successfully create and receive compliant transactions using the new 5010 version, it is said to have:
- a. preliminary endorsement.
 - b. appropriate acquisition.
 - c. Level I compliance.
 - d. compatibility.

ANS: C REF: 22

OTHER

1. List four types of business entities that typically hire health insurance professionals.

ANS:

Physician's or dentist's offices
Hospitals and urgent care facilities
Pharmacies
Nursing homes
Home health
Mental health facilities
Physical therapy and rehabilitation centers
Insurance companies
Health maintenance organizations (HMOs)
Consulting firms
Health data organizations

REF: 18

2. List six typical job responsibilities of a health insurance specialist.

ANS:

Scheduling appointments
Performing bookkeeping and other administrative duties
Explaining insurance benefits to patients
Handling day-to-day medical billing procedures
Adhering to each insurance carrier's guidelines
Documenting all activities using correct techniques and medical terminology
Keeping current on coding and compliance
Completing insurance forms promptly and accurately
Knowing and complying with laws and regulations
Entering data into a computer
Interpreting explanation of benefits (EOBs)
Posting payments to patient accounts

Corresponding with patients and insurance companies

REF: 18

3. Name four areas of certification available to the health insurance professional.

ANS:

Certified Medical Assistant
Registered Medical Assistant
Professional Association of Healthcare Coding Specialists
American Academy of Professional Coders (AAPC)
Certified Professional Coder (CPC)
Certified Professional Coder for Hospitals (CPC-H)
American Health Information Management Association (AHIMA)
Certified Coding Specialist (CCS)
Certified Coding Associate (CCA)
Certified Coding Specialist for Physicians (CCS-P)

REF: 21

4. List six on-the-job skills that a health insurance professional should possess.

ANS:

Pay attention to detail
Follow directions
Work independently without supervision
Understand the need for and possess a strong sense of professional ethics
Understand the need for and possess strong people skills
Demonstrate patience and an even temperament
Be empathetic without being sympathetic
Be organized but flexible
Be conscientious
Demonstrate a sense of responsibility
Possess manual dexterity
Understand and respect the importance of confidentiality
Demonstrate a willingness to learn

REF: 16

5. List the nine recommended steps listed in this chapter for pursuing and becoming successful in a career as a health insurance professional.

ANS:

Research duties and responsibilities
Enroll in a formal training program
Become certified
Obtain employment

Learn and perform your job duties
Post payments
Report denied charges to coding specialist
Generate and maintain an insurance log
Benefit from job security and flexibility

REF: 19

TRUE/FALSE

1. The ability to effectively perform one's job without direct supervision is called autonomy.

ANS: T REF: 18

2. Professional ethics are moral principles that are associated with a specific vocation.

ANS: T REF: 16

3. Advancement opportunities as a health insurance professional are relatively limited.

ANS: F REF: 18

4. Health insurance professionals can enhance their career by becoming certified.

ANS: T REF: 19

5. The basic goal of a health insurance professional is to ensure that providers and patients get paid correctly in a timely manner.

ANS: T REF: 21

6. There are as many different insurance claim forms as there are insurance companies.

ANS: F REF: 22

7. Certification is the culmination of a process of formal recognition of the competence possessed by an individual in a specific area.

ANS: T REF: 21

8. One can typically expect to perform various duties when one becomes a health insurance professional.

ANS: T REF: 18

9. The nationally recognized title for a health insurance professional is "insurance biller/coder."

ANS: F REF: 14

10. Computers have dramatically changed the face of health insurance.

ANS: T REF: 21

11. Health insurance professionals are currently in high demand in the United States.

ANS: T REF: 21

12. HIPAA has created an opportunity for the healthcare industry to move from paper claims transactions to electronic transactions using one national standard format.

ANS: T REF: 22

13. Healthcare providers in this country rely heavily on health insurance professionals.

ANS: T REF: 18

14. CMS mandates that insurance claims be submitted electronically using a specific format; however, there are exceptions to this rule.

ANS: T REF: 22

15. The change to the new HIPAA transaction standards was made to better accommodate the ICD-9-CM codes.

ANS: F REF: 22