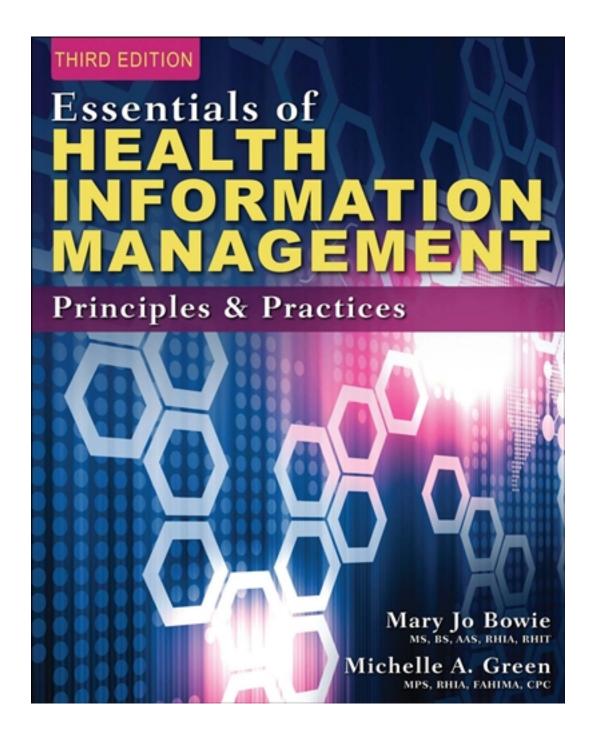
Test Bank for Essentials of Health Information Management Principles and Practices 3rd Edition by Bowie

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Test Bank

TRUE/FALSE

1: The American Health Information Management Association (AHIMA) and the Centers for Disease Control and Prevention (CDC) offer certification in coding.

A : true B : false

Correct Answer: B

2 : A cancer registrar is a health care professional who has primary responsibility for ensuring the timely, accurate, and complete collection and maintenance of cancer data.

A: true B: false

Correct Answer: A

3 : Inpatient coders usually obtain CCS certification, while physician office coders choose CCS-P and/or CPC certification.

A: true B: false

Correct Answer: A

4 : Coding is the assignment of numbers to diagnosis, services, and procedures, based on patient record documentation.

A: true B: false

Correct Answer: A

5 : The abbreviation ACMCS means the American College of Medical Coding Supervisors.

A: true B: false

Correct Answer: B

6 : AHIMA requires Registered Health Information Technicians (RHITs) to submit proof of 20 continuing education hours every two years.

A: true B: false

Correct Answer: A

7 : The CPC and CPC-H credentials are offered through the American Health Information Management Association.

A: true B: false

Correct Answer: B

8: AHIMA's coding credentials include the CPC-P.

A: true

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B: false

Correct Answer: B

9: The responsibility for gathering information concerning general liability incidents belongs to the utilization manager.

A: true B: false

Correct Answer: B

10 : A privacy officer oversees activities that relate to the development, implementation, maintenance of, and adherence to the organization's policies and procedures covering privacy of and access to patient health information.

A: true B: false

Correct Answer: A

11: A coding and reimbursement specialist collects cancer data from a variety of sources and reports cancer statistics to government and health care agencies.

A: true B: false

Correct Answer: B

12: The American Association of Professional Coders offers the Certified Professional Coder Certification and the Certified Coding Associate Certification.

A : true B : false

Correct Answer: B

13 : A wide-area network includes computers that are placed far apart and connected by telephone lines.

A: true B: false

Correct Answer: A

14: A health insurance specialist reviews health-related claims to determine whether the costs for health care services are reasonable, and to determine medical necessity.

A : true B : false

Correct Answer: A

15: The abbreviation FCS means family care specialist.

A: true B: false

Correct Answer: B

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16: Medical assistants perform routine administrative and clinical tasks such as answering telephones and scheduling appointments.

A: true B: false

Correct Answer: A

17: Many medical transcriptionists work at home using the Internet.

A: true B: false

Correct Answer: A

18: A medical office manager usually earns a bachelor's degree from a technical college.

A: true B: false

Correct Answer: B

19: Privacy officers assure that an organization's policies and procedures covering covering privacy of and access of patient health information are in compliance with federal and state laws.

A: true B: false

Correct Answer: A

20: A case manager is responsible for coordinating patient care to ensure timely discharge or transfer of patients.

A: true B: false

Correct Answer: A

21: Student professional practice experiences are usually paid and benefit both the student and the facility.

A: true B: false

Correct Answer: B

22: Breach of patient confidentiality can result in termination from a professional practice site.

A: true B: false

Correct Answer: A

23: A listserv is an Internet-based or email discussion that covers a variety of topics and issues.

A: true B: false

Correct Answer: A

24: Sam is a health information management student who wishes to learn more about AHIMA. To best

accomplish this, he can join AHIMA at a reduced student rate..

A : true B : false

Correct Answer: A

25 : A coding and reimbursement specialists must have working knowledge of CPT and ICD-9-CM/ICD-10-CM coding systems.

A : true B : false

Correct Answer: A

26: ICD-9-CM will be replaced by the ICD-10-CM and CPT coding systems in 2013.

A : true B : false

Correct Answer: B

27: The American Academy of Professional Coders (AAPC) offers the RHIT and Registered Health Information Administrator (RHIA) certification examinations.

A: true B: false

Correct Answer: B

28 : A claims examiner reviews health-related claims to determine whether the costs are reasonable and medically necessary.

A : true B : false

Correct Answer: A

SHORT RESPONSE

29 : Describe the areas in which a health information management consultant might specialize, and list tasks they might perform.

Correct Answer: Health information management consultants can specialize in coding, long-term care, information security, and ambulatory care. They provide assistance (for example, backlog coding projects), advice (e.g., coding validation studies to determine staff training needs), and information (for example, credentialed person who consults for a long-term care facility) to clients.

30: The professional practice supervisor of Sally Student overheard Sally discussing confidential patient information with a friend. List the consequences that Sally will face as a result of this breach of confidentially.

Correct Answer: Sally may be terminated from the professional practice site, receive a failing grade for the professional practice course, and face possible suspension and/or expulsion from her academic program.

31 : Summarize student responsibilities during the professional practice experience.

Correct Answer: During the professional practice experience, students are expected to report to work according to the schedule established by the professional practice supervisor. If a student cannot attend on a particular day or will arrive late, the student should call in. Students will be required to make up any lost time. Students are also expected to be well-groomed and to dress professionally. In addition, it is very important that students act interested in all aspects of the experience, develop good working relationships with coworkers, and react appropriately to criticism and direction. Students should discuss with their professional practice supervisor and/ or instructor any issues that arise during the experience that cause concern.

32 : Compare the job functions of a privacy officer and a quality manager.

Correct Answer: A privacy officer oversees all ongoing activities related to the development, implementation, maintenance of, and adherence to the organization's policies and procedures covering privacy of and access to patient health information in compliance with federal and state laws and the health care organization's information privacy practices. A quality manager coordinates a health care facility's quality improvement program to ensure quality patient care, improve patient outcomes, confirm accreditation/regulatory compliance, and prepare for surveys.

33 : Snow Valley Hospital has a job opening for a utilization manager. Explain the responsibilities of a utilization manager and why a health information manager would be a good candidate for this position.

Correct Answer: A utilization manager is responsible for coordinating patient care to ensure the appropriate utilization of resources, delivery of health care services, and timely discharge or transfer. Because health information managers have extensive knowledge of coding and reimbursement systems, and such knowledge is needed by some utilization managers, health information managers make good candidates for this position.

34 : Discuss the specific credential requirements for nursing home administrators.

Correct Answer: All states and the District of Columbia require nursing home administrators to have a bachelor's degree, pass a licensing examination, complete a state-approved training program, and pursue continuing education. The American College of Health Care Administrators (ACHCA) offers the Certified Nursing Home Administrator (CNHA) credential, which is endorsed by the National Association of Boards of Examiners for Long Term Care Administrators (NAB) as an option for state licensure reciprocity.

35 : Distinguish between the job titles typically held by RHITs and RHIAs.

Correct Answer: Job titles for RHITs include health data analyst, insurance claims analyst, records technician specialist, clinical coding specialist, physician practice manager, and patient information coordinator. RHIA job titles include department director, system manager, data quality manager, information security officer, educator, and consultant.

36: List the types of businesses that employ health insurance specialists, and discuss the job functions of these specialists.

Correct Answer: Health insurance specialists are employed by insurance companies, thirdparty administrators, and managed-care companies. A health insurance specialist (or claims

CLICK HERE TO ACCESS THE COMPLETE Test Bank examiner) reviews health-related claims to determine whether the costs are reasonable and medically necessary given patient's diagnosis, and will also verify claims against third-party payer guidelines to authorize payment.

37: Define the role of the health services manager..

Correct Answer: A health services manager is an individual who plans, directs, coordinates, and supervises the delivery of health care. The title includes specialists who direct clinical departments or services and generalists who manage an entire facility or system.

38: List the organization that sponsors the Certified in Health Care Quality and Management

| credential. |
|--|
| Correct Answer : American Board of Quality Assurance and Utilization Review Physicians, In |
| MULTIPLE CHOICE |
| 39 : Medical assistants routinely perform which task? A : completing insurance claims |
| B: writing prescriptions |
| C: examining and treating patients |
| D: documenting inpatient records |
| Correct Answer : A |
| 40 : Which statement regarding the credentialing of a medical assistant is true? A : |
| Both the RMA and CMA credentials are obtained through the Association of Medical Technologists. |
| B: CMA credentialing is obtained through the American Association of Medical Assistants (AAMA). |
| C : CMA-eligible students can graduate from a program accredited by the United States Department of Education. |
| D : RMA-eligible students must graduate from a CAAHEP or ABHES accredited academic program. |
| |

Correct Answer: B

41: Transcriptionists working in specialized areas are more likely to encounter speech recognition technology in the areas of:

A :

| B: pathology and surgery |
|--|
| C: radiology and pathology |
| D: surgery and nuclear medicine |
| Correct Answer : C |
| 42 : Which credentials does AHIMA sponsor? A : CMSC, CPCS |
| B: CPC, CPC-H |
| C: RHIT, RHIA |
| D: RMA, CMT |
| Correct Answer : C |
| 43 : A nursing home administrator places the following advertisement in a local newspaper: "Seeking a health care professional who has the ability to coordinate a program to ensure superior patient care, monitor and improve patient outcomes, monitor facility compliance with accreditation and regulatory standards, and coordinate preparation for surveys." The job title for this professional would be A: case manager |
| B: privacy officer |
| C: quality manager |
| D: risk manager |
| Correct Answer : C |
| 44 : AHIMA requires RHITs and RHIAs to submit proof of continuing education every: A : year |

| B: two years | CLICK HERE TO ACCESS THE COMPLETE Test Bank |
|-------------------------------|--|
| C: three years | |
| D: four years | |
| Correct Answer : A | 4 |
| the: A: | nal association that sponsors the Coding Specialist for Payors certification is Health Care Administrators |
| B: | |
| American Health Info | rmation Management Association |
| C: American College of I | Medical Coding Specialists |
| D : Professional Associati | ion of Health Care Office Managers |
| Correct Answer : 0 | |
| | professional who oversees the development, implementation, maintenance to the organization's policies that cover the safeguarding of patient health ed a |
| B: privacy officer | |
| C: quality manager | |
| D: risk manager | |
| Correct Answer : E | 3 |
| receive timely disc A: | ob responsibilities include coordinating patient care to ensure that patients charge or transfer. Her job title is: |
| privacy officer | |
| B: quality manager | |

| C : risk manager |
|--|
| D: utilization manager |
| Correct Answer : D |
| 48 : An Internet-based third-party entity that manages and distributes software-based services across a WAN from a central data center is known as a(n) provider. A : application service |
| B: Internet-based service |
| C: software service |
| D: wide-area network |
| Correct Answer : A |
| 49 : The CPC, CPC-H, CPC-A, and CPC-H-A certifications are sponsored by: A : AAPC |
| B: AHIMA |
| C: AMA |
| D: ACMCS |
| Correct Answer : B |
| 50 : The abbreviation PCS means: A : primary care specialist |
| B: primary coding specialist |
| C: professional care supervisor |
| D: |

professional coding specialist

| Correct Ariswer . D |
|--|
| 51 : The CSP certification is offered by: A : AAPC |
| B: AHIMA |
| C: ACMCS |
| D: AMA |
| Correct Answer : C |
| FILL IN THE BLANK |
| 52 : The collection of cancer data from a variety of sources and the reporting of cancer statistics to government and health care agencies, is performed by a(n) |
| Correct Answer : cancer registrar |
| 53 : The coding systems that a coding and reimbursement specialist will use on the job include CPT, HCPCS, and |
| Correct Answer : ICD-9-CM/ICD-10-CM |
| 54 : The three professional associations that offer coding credentials are AHIMA,, and ACMCS. |
| Correct Answer : AAPC |
| 55 : Health information managers are considered experts in managing patient information, administering computer information systems, and assigning to patient diagnoses and procedures. |
| Correct Answer : codes |
| 56 : A health insurance specialist reviews health-related claims to determine whether the costs are reasonable and medically necessary given the patient's diagnosis. This position is also called a |
| Correct Answer : claims examiner |
| 57 : The abbreviation RMT means |
| Correct Answer : registered medical transcriptionist |

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| CLICK HERE TO ACCESS THE COMPLETE Test Bank 58: All states and the District of Columbia require nursing home administrators to have a bachelor's degree, complete a state-approved training program, pursue continuing education, and |
|---|
| Correct Answer : pass a licensing examination |
| 59: Medical assistants perform routine administrative and clinical tasks to keep the offices and clinics of, podiatrists, chiropractors, and optometrists running smoothly. |
| Correct Answer : physicians |
| 60 : During the professional practice experience, students receiveexperience prior to graduation. |
| Correct Answer : on the job |
| 61: A student can be terminated from the professional practice site, receive a failing grade for the professional practice course, and even be suspended and/or receive expulsion from an academic program because of |

Correct Answer : breach of patient confidentiality

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