

Chelline Dinapo

25
30

1. Is a piece of paper required by Centers for Medicare and Medicaid Services to substantiate the necessity of an item of durable medical equipment furnished to a medicare beneficiary? (1 point)

- Certificate of Medical Need
- Certificate of Medical Necessity
- Certificate of Medical Claim
- Prescription

2. The patient's _____ contains the important information about the patient. (1 point)

- Records
- Prescription
- Face sheet
- Face book

3. A DME that would allow the patient to be transported from one place to another? (eg Wheel Chair to Bed). (1 point)

- Walker
- Patient Lift
- Stretcher
- Wheelchair

4. Our _____ department is geared towards implementing price transparency. (1 point)

- Intake
- Customer Service
- Orders
- Patient Pay

5. Can refer to items that are created for obese individuals to best suit their needs. (1 point)

- Durable Equipment
- Bariatric Equipment
- Heavy Duty Equipment
- Obese Equipment

6. What is the important element in the patient's prescription? (1 point)

- Signature of the doctor and the date for when it was created.
- Signature of the doctor and NPI number
- Signature of the doctor and the diagnosis
- Date for when it was created and diagnosis

7. How many months will the patient need to rent the equipment? (1 point)

- 10 months
- 12 months
- 14 months
- 13 months

8. The department in charge of creating and updating patient accounts. (1 point)

- Patient Pay Department
- Documentation Department
- Posting Department
- Intake Department

9. They are in-charge for processing payments, verification, adjustments and re-submission of claims from medical insurance for the medical equipment coverage. (1 point)

- Posting Department
- Medical Billing Department
- Patient Pay Department
- Documentation Department

10. The _____ department does make sure that the order and the patients demographics are in correlation (1 point)

- Documentation
- Confirmation
- Asset
- Compliance

21. This may be experienced by otherwise healthy elderly individuals or by those who have suffered head or spinal cord injuries or possibly a stroke.

- Incontinence
- Ostomy
- Stroke

22. The head section and foot section of this type of hospital bed are raised and lowered using separate hand cranks. A third crank raises and lowers the height of the bed.

- Semi - Electric Hospital Bed
- Manual Hospital Bed
- Full Electric Hospital Bed

23. This type of hospital beds have buttons that separately operate the head spring and the foot spring section and a hand crank system that changes the bed height.

- Semi - Electric Hospital bed
- Manual Hospital bed
- Full Electric Hospital bed

24. This type of hospital bed have buttons to operate the head spring section, the foot spring section and the bed height. A manual crank is provided for emergency back-up operation in the event of power failure or the failure of one of the motors.

- Semi - Electric Hospital bed
- Manual Hospital bed
- Full Electric Hospital bed

25. This medical equipment operates by continuously pulling air into to the bed and pushing it into the cells, in addition this mattress has tiny holes which allow the air to escape out.

- Gel Overlay Mattress
- Low Air Loss Mattress
- Alternating Pressure Pad

26 - 30. Please explain the following in your own words.

What is Medicare?

Medicare is the national health in US that doesn't vary in every state. It has three to consider:

- Person 60 years old and above
- PWD
- Persons with ESRD.

Also the Medicare is somewhat the same that we have here in the Philippines which is Philhealth.

What is Medicaid?

Medicaid is the ^{medical} assistance provided to those low income people.

In fact it depends per state.

For instance; if you are living in New York ^{and considered as} low income earner in that state, but when you are compared to the high income earner ^{living} in North Carolina, you are still considered as high income earner because it differs per state.

What is Deductible?

Deductible is the one that ~~they~~ must be "satisfied" or "paid first" by the patient before the insurance can cover. You need to meet first your deductible before the insurance can ~~be~~ effectively cover. ~~you~~ ~~also~~

2pts
What is the Difference between Co-insurance and Copay?

The difference between co-insurance & copay is that co-insurance is the rate (%) that was agreed with your insurer. For instance, you have to pay the 20% & the other 80% will be covered by your insurer. While copay is the one that is fixed price / the one that you have to pay like doctor's visit & prescription.

Chelline

Dinapo

7/11

1. What is/are the obligation your company has pertaining to Minimum Necessary Rules? Choose 1 or more answers. (1 point)
- Identify the person or classes of persons in it's work force who needs access to PHI.
 - For each person or class identify the category or categories of PHI to which access is needed
 - Enforce those limitations
 - Submit a list to CMS a list of persons and categories on an annual basis
2. Is HIPAA applicable only to PHI transmitted in electronic format? (1 point)
- No
 - Yes
3. Which of the following render ePHI secure under the HITECH Act. Choose 1 or more answer/s. (1 point)
- Making ePHI undreadable by unauthorized persons
 - Making ePHI unusable by authorized persons
 - Making ePHI indecipherable by unauthorized persons
 - none of the above
4. A Mortgage company is considering a loan to an oxygen patient of yours. Are you allowed to release info to that mortgage company, so that they can make a good decision on the credit worthiness of the individual? (1 point)
- Yes
 - No
5. HIPAA was established on August 21, 1994. (1 point)
- True
 - False
6. A notice of breach should be written in? (1 point)
- Plain language
 - health care phrasing
 - in formal legal language
 - None of the above
7. What does O in the acronym TPO mean? (1 point)
- Health Care Operation
 - Obligated
 - Operation
8. Which among the choices below are/is an element/s of HIPAA Compliance? Choose 1 or more answer/s. (1 point)
- Submitting Authorization Letter
 - Providing Security for this information
 - Ensure Portability of Insurance
 - Protecting Human Rights

9. As a result of the HIPAA and HITECH rules, individuals have? Choose 1 or more answer/s.

(1 point)

- An Enhanced right to request access to their protected PHI
- A right to request transmission of their PHI to a specific third party
- None of the above
- All of the above

10. Why was HIPAA created? (2 points)

2pts
 HIPAA is created to protect the security and confidentiality of the patient's information. This includes to make sure that the patient is given the enough rights to have a copy of their insurance. Also to make sure that ones it is violated, an organization or individuals are obliged to face the penalty and its consequences. Also, to ensure portability of insurance.