Vendor: AAPC

Exam Code: CPB

Exam Name: Certified Professional Biller (CPB)

Version: DEMO

QUESTION 1
What does CF stand for?

A. Civilian FactorAffairs
B. Conversion Factor
C. Clinical Factor
D. Competitive Factor

Answer: B

QUESTION 2
What is the amount owed to a business for services or goods provided?

A. Accounts Receivable
B. Accounts Payable
C. Accrued Revenue
D. Accounts Billing

Answer: A

QUESTION 3
Blue Worldwide Expat _____

A. provides global medical coverage for active employees and their dependents who spend more than three months outside the United States for three months or more is eligible for Blue World Expat.
B. provides global medical coverage for active employees and their dependents who spend more than six months outside the United States for three months or more is eligible for Blue World Expat.
C. provides global medical coverage for active employees and their dependents who spend more than three months outside the United States for six months or more is eligible for Blue World Expat.
D. provides global medical coverage for active employees and their dependents who spend more than six months outside the United States for six months or more is eligible for Blue World Expat.

Answer: D

QUESTION 4
Which part of the body does cervic refer to?

A. vagina
B. head
C. skull
D. neck

Answer: D

QUESTION 5
Ambulatory Payment Classification (APC) is prospective payment system used to calculate

reimbursement for outpatient care according to similar clinical characteristics and in terms of resources required.

A. TRUE
B. FALSE

Answer: A

QUESTION 6
Adverse Effect is also called adverse reaction; the appearance of a pathologic condition due to ingestion r exposure to a chemical substance properly administered or taken.

A. TRUE
B. FALSE

Answer: A

QUESTION 7
Billing entity is the legal business name of the provider's practice.

A. TRUE
B. FALSE

Answer: A

QUESTION 8
What does CDT stand for?

A. Comprehensive Dental Terminology
B. Current Dental Terminology
C. Conversion Dental Terminology
D. Civilian Dental Terminology

Answer: B

QUESTION 9
What does HA stand for?

A. Home Assessment
B. Healthcare Affairs
C. Healthcare Assessment
D. Health Affairs

Answer: D

QUESTION 10
Cafeteria plan is also called triple option plan; provides different health benefits plans and extra coverage options through an insure or third-party administrator.

A. TRUE
B. FALSE

Answer: A

QUESTION 11
HPSA stands for Health Personnel Shortage Area.

A. TRUE
B. FALSE

Answer: A

QUESTION 12
American Academy of Processional Coders (AAPC) is professional association established to provide a national certification and credentialing process, to support the national and local membership by providing educational products and opportunities to network, and to increase and promote national recognition and awareness of professional coding.

A. TRUE
B. FALSE

Answer: A

QUESTION 13
FELA stands for Federal Employment Liability Act.

A. TRUE
B. FALSE

Answer: A

QUESTION 14
What does HIPAA stand for?

A. Health Insurance portability and accountability Act of 1995
B. Health Insurance portability and accountability Act of 1997
C. Health Insurance portability and accountability Act of 1994
D. Health Insurance portability and accountability Act of 1996

Answer: D

QUESTION 15
Amendment to the HMO Act of 1973 is legislation that allowed federally qualified HMOs to permit members to occasionally use non HMO physicians and be partially reimbursed.

A. TRUE

B. FALSE

Answer: A

QUESTION 16
What is the coding system currently in use to report diagnoses and reasons for encounter?

A. International Classification of Diseases, 8th revision, clinical modification (ICD8CM)
B. International Classification of Diseases, 7th revision, clinical modification (ICD7CM)
C. International Classification of Diseases, 6th revision, clinical modification (ICD6CM)
D. International Classification of Diseases, 9th revision, clinical modification (ICD9CM)

Answer: D

QUESTION 17
Ambulance Fee Schedule is payment system for ambulance services provided to Medicare Beneficiaries.

A. TRUE
B. FALSE

Answer: A

QUESTION 19
Which document is mailed by the payer to the patient to illustrate the reimbrsement amount of a covered benefit?

A. Hold Harmless Clause
B. Health Insurance Claim
C. Centers of Medicare and Medicaid Services150 (CMS1500)
D. Explanation of Benefits

Answer: D

QUESTION 20
What is accreditation?

A. Voluntary Process that a healthcare facility or organization (e.g. hospital or managed care plan) undergoes to demonstrate that it has met standards beyond those required by law.
B. Involuntary Process that a healthcare facility or organization (e.g. hospital or managed care plan) undergoes to demonstrate that it has met standards beyond those required by law.

Answer: A

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