



HIPAA

Exam Questions HIO-201

Certified HIPAA Professional

NEW QUESTION 1

Security to protect information assets is generally defined as having:

- A. Controls
- B. PKI
- C. Biometrics
- D. VPN technology
- E. Host-based intrusion detection

Answer: A

NEW QUESTION 2

This final security rule standard addresses encryption of data.

- A. Security Management Process
- B. Device and Media Controls
- C. Information Access Management
- D. Audit Controls
- E. Transmission Security

Answer: E

NEW QUESTION 3

Health information is protected by the Privacy Rule as long as:

- A. The authorization has been revoked by the physician.
- B. The patient remains a citizen of the United States.
- C. The information is under the control of HHS.
- D. The information is in the possession of a covered entity.
- E. The information is not also available on paper forms.

Answer: D

NEW QUESTION 4

Select the FALSE statement regarding code sets and identifiers.

- A. The CPT-4 code set is maintained by the American Medical Association (AMA).
- B. A covered entity must use the applicable medical code set that is valid at the time the health care is delivered.
- C. The National Provider Identifier (NPI) will be assigned by the National Provider System (NPS).
- D. The Centers for Medicare and Medicaid Services is responsible for updating the HCPCScode set.
- E. The National Provider Identifier (NPI) will be assigned to health plans.

Answer: E

NEW QUESTION 5

Conducting an accurate and thorough assessment of the potential risks and vulnerabilities to the confidentiality, integrity, and availability of electronic PHI is:

- A. Risk Analysis
- B. Risk Management
- C. Access Establishment and Modification
- D. Isolating Health care Clearinghouse Function
- E. Information System Activity Review

Answer: B

NEW QUESTION 6

Signed authorization forms must be retained:

- A. Indefinitely, because the life of a signed authorization is indefinite.
- B. Six (6) years from the time it expires.
- C. For as long as the patient's records are kept.
- D. Until it is specifically revoked by the individual.
- E. Ten (10) years from the date it was signed.

Answer: B

NEW QUESTION 7

Select the FALSE statement regarding the administrative requirements of the HIPAA privacy rule.

- A. A covered entity must mitigate, to the extent practicable, any harmful effect that it becomes aware of from the use or disclosure of PHI in violation of its policies and procedures or HIPAA regulations.
- B. A covered entity must not in any way intimidate, retaliate, or discriminate against any individual or other entity, which files a complaint.
- C. A covered entity may not require individuals to waive their rights as a condition for treatment, payment, enrollment in a health plan, or eligibility for benefits.
- D. A covered entity must retain the documents required by the regulations for a period of six years.
- E. A covered entity must change its policies and procedures to comply with HIPAA regulations no later than three years after the change in law.

Answer: E

NEW QUESTION 8

This transaction type is a "response" transaction that may include information such as accepted/rejected claim, approved claim(s) pre-payment, or approved claim(s) post- payment:

- A. 270.
- B. 820
- C. 837.
- D. 277.
- E. 278.

Answer: D

NEW QUESTION 9

Maintenance personnel that normally have no access to PHI are called in to investigate water that is leaking from the ceiling of the room where a large amount of PHI is stored. The room is normally secured but the file cabinets have no doors or locks. Situations this are addressed by which Workforce Security implementation specification?

- A. Risk Management
- B. Written Contract or Other Arrangement
- C. Accountability
- D. Authorization and/or Supervision
- E. Integrity Controls

Answer: D

NEW QUESTION 10

Encryption is included as an addressable implementation specification under which security rule standard?

- A. Information Access Management
- B. Security Management Process
- C. Evaluation
- D. Transmission Security
- E. Device and Media Controls

Answer: D

NEW QUESTION 10

Implementing policies and procedures to prevent, detect, contain, and correct security violations is required by which security standard1?

- A. Security Incident Procedures
- B. Assigned Security Responsibility
- C. Access Control
- D. Facility Access Controls
- E. Security Management Process

Answer: E

NEW QUESTION 12

One implementation specification of the Security Management Process is:

- A. Risk Analysis
- B. Authorization and/or Supervision
- C. Termination Procedures
- D. Contingency Operations
- E. Encryption and Decryption

Answer: A

NEW QUESTION 14

Within the context of a transaction set, the fields that comprise a hierarchical level are referred to as a(n):

- A. Loop.
- B. Enumerator.
- C. Identifier
- D. Data segment.
- E. Code set.

Answer: A

NEW QUESTION 16

This Security Standard addresses the proper functions to be performed on a specific workstation as well as the physical attributes of its surroundings.

- A. Information Access Management

- B. Workstation Security
- C. Access Control
- D. Facility Access Controls
- E. Workstation Use

Answer: E

NEW QUESTION 21

When submitting a Health Care Claim Status Request, it is important to provide the proper tracking information to exactly identify the previously submitted claim. Select the information that would be most important to the claim inquiry process.

- A. Authorization Number
- B. Provider's National Provider Identifier (NPI)
- C. Claim Submitter home phone number
- D. Patient's lab report
- E. Provider's security PIN code

Answer: B

NEW QUESTION 24

Policies requiring workforce members to constantly run an updated anti-virus program on their workstation might satisfy which implementation specification?

- A. Risk Management
- B. Protection from Malicious Software
- C. Facility Security Plan
- D. Response and Reporting
- E. Emergency Access Procedure

Answer: B

NEW QUESTION 29

Periodic testing and revision of contingency plans is addressed by:

- A. Testing and Revision Procedures
- B. Information System Activity Review
- C. Response and Reporting
- D. Data Backup Plan
- E. Emergency Access Procedure

Answer: A

NEW QUESTION 33

One mandatory requirement for the Notice of Privacy Practices set by HIPAA regulations is:

- A. If the notice must state that the covered entity reserves the right to disclose PHI without obtaining the individuals authorization.
- B. The notice must prominently include an expiration date.
- C. The notice must describe every potential use of PHI
- D. The notice must describe an individual's rights under the rule such as to inspect, copy and amend PHI and to obtain an accounting of disclosures of PHI
- E. The notice must clearly identify that the covered entity is in compliance with HIPAA regulations as of April 16,2003

Answer: D

NEW QUESTION 37

One implementation specification of a contingency plan is:

- A. Risk analysis
- B. Applications and Data Criticality Analysis
- C. Risk Management
- D. Integrity Controls
- E. Encryption

Answer: B

NEW QUESTION 42

This code set is used to describe or identify radiological procedures and clinical laboratory tests:

- A. ICD-9-CM, Volumes 1 and 2.
- B. CPT-4.
- C. CDT.
- D. ICD-9-CM, Volume 3.
- E. HCPCS.

Answer: E

NEW QUESTION 43

Some of the information that an authorization must include is:

- A. The date on which any automatic extension occurs.
- B. Covered entity's signature.
- C. A statement that federal privacy laws still protect the information after it is disclosed.
- D. A statement that the individual has no right to revoke the authorization.
- E. The date signed.

Answer: E

NEW QUESTION 48

The implementation specifications for this HIPAA security standard (within Technical Safeguards) must support emergency access and unique user identification:

- A. Audit Control
- B. Integrity
- C. Access Control
- D. Person or Entity Authentication
- E. Transmission Security

Answer: C

NEW QUESTION 50

The National Provider File (NPF) includes information such as:

- A. Effective date.
- B. CPT-4.
- C. CDT.
- D. ICD-9-CM.
- E. Enrollment date.

Answer: A

NEW QUESTION 51

This implementation specification might include actions such as revoking passwords, and collecting keys

- A. Sanction Policy
- B. access Authorization
- C. Facility Security Plan
- D. Termination Procedures
- E. Unique User Identification

Answer: D

NEW QUESTION 54

The transaction number assigned to the Payment Order/Remittance Advice transaction is:

- A. 270
- B. 835
- C. 278
- D. 820
- E. 834

Answer: D

NEW QUESTION 59

Security reminders, using an anti-virus program on workstations, keeping track of when users log-in and out, and password management are all part of:

- A. Security Incident Procedures
- B. Information Access Management
- C. Security Awareness and Training
- D. Workforce Security
- E. Security Management Process

Answer: C

NEW QUESTION 60

A hospital is preparing a file of treatment information for the state of California. This file is to be sent to external medical researchers. The hospital has removed SSN, name, phone and other information that specifically identifies an individual. However, there may still be data in the file that potentially could identify the individual. Can the hospital claim "safe harbor" and release the file to the researchers?

- A. Yes - the hospital's actions satisfy the "safe harbor" method of de-identification.
- B. No - a person with appropriate knowledge and experience must determine that the information that remains can't identify an individual.
- C. No - authorization to release the information is still required by HIPAA
- D. No - to satisfy "safe harbor" the hospital must also have no knowledge of a way to use the remaining data to identify an individual.
- E. Yes - medical researchers are covered entities and "research" is considered a part of "treatment" by HIPAA.

Answer: D

NEW QUESTION 65

As part of their HIPAA compliance process, a small doctor's office formally puts the office manager in charge of security related issues. This complies with which security rule standard?

- A. Security Awareness and Training
- B. Security Management Process
- C. Access Control
- D. Assigned Security Responsibility
- E. Security Incident Procedures

Answer: D

NEW QUESTION 66

Select the correct statement regarding the requirements of HIPAA regulations.

- A. A covered entity must have and apply sanction against members of its workforce who fail to comply with the privacy policies and procedures of the covered entity)
- B. A covered entity does not need to train all members of its workforce whose functions are affected by a change in policy or procedure.
- C. A covered entity must designate, and document, a privacy officer, and a HIPAA compliance officer
- D. A covered entity may require individuals to waive their rights.
- E. A covered entity must require the individual to sign the Notice of Privacy Practices prior to delivering any treatment related service.

Answer: A

NEW QUESTION 69

Which transaction covers information specific to accidents?

- A. Accident Report.
- B. First Report of Injury.
- C. Health Care Claim.
- D. Health Care Claim Payment/Advice.
- E. Premium Payment.

Answer: B

NEW QUESTION 72

ANSI ASC X12 is the standard for:

- A. Security requirements.
- B. Privacy requirements.
- C. Is another name for the Security Rule.
- D. Representation of all health care claims.
- E. Encrypting all information for use over a PKI.

Answer: D

NEW QUESTION 74

A business associate:

- A. Requires PKI for the provider and the patient.
- B. Is electronically stored information about an individual's lifetime health status and healthcare.
- C. Is another name for an HMO.
- D. Identifies all non-profit organizations.
- E. Is a person or an entity that on behalf of the covered entity performs or assists in the performance of a function or activity invoking the use or disclosure of health-related information.

Answer: E

NEW QUESTION 79

This requires records of the movement of hardware and electronic media that contain PHI.

- A. Business Associate Contract
- B. Data Backup Plan
- C. Media Re-use
- D. Disposal
- E. Accountability

Answer: E

NEW QUESTION 80

Select the correct statement regarding the administrative requirements of the HIPAA privacy rule.

- A. A covered entity must apply disciplinary sanctions against members of its workforce who fail to comply with the privacy policies and procedures of the covered entity.
- B. A covered entity need not train all members of its workforce whose functions are materially affected by a change in policy or procedure.
- C. A covered entity must designate, and document, a contact person responsible for receiving acknowledgements of Notice of Privacy Practice.

- D. A covered entity may require individuals to waive their rights.
- E. A covered entity must provide maximum safeguards for PHI from any intentional or unintentional use or disclosure that is in violation of the regulations and to limit incidental uses and disclosures made pursuant to permitted or required use or disclosure.

Answer: A

NEW QUESTION 84

Processes enabling an enterprise to restore any lost data in the event of fire, vandalism, natural disaster, or system failure are defined under:

- A. Risk Analysis
- B. Contingency Operations
- C. Emergency Mode Operation Plan
- D. Data Backup Plan
- E. Disaster Recover Plan

Answer: E

NEW QUESTION 85

Which of the following was not established under the Administrative Simplification title?

- A. National PKI Identifier.
- B. National Standard Health Care Provider Identifier.
- C. National Standard Employer Identifier.
- D. Standards for Electronic Transactions and Code Sets.
- E. Security Rule.

Answer: A

NEW QUESTION 88

The Security Incident Procedures standard requires just one implementation specification. That implementation specification is:

- A. Termination Procedures
- B. Automatic Logoff
- C. Emergency Access Procedure
- D. Contingency Operations
- E. Response and Reporting

Answer: E

NEW QUESTION 93

A health care clearinghouse is an entity that:

- A. Requires PKI for the provider and the patient.
- B. Is exempt from HIPAA regulations.
- C. Is a not-for-profit operation.
- D. Identifies all hospitals and health care organizations.
- E. Performs the functions of format translation and data conversion.

Answer: E

NEW QUESTION 98

Policies and procedures that address the final disposition of electronic PHI (including the media on which is stored) is address by this required implementation specification.

- A. Media Re-use
- B. Termination Procedures
- C. Risk Management
- D. Maintenance Records
- E. Disposal

Answer: E

NEW QUESTION 99

The scope of the Privacy Rule includes:

- A. All Employers.
- B. The Washington Publishing Company
- C. Disclosure of non-identifiable demographics.
- D. Oral disclosure of PHI.
- E. The prevention of use of de-identified information.

Answer: D

NEW QUESTION 101

To comply with the Final Privacy Rule, a valid Notice of Privacy Practices:

- A. Is required for all Business Associate Contracts.
- B. Must always be associated with a valid authorization.
- C. Must be signed before providing treatment to a patient.
- D. Must be associated with a valid Business Associate Contract.
- E. Must describe the individual's rights under the Privacy Rule.

Answer: E

NEW QUESTION 104

Select the best statement regarding the definition of the term "use" as used by the HIPAA regulations.

- A. "Use" refers to the release, transfer, or divulging of IIHI between various covered entities
- B. "Use" refers to adding, modifying and deleting the PHI by other covered entities.
- C. "Use" refers to utilizing, examining, or analyzing IIHI within the covered entity
- D. "Use" refers to the movement of de-identified information within an organization.
- E. "Use" refers to the movement of information outside the entity holding the information

Answer: C

NEW QUESTION 105

Select the FALSE statement regarding the transaction rule.

- A. The Secretary is required by statue to Impose penalties of at least \$100 per violation on any person or entity that fails to comply with a standard except that the total amount imposed on any one person in each calendar year may not exceed \$1,000.000 for violations of one requirement
- B. Health plans are required to accept all standard transactions.
- C. Health plans may not require providers to make changes or additions to standard transactions
- D. Health plans may not refuse or delay payment of standard transactions.
- E. If additional information is added to a standard transaction it must not modify the definition, condition, intent, or use of a data element

Answer: A

NEW QUESTION 109

Workstation Use falls under which Security Rule area?

- A. Person or Entity Authentication
- B. Technical Safeguards
- C. Administrative Safeguards
- D. Physical Safeguards
- E. Transmission Security

Answer: D

NEW QUESTION 113

The transaction number assigned to the Health Care Claim Payment/Advice transaction is:

- A. 270
- B. 276
- C. 834
- D. 835
- E. 837

Answer: D

NEW QUESTION 115

The code set that must be used to describe or identify outpatient physician services and procedures is:

- A. ICD-9-CM, Volumes 1 and 2
- B. CPT-4
- C. CDT
- D. ICD-9-CM, Volume 3
- E. NDC

Answer: B

NEW QUESTION 118

HIPAA defines transaction standards for:

- A. Encrypted communication between patient and provider.
- B. All patient events.
- C. Security.
- D. Benefits inquiry.
- E. Emergency treatment.

Answer: D

NEW QUESTION 122

When limiting protected health information (PHI) to the minimum necessary for a use or disclosure, a covered entity can use:

- A. Their professional judgment and standards.
- B. The policies set by the security rule for the protection of the information.
- C. Specific guidelines set by WEDI.
- D. Measures that are expedient and reduce costs.
- E. The information for research and marketing purposes only.

Answer: A

NEW QUESTION 126

The Privacy Rule gives patients the following right:

- A. Access to the psychotherapy notes.
- B. Request an amendment to their medical record.
- C. Receive a digital certificate.
- D. See an accounting of disclosures for which authorization was given.
- E. The use of a smart card for accessing their records.

Answer: B

NEW QUESTION 128

Select the correct statement regarding code sets and identifiers.

- A. The social security number has been selected as the National Health Identifier for individuals.
- B. The COT code set is maintained by the American Medical Association.
- C. Preferred Provider Organizations (PPO) are not covered by the definition of "health plan" for purposes of the National Health Plan Identifier
- D. HIPAA requires health plans to accept every valid code contained in the approved code sets
- E. An important objective of the Transaction Rule is to reduce the risk of security breaches through identifiers.

Answer: D

NEW QUESTION 129

HPAA establishes a civil monetary penalty for violation of the Administrative Simplification provisions. The penalty may not be more than:

- A. \$1,000,000 per person per violation
- B. \$10 per person per violation
- C. \$10,000 per person per violation
- D. \$100 per person per violation
- E. \$1000 per person per violation

Answer: D

NEW QUESTION 130

Select the correct statement regarding the requirements for oral communication in the HIPAA regulations.

- A. Covered entities must reasonably safeguard PHI, including oral communications, from any intentional or unintentional use or disclosure that is in violation of the Privacy Rule.
- B. Covered entities must have in place appropriate administrative, technical, and physical safeguards to protect the privacy of de-identified data.
- C. Covered entities are prohibited from marketing through oral communications
- D. The Privacy Rule requires covered entities to document any information, including oral communications, which is used or disclosed for TPO purposes.
- E. The Privacy Rule will often require major structural changes, such as soundproof rooms and encryption of telephone systems, to provide the "reasonable safeguards" of oral communications required by the regulations

Answer: A

NEW QUESTION 134

The Security Rule requires that the covered entity identifies a security official who is responsible for the development and implementation of the policies and procedures. This is addressed under which security standard?:

- A. Security Incident Procedures
- B. Response and Reporting
- C. Assigned Security Responsibility
- D. Termination Procedures
- E. Facility Access Controls

Answer: C

NEW QUESTION 138

Which of the following is NOT a correct statement regarding HIPAA requirements?

- A. A covered entity must change its policies and procedures to comply with HIPAA regulations, standards, and implementation specifications.
- B. A covered entity must reasonably safeguard PHI from any intentional or unintentional use or disclosure that is in violation of the regulations.
- C. A covered entity must provide a process for individuals to make complaints concerning privacy issues.
- D. A covered entity must document all complaints received regarding privacy issues.
- E. The Privacy Rule requires that the covered entity has a documented security policy.

Answer: E

NEW QUESTION 143

In addition to code sets, HIPAA transactions also contain:

- A. Security information such as a fingerprint.
- B. Privacy information.
- C. Information on all business associates.
- D. Information on all health care clearinghouses.
- E. Identifiers.

Answer: E

NEW QUESTION 148

Individually identifiable health information (IIHI) includes information that is:

- A. Transmitted to a business associate for payment purposes only.
- B. Stored on a smart card only by the patient.
- C. Created or received by a credit company that provided a personal loan for surgical procedures.
- D. Created or received by a health care clearinghouse for claim processing.
- E. Requires the use of biometrics for access to records.

Answer: D

NEW QUESTION 150

Conducting an accurate and thorough assessment of the potential risks and vulnerabilities to the confidentiality, integrity, and availability of electronic PHI is:

- A. Risk Analysis
- B. Risk Management
- C. Access Establishment and Modification
- D. Isolating Health care Clearinghouse Function
- E. Information System Activity Review

Answer: A

NEW QUESTION 152

This HIPAA security area addresses the use of locks, keys and procedures used to control access to computer systems:

- A. Administrative Safeguards
- B. Physical Safeguards
- C. Technical Safeguards
- D. Audit Controls
- E. Information Access Management

Answer: B

NEW QUESTION 154

Which of the following is a required implementation specification associated with the Contingency Plan Standard?

- A. Integrity Controls
- B. Access Control and Validation Procedures
- C. Emergency Mode Operation
- D. Plan Response and Reporting
- E. Risk Analysis

Answer: C

NEW QUESTION 159

A pharmacist is approached by an individual and asked a question about an over-the-counter medication. The pharmacist needs some protected health information (PHI) from the individual to answer the question. The pharmacist will not be creating a record of this interaction. The Privacy Rule requires the pharmacist to:

- A. Verbally request 3 consent and offer a copy of the Notice of Privacy Practices.
- B. Verbally request specific authorization for the PHI.
- C. Do nothing more.
- D. Obtain the signature of the patient on their Notice of Privacy Practices.
- E. Not respond to the request without an authorization from the primary physician.

Answer: C

NEW QUESTION 161

Which of the following is not one of the HIPAA Titles?:

- A. Title IX: Employer sponsored group health plans.
- B. Title III: Tax-related Health Provisions.

- C. Title II: Administrative Simplification.
- D. Title I: Health Care Insurance Access, Portability, and Renewability.
- E. Title V: Revenue Offsets.

Answer: A

NEW QUESTION 164

This code set describes drugs:

- A. ICD-9-C
- B. Volumes 1 and 2.
- C. CPT-4.
- D. CDT.
- E. ICD-9-C
- F. Volume 3.
- G. NDC.

Answer: E

NEW QUESTION 167

Select the correct statement regarding the "Minimum Necessary" standard in the HIPAA regulations.

- A. In some circumstances a covered entity is permitted, but not required, to rely on the judgment of the party requesting the disclosure as to the minimum amount of information necessary for the intended purpose.
- B. Some examples of these requesting parties are: another covered entity or a public official.
- C. The privacy rule prohibits use, disclosure, or requests for an entire medical record.
- D. Non-Covered entities need to redesign their facility to meet the requirement for minimum necessary uses.
- E. The minimum necessary standard requires covered entities to prohibit maintenance of medical charts at bedside and to require that X-ray light boards be totally isolated.
- F. If there is a request for more than the minimum necessary PHI, the privacy rule requires a covered entity to deny the disclosure of information after recording the event in the individual's case file.

Answer: A

NEW QUESTION 172

The Privacy Rule interacts with Federal and State laws by:

- A. Establishing an orderly hierarchy where HIPAA applies, then other Federal law, then State law.
- B. Defining privacy to be a national interest that is best protected by Federal law.
- C. Allowing State privacy laws to provide a cumulative effect lower than HIPAA.
- D. Mandating that Federal laws preempt State laws regarding privacy.
- E. Establishing a "floor" for privacy protection.

Answer: E

NEW QUESTION 177

Select the correct statement regarding the definition of the term "disclosure" as used in the HIPAA regulations.

- A. "Disclosure" refers to employing IIHI within a covered entity.
- B. "Disclosure" refers to utilizing, examining, or analyzing IIHI within a covered entity.
- C. "Disclosure" refers to the release, transfer, or divulging of IIHI to another covered entity.
- D. "Disclosure" refers to the movement of information within an organization.
- E. "Disclosure" refers to the sharing of information within the covered entity.

Answer: C

NEW QUESTION 182

This transaction supports multiple functions. These functions include: telling a bank to move money OR telling a bank to move money while sending remittance information:

- A. 277.
- B. 278.
- C. 271.
- D. 82.
- E. 270.

Answer: D

NEW QUESTION 184

Select the correct statement regarding the 834 - Benefit Enrollment and Maintenance transaction.

- A. It cannot be used to transfer enrollment information from a plan sponsor to a health care insurance company or other benefit provider.
- B. It can be used by a health insurance company to notify a plan sponsor that it has dropped one of its members.
- C. It cannot be used to enroll, update, or dis-enroll employees and dependents in a health plan.
- D. A sponsor can be an employer, insurance agency, association or government agency but unions are excluded from being plan sponsors.
- E. It can be used in either update or full replacement mode.

Answer: E

NEW QUESTION 189

Select the correct statement regarding code sets and identifiers.

- A. A covered entity must use the applicable code set that is valid at the time the transaction is initiated.
- B. April 14, 2003 is the compliance date for implementation of the National Provider Identifier.
- C. CMS is responsible for updating the CPT-4 code set.
- D. An organization that assigns NPIs is referred to as National Provider for Identifiers.
- E. HHS assigns the Employer Identification Number (EIN), which has been selected as the National Provider Identifier for Health Care.

Answer: A

NEW QUESTION 193

The Final Privacy Rule requires a covered entity to obtain an individual's prior written authorization to use his or her PHI for marketing purposes except for:

- A. Situations where the marketing is for a drug or treatment could improve the health of that individual.
- B. Situations where the patient has already signed the covered entity's Notice of Privacy Practices.
- C. A face-to-face encounter with the sales person of a company that provides drug samples
- D. A communication involving a promotional gift of nominal value.
- E. The situation where the patient has signed the Notice of Privacy Practices of the marketer.

Answer: D

NEW QUESTION 195

The objective of this document is to safeguard the premises and building from unauthorized physical access and to safeguard the equipment therein from unauthorized physical access, tampering and theft

- A. Contingency Plan
- B. Facility Security Plan
- C. Emergency Mode Operation Plan
- D. Accountability
- E. Device and Media Controls

Answer: B

NEW QUESTION 197

This transaction is typically used in two modes: update and full replacement:

- A. Premium Payment.
- B. Health Care Claim.
- C. First Report of Injury.
- D. Health Plan Enrollment and Dis-enrollment.
- E. Coordination of Benefits.

Answer: D

NEW QUESTION 201

The transaction number assigned to the Benefit Enrollment and Maintenance transaction is:

- A. 270
- B. 276
- C. 278
- D. 280
- E. 834

Answer: E

NEW QUESTION 204

This Administrative Safeguard standard implements policies and procedures to ensure that all members of its workforce have appropriate access to electronic information.

- A. Security Awareness Training
- B. Workforce Security
- C. Facility Access Controls
- D. Workstation Use
- E. Workstation Security

Answer: B

NEW QUESTION 209

The applicable methods for HIPAA-related EDI transactions are:

- A. Remote and enterprise.
- B. Claim status and remittance advice.

- C. Subscriber and payer
- D. Batch and real-time.
- E. HCFA-1500and837.

Answer: D

NEW QUESTION 210

Select the correct statement regarding the Notice of Privacy Practices.

- A. The Notice must be signed before a State authorized notary
- B. Direct Treatment Providers must make a good faith effort to obtain patient's written acknowledgement of Notice of Privacy Practices.
- C. Organizations may not have a "layered" Notice - a short, summary Notice preceding the more detailed Notice.
- D. Authorization forms are mandatory for the Notice to be valid
- E. An individual must sign an authorization before a state authorized notary.

Answer: B

NEW QUESTION 212

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