Essentials of Health Information Management 5th edition Bowie Test Bank

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Name:_____ Class:_____ Date:_____

Chapter 01: Health Care Delivery Systems

1. Prehistoric medicine and ancient medicine were characterized by an interest in the arts and sciences.
   a. True
   b. False

ANSWER: False

2. The American College of Surgeons (ACS) improved the quality of care for surgical patients by establishing standards for surgical education and practice.

   a. True
   b. False

ANSWER: True

3. The continuum of care is a complete range of programs and services with the type of health care indicating the health care services provided.

   a. True
   b. False

ANSWER: True

4. The hospital administration serves as liaison between the medical staff and the patients.
   a. True
   b. False

ANSWER: False

5. Individual state laws require health care facilities to obtain licenses to operate from state departments of health.

   a. True
   b. False

ANSWER: True

6. Describe the functions of a compliance committee.

ANSWER: A compliance committee monitors standards of conduct, offers educational programs, implements sanctions for noncompliance, and maintains a confidential integrity hotline to report concerns about possible legal and ethical violations.

7. Distinguish between functions of a facility's risk management committee and utilization management committee.

ANSWER: The function of the risk management committee is to coordinate and monitor risk management activities such as analyzing trends of incidents and establishing priorities for dealing with high-risk areas, with a goal of ensuring patient safety. The function of the utilization management committee is to monitor the appropriate use of resources in providing patient care.

8. Describe the role of the category of active medical staff.

ANSWER: The role of the active medical staff is to deliver hospital medical services and perform significant organizational and administrative medical staff duties.

9. Differentiate between the credentials committee of the medical staff and the ethics committee of the medical staff.

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ANSWER: The credential committee reviews and verifies medical staff application data, whereas the ethics committee reviews and discusses ethical problems.

10. Describe the medical specialty of internal medicine and primary care internal medicine and list four subspecialties that are included in the specialty of internal medicine.

ANSWER: Internal medicine can be described as the management of common and complex illnesses of patients of all ages (e.g., cancer; infections; and diseases of blood, digestive, heart, joints, kidneys, respiratory, and vascular systems). Primary care internal medicine includes disease prevention, mental health, substance abuse, and wellness. The student can list any of the following subspecialties:
Adolescent medicine
Cardiovascular medicine
Critical care medicine
Electrophysiology
Endocrinology
Gastroenterology
Geriatrics
Hematology
Immunology
Infectious disease
Nephrology
Oncology
Pulmonary medicine
Rheumatology
Sports medicine

11. Explain the purpose of the Joint Commission.

ANSWER: The purpose of the Joint Commission is to offer and maintain accreditation programs for health care organizations and to provide organizations with standards, performance improvement tools, and an external evaluation of performance.

12. Explain the term quaternary care.

ANSWER: Quaternary care is considered an extension of tertiary care and includes advanced levels of medicine that are highly specialized, not widely used, and very costly. It can include types of experimental medicine.

13. Describe the evolution of the health care system from the early prehistoric period to the present.

ANSWER: Health care was nearly nonexistent in prehistoric and ancient times and was characterized by the belief that illness resulted from supernatural causes. During the Middle Ages, medieval medicine was characterized by a lack of education and was often managed by religious organizations. Modern medicine developed during the Renaissance, as medicine began to be based on education instead of spiritual beliefs. During the 17th and 18th centuries, medicine was characterized by the implementation of standards for sanitation, ventilation, hygiene, and nutrition. During the 18th, 19th, and 20th centuries, scientific knowledge increased rapidly with greater education in the medical field.

14. The Joint Commission's approach to accreditation is _____ and data driven.

ANSWER: patient centered

15. Quaternary care is provided most commonly at _____ centers.

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ANSWER: tertiary care

16. The abbreviation HITECH Act means _____ Act.

ANSWER: Health Information Technology for Economic and Clinical Health

17. Regulations that govern privacy, security, and electronic transactions for health care information were mandated by the _____ Act.

ANSWER: Health Insurance Portability and Accountability

18. The Health Care Financing Administration, now known as _____, was created to manage the Medicare and Medicaid programs.

ANSWER: the Centers for Medicare and Medicaid Services

19. Benjamin Franklin established the first United States hospital, known as the _____ Hospital.
ANSWER: Pennsylvania

20. Louis Pasteur and Robert Koch established the microbial, or _____, theory of disease.
ANSWER: germ

21. During the Middle Ages, the most significant medical development was _____.
ANSWER: The construction of hospitals

22. Which of the following is a secondary care service?
a. Annual physical examination
b. Family planning
c. Hysterectomy
d. Vision and hearing screening

ANSWER: c

23. A hospital that is owned by a proprietary organization such as a commercial corporation is a for-profit facility. A hospital that is government owned is a _____ facility.
ANSWER: Non profit

24. A primary care provider has examined a patient's eye and determined that the patient has a suspicious area on the cornea. This provider refers the patient to an eye specialist in the field of
a. urology.
b. dermatology.
c. gynecology
d. ophthalmology.

ANSWER: d

25. A for profit organization is described as _____.
a. Privately owned
b. Government owned

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c. Solely a teaching hospital
d. Solely for veterans' care

ANSWER: a

26. An interpretation of a law as written by a government agency such as CMS is called a(n) _____.
ANSWER: regulation

27. Describe the work of the 1990 Human Genome Project.
ANSWER: This was a nationally coordinated effort to characterize all human genetic material by determining the complete sequence of the DNA in the human genome. In 2000, human genome sequencing was published.

28. Describe the difference between a for profit and not for profit health care facility.
ANSWER: A facility may be for-profit (privately owned and excess income is distributed to share-holders and owners) or not-for-profit (excess income is reinvested in the facility) and categorized according to:
- Government (not-for-profit)
- Proprietary (for-profit)
- Voluntary (not-for-profit)

29. Most hospitals in the United States are operated by religious or other charitable groups. These facilities are considered _____ hospitals.
a. proprietary
b. teaching
c. voluntary
d. government

ANSWER: c

30. A physician examines a patient in the office and completes a history and physical exam for the treatment of an upper respiratory infection. This same physician writes a prescription for antibiotics and instructs the patient to return to the office in 10 to 14 days. This is classified as a(n) ____ care service.
a. tertiary
b. acute
c. primary
d. secondary

ANSWER: c

31. Which joint state and federal program(s) assist(s) with medical costs for those with low incomes and limited resources?
a. Medicaid
b. Medicare
c. Medicaid and Medicare
d. Title 18 of the Social Security Amendment of 1965

ANSWER: a

32. Which organization currently provides voluntary accreditation of health care organizations?

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a. ACS
b. AMA
c. World Health Organization
d. The Joint Commission

ANSWER: d

33. Who used a microscope to discover certain microbes that later became known as bacteria?
a. Pasteur
b. Leeuwenhoek
c. Koch
d. Jenner

ANSWER: b

34. Which committee ensures patient safety by analyzing trends of incidents and establishing priorities for dealing with high-risk areas?
a. Safety
b. Utilization review
c. Risk management
d. Disaster control

ANSWER: c

35. Which coding system is used in the United States to collect information about diseases and injuries and to classify diagnoses and procedures?
a. ICD-10-CM/ICD-10-PCS
b. HCPCS
c. CPT
d. CDT

ANSWER: a

36. Which hospital department directs the facility-wide program that monitors standards of conduct, implements sanctions for noncompliance, and maintains a confidential integrity hot line?
a. Compliance
b. Ethics
c. Human resources
d. Quality management

ANSWER: a

37. The National Practitioner Data Bank (NPDB) was established by the

a. Hospital Standardization Program.
b. Health Insurance Portability and Accountability Act.
c. Health Care Quality Improvement Act.
d. Consolidated Omnibus Budget Reconciliation Act.

ANSWER: c

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38. Which organization was founded to improve the quality of care for surgical patients by establishing standards for surgical education and practice?
    a. American Medical Association
    b. American Hospital Association
    c. American College of Surgeons
    d. National Medical Association

ANSWER: c

39. Which is an example of tertiary care?
    a. Immunization
    b. Vaccination
    c. Burn Center Treatment
    d. Participating in Drug Trials

ANSWER: c

40. A doctor who performs surgical procedures on the organs of the chest area is a _____.
    a. Colo Rectal Surgeon
    b. General Surgeon
    c. Thoracic Surgeon
    d. Plastic Surgeon

ANSWER: c

41. To advance the health of individuals and communities, hospitals and health care networks are represented by the
    a. American Medical Association.
    b. American College of Surgeons.
    c. National Medical Association.
    d. American Hospital Association.

ANSWER: d

42. The provisions of the Hill-Burton Act, implemented in response to hospitals needing federal aid after the Great Depression and World War II, included _____
    a. Creation of the CDC
    b. Provision of care for veterans.
    c. Requirement to care for those unable to pay
    d. Inexpensive loans for new equipment

ANSWER: c

43. Which medical staff membership category includes physicians who deliver most of a hospital's inpatient medical services?
    a. Active
    b. Associate
    c. Consulting
    d. Honorary

ANSWER: a

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44. Medical staff members are granted clinical privileges by the _____.
a. chief executive officer.
b. chief of medical services.
c. governing board.
d. medical staff.

ANSWER: c

45. Electronic Health Records access is limited to facility members on a _____ basis.
a. Need - to - know
b. First come first serve
c. Limited to department
d. Unlimited for facility member

ANSWER: a

46. Which identifier measures an individual's unique physical characteristics or behavior and compares it to a stored digital template to authenticate the identity of the individual?
a. Biometrics
b. Digital signature
c. Electronic signature
d. Smart card

ANSWER: a

47. A patient fell and broke her arm. Her fracture would most likely be treated by _____.
a. an orthopedic specialist
b. a plastic surgery
c. a general surgeon
d. an internal medicine provider

ANSWER: a

48. Jordan has developed a draft strategic plan for Sunny Valley Hospital and will present the plan at the hospital board of trustees meeting next month. Jordan's role at Sunny Valley is most likely
a. chairperson of the board.
b. chief executive officer.
c. chief information officer.
d. chief operating officer.

ANSWER: b

49. The facility staff member who Kai reviews inpatient admissions to assess patients who may require post hospital services on discharge. Kai works for the _____.

a. case management department.
b. compliance department.
c. admissions office.
d. business office.

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ANSWER: a

50. The assembly and analysis of discharged patient records is called _____ .
    a. incomplete record processing.
    b. universal chart ordering.
    c. coding.
    d. abstracting.

ANSWER: a

51. The Medicaid Integrity Program, a fraud and abuse detection program, was established by the
    a. Hill-Burton Act.
    b. Genetic Information Nondiscrimination Act.
    c. American Recovery and Reinvestment Act.
    d. Deficit Reduction Act.

ANSWER: d

52. Which of the following encourages the reporting of health care mistakes to patient safety organizations by making the reports confidential and providing a shield from their use in civil and criminal proceedings?
    a. Patient Safety and Quality Improvement
    b. Deficit Reduction Act
    c. Tax Relief and Health Care Act of 2006
    d. Genetic Information Nondiscrimination Act

ANSWER: a

53. ICD-10-PCS is the used for the purpose of _____.

ANSWER: A. reporting diagnoses
B. reporting provider identification
C. reporting inpatient procedures
D. reporting provision of supplies

54. The National Hospital Quality Measures are standardized measures that are a created in collaboration between The Joint Commision and _____.
    a. AHIMA
    b. AMA
    c. CMS
    d. WHO

ANSWER: c

55. Which of the following authorized the implementation of a PQRI that established a financial incentive for eligible professionals who participate in a voluntary quality reporting program?
    a. Deficit Reduction Act of 2005
    b. HITECH Act
    c. Patient Safety and Quality Improvement Act
    d. Tax Relief and Health Care Act of 2006

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ANSWER: d

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