HIPAA for Health Care Professionals 2nd edition Krager Test Bank

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Test Bank Chapter 1: Introduction to HIPAA

True/False
Indicate whether the statement is true or false.

____ 1. With the passage of HIPAA, large health care providers would be treated with faster service since their volume of claims is larger than small rural providers.

ANS: F
The intent of HIPAA is to ensure that all providers are treated equally.

____ 2. There is a 24-month grace period after the effective date for the HIPAA rules before a covered entity must comply with the ruling.

ANS: T
Once a final ruling has been issued, there is a 24-month period before the ruling becomes enforceable.

____ 3. The Department of Health and Human Services (DHHS) is responsible to notify all health care providers of changes in the HIPAA rulings.

ANS: F
Each covered entity is responsible to be informed and compliant with HIPAA rules. The HIPAA Officer is the person to keep abreast of changes in the law.

____ 4. Privacy Rule covers disclosure of protected health information (PHI) in any form or media.

ANS: T
The Privacy Rule covers any form of health information.

____ 5. Health care professionals have generally found that HIPAA has simplified claims submissions.

ANS: T
HIPAA has standardized all claims transactions, replacing unique formats for each health plan.

____ 6. An employer who has fewer than 50 employees and is self-insured is a covered entity.

ANS: F
There is an exception for employers who are self-insured and provide for their employees' health costs.

____ 7. Home help personnel, taxicab companies, and carpenters may fit the definition of a covered entity.

ANS: T
When these entities provide and bill for health care services, they fit the definition of a covered entity.

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____ 8. Only clinical staff need to understand HIPAA.

ANS: F
Anyone who is exposed to PHI in the course of a job at a health care facility must abide by HIPAA.

____ 9. Written policies are a responsibility of the HIPAA Officer.

ANS: T
HIPAA Officers are responsible to see that policies are written for each department of their facilities.

____ 10. Privacy of PHI and security of PHI are the same thing.

ANS: F
Privacy covers any PHI in any format. Security involves only electronic PHI (e-PHI).

Multiple Choice
Identify the choice that best completes the statement or answers the question.

____ 11. PHI (protected health information) is
a. any information that associates an individual with a diagnosis.
b. health information created or received by a covered entity.
c. health information related to a physical or mental condition.
d. all of the above.

ANS: A

____ 12. Choose the correct acronym for Public Law 104-91.
a. HIPO
b. HIPPA
c. HIPAA
d. HIPPO

ANS: C

____ 13. Under HIPAA, providers may choose to submit claims either on paper or electronically.
a. True
b. False
c. Sometimes
d. It depends whether they are a small or large provider

ANS: D

____ 14. What government agency approves final rules released in the *Federal Register*?
a. Department of Education
b. Department of Interior
c. Centers for Disease Control and Prevention
d. Department of Health and Human Services

ANS: D

____ 15. Which group is the focus of Title I of HIPAA ruling?
a. Health care providers
c. The insured

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b. Health plans
d. Health care clearinghouses

ANS: B

____ 16. What is a major point of the Title I portion of HIPAA?
a. Guarantee of renewability
b. Preventing fraud and abuse
c. Liability reform
d. Administrative simplification

ANS: A

____ 17. Which group is the focus of Title II of HIPAA ruling?
a. Health care providers
b. Health plans
c. Health care clearinghouses
d. Medicare and Medicaid programs

ANS: A

____ 18. Which is *not* a responsibility of the HIPAA Officer?
a. Training staff members on HIPAA law
b. Being informed of any changes to HIPAA law
c. Ensuring all wastepaper is shredded
d. Safeguarding the security of clinical records

ANS: D

____ 19. Industry-wide standards for health claims bring simplification because
a. all transactions are the same format.
b. any payer will accept claims.
c. neither A nor B.
d. both A and B.

ANS: D

____ 20. Which group is *not* one of the three covered entities?
a. Patients
b. Health care plans
c. Health care clearinghouses
d. Health care providers

ANS: A

____ 21. The Privacy Rule for PHI states
a. who has been issued unique identifiers.
b. when authorization is needed.
c. when passwords need to be changed.
d. how to handle electronic PHI.

ANS: B

____ 22. What type of health information does the Security Rule address?
a. Paper medical files
b. Only the financial records of patients
c. The list of benefits and payments for services by health plans
d. Electronic PHI held by a covered entity

ANS: D

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____ 23. Which department would need to help the Security Officer most?

a. Nursing staff
b. Maintenance Department
c. Medical Records
d. Information Services and Technology

ANS: D

____ 24. COBRA (Consolidated Omnibus Budget Reconciliation Act of 1985) helps workers who have coverage with a

a. managed care organization.
b. group health plan.
c. fee-for-service plan.
d. Medicaid.

ANS: B

____ 25. Medical Savings Account (now Health Savings Account) is a means to shelter funds from taxes to pay for

a. premiums only.
b. yearly IRS tax liability.
c. only hospital bills.
d. medical expenses.

ANS: D

____ 26. PHI has been defined in HIPAA by

a. DHHS (Department of Health and Human Services).
b. CDC (Centers for Disease Control and Prevention).
c. CMS (Centers for Medicare and Medicaid Services).
d. State insurance commissioners.

ANS: C

____ 27. Which is the most efficient means to store PHI?

a. Audiotapes
b. Paper
c. Electronic storage
d. Microfiche

ANS: C

____ 28. The HIPAA Privacy Officer is responsible for

a. keeping staff names secret.
b. tracking who has access to PHI.
c. checking that passwords are changed weekly.
d. securing the computer server room from outside visitors.

ANS: B

____ 29. The HIPAA Security Officer is responsible for

a. seeing that all facility doors are locked at night.
b. seeing that there is safe storage for paper medical records.
c. hiring security guards for the facility.
d. safeguarding all electronic patient health information.

ANS: D

Matching

Match the terms with the correct acronym.

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a. PHI
b. DHHS
c. IIHI
d. HIPAA
e. e-PHI

____ 30. Department of Health and Human Services
ANS: B

____ 31. Individually identifiable health information
ANS: C

____ 32. Health Insurance Portability and Accountability Act
ANS: D

____ 33. Protected health information
ANS: A

____ 34. Electronic protected health information
ANS: E

Match the insurance provider with the proper designation.

a. Covered Entity
b. Not Covered Entity

____ 35. Auto insurance company
ANS: B

____ 36. Health insurance company
ANS: A

____ 37. Property and liability insurance company
ANS: B

____ 38. Supplemental health insurance company
ANS: A

____ 39. Workers' Compensation insurance
ANS: A

Match the situation with the appropriate HIPAA rule.

a. Security Rule
b. Privacy Rule

____ 40. Limit access to e-PHI
ANS: A

____ 41. How to handle PHI
ANS: B

____ 42. When authorization is needed
ANS: B

____ 43. Written policy to safeguard against disasters
ANS: A

Completion
Complete each statement.

44. What year did Public Law 104-91 pass both houses of Congress?

    ANS:
    1996

45. How many titles are included in the Public Law 104-91?
    ANS:
    7
    seven

46. List the four key words that summarize the areas of health care that HIPAA has addressed.

    ANS:
    privacy
    transactions
    security
    identifiers

47. Under HIPAA, delegates from Medical Records Department, Patient Accounts/Business Office, and satellite clinics would receive training concerning HIPAA law from what officer?

    ANS:
    HIPAA officer
    HIPAA

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