



HIPAA

Exam Questions HIO-201

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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

Select the correct statement about the 820-Payment Order/Remittance advice transaction.

- A. It can be used for the payment of provider claims.
- B. It can be used to pay for insurance products (either individual or group premiums).
- C. It can function solely as a remittance advice.
- D. Electronic Funds Transfer is fully supported.
- E. This transaction can carry either summary or detailed remittance information.

Answer: A

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- A. The authorization has been revoked by the physician.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

Dr Jones, a practicing dentist, has decided to directly implement an EDI solution to comply with the HIPAA transaction rule. Dr. Jones employs a small staff of 4 persons for whom he has sponsored a health care plan. Dr. Jones has revenues of less than \$1 million. Select the code set that Dr. Jones should consider supporting for his EDI system.

- A. 837 - Professional
- B. 834
- C. CPT-4
- D. 837 - Institutional
- E. CDT

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

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

- A. Is required for all Chain of Trust Agreements.
- B. Must allow for the patient's written acknowledgement of receipt.
- C. Must always be signed by the patient.
- D. Must be signed in order for the patient's name to be sold to a mailing list organization
- E. Is not required if an authorization is being developed

Answer: B

NEW QUESTION 7

The code set that must be used to describe or identify inpatient hospital services and surgical procedures is:

- A. ICD-9-CM, Volumes land 2
- B. CPT-4
- C. CDT
- D. ICD-9-CM, Volume 3

E. HCPCS

Answer: D

NEW QUESTION 8

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 9

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

HIPAA transaction standards apply to:

- A. Employee drug tests.
- B. Health component of auto insurance.
- C. Stored health information data.
- D. Eligibility inquiries.
- E. Non-reimbursed employee medical expenses.

Answer: D

NEW QUESTION 10

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

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

Answer: E

NEW QUESTION 13

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 18

The Data Backup Plan is part of which Security Standard?

- A. Contingency Plan
- B. Evaluation
- C. Security Management Procedures
- D. Facility Access Control
- E. Security Incident Procedures

Answer: A

NEW QUESTION 23

A grouping of functional groups, delimited by a header/trailer pair, is called a:

- A. Data element
- B. Data segment
- C. Transaction set
- D. Functional envelope
- E. Interchange envelope

Answer: E

NEW QUESTION 25

Implementation features of the Security Management Process include which one of the following?

- A. Power Backup plan
- B. Data Backup Plan
- C. Security Testing
- D. Risk Analysis
- E. Authorization and/or Supervision

Answer: D

NEW QUESTION 29

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 30

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 35

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 40

Which HIPAA Title is fueling initiatives within organizations to address health care priorities in the areas of transactions, privacy, and security?

- A. Title I.
- B. Title II
- C. Title III
- D. Title IV.
- E. Title V.

Answer: B

NEW QUESTION 45

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 49

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 54

This transaction is the response to a Health Care Claim (837):

- A. Eligibility (270/271)
- B. Premium Payment (820)
- C. Claim Status Notification (277)
- D. Remittance Advice (835)
- E. Functional Acknowledgment (997)

Answer: C

NEW QUESTION 59

HL7 is particularly involved with:

- A. NCPDP-based pharmacy standards
- B. The standard for pharmacy-health plan communication.
- C. Administering Medicare and Medicaid programs.
- D. Claims attachments.
- E. Publishing HIPAA Transactions-related Implementation Guides.

Answer: D

NEW QUESTION 61

Establishing policies and procedures for responding to an emergency or other occurrence that damages systems is an example of a(n):

- A. Security Awareness and Training
- B. Security Incident Procedure
- C. Information Access Management
- D. Security Management Process
- E. Contingency Plan

Answer: E

NEW QUESTION 63

As defined in the HIPAA regulations, a group of logically related data in units is called a:

- A. Data group
- B. Segment
- C. Transaction set
- D. Functional group
- E. Interchange envelope

Answer: B

NEW QUESTION 65

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 66

Which one of the following is a required implementation specification of the Security Management Process?

- A. Risk Analysis
- B. Access Control and Validation Procedures
- C. Integrity Controls
- D. Access Authorization
- E. Termination Procedures

Answer: A

NEW QUESTION 70

Formal, documented instructions for reporting security breaches are referred to as:

- A. Business Associate Contract
- B. Response and Reporting
- C. Emergency Access Procedure
- D. Sanction policy
- E. Risk Management

Answer: B

NEW QUESTION 72

Select the best statement regarding the definition of protected health information (PHI).

- A. PHI includes all individually identifiable health information (IIHI).
- B. PHI does not include physician's hand written notes about the patient's treatment.
- C. PHI does not include PHI stored on paper.
- D. PHI does not include PHI in transit.
- E. PHI includes de-identified health information

Answer: A

NEW QUESTION 77

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 79

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 81

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 86

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 87

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 92

A business associate must agree to:

- A. Report to the covered entity any security incident of which it becomes aware
- B. Ensure the complete safety of all electronic protected health information
- C. Compensate the covered entity for penalties incurred because of the business associate's security incidents.
- D. Register as a business associate with HHS
- E. Submit to periodic audits by HHS of critical systems containing electronic protected health information

Answer: A

NEW QUESTION 93

This security standard requires that the covered entity establishes agreements with each organization with which it exchanges data electronically, protecting the security of all such data:

- A. Security Incident Procedures
- B. Integrity
- C. Person or Entity Authentication
- D. Assigned Security Responsibility
- E. Business Associate Contracts and other Arrangements

Answer: E

NEW QUESTION 94

HIPAA 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 95

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 97

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 98

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 102

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 105

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 107

This rule covers the policies and procedures that must be in place to ensure that the patients' health information is respected and their rights upheld:

- A. Security rule.
- B. Privacy rule.
- C. Covered entity rule.
- D. Electronic Transactions and Code Sets rule.
- E. Electronic Signature Rule.

Answer: B

NEW QUESTION 109

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 110

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 111

One characteristic of the Notice of Privacy Practices is:

- A. It must be written in plain, simple language
- B. It must explicitly describe all uses of PHI
- C. A description about the usage of hidden security cameras for tracking patient movements for implementing privacy.
- D. A description of the duties of the individual
- E. A statement that the individual must abide by the terms of the Notice.

Answer: A

NEW QUESTION 113

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 117

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 120

A covered entity must adopt policies and procedures governing disclosures of PHI that identify

- A. The types of financial information to be disclosed.
- B. The specific individuals or entities to which disclosure would be made.
- C. The types of persons who would receive PHI.
- D. The conditions that would not apply to disclosure of PHI
- E. The criteria for reviewing requests for routine disclosure of PHI.

Answer: C

NEW QUESTION 123

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 127

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 128

The key objective of a contingency plan is that the entity must establish and implement policies and procedures to ensure the:

- A. Creation and modification of health information during and after an emergency.
- B. Integrity of health information during and after an emergency.
- C. Accountability of health information during and after an emergency.
- D. Vulnerability of health information during and after an emergency.
- E. Non-repudiation of the entity.

Answer: B

NEW QUESTION 132

The State of Nebraska's Medicaid Program has decided to implement an EDI solution to comply with the HIPAA transaction rule. Select the transaction or code set that would not apply to them.

- A. 270
- B. 835
- C. 837 - Professional
- D. CPT-4
- E. UB-92

Answer: E

NEW QUESTION 136

When PHI is sent or received over an electronic network there must be measures to guard against unauthorized access. This is covered under which security rule standard?

- A. Device and Media Controls
- B. Access Controls
- C. Transmission Security
- D. Integrity
- E. Audit Controls

Answer: C

NEW QUESTION 138

Use or disclosure of Protected Health Information (PHI) for Treatment, Payment, and Health care Operations (TPO) is:

- A. Limited to the minimum necessary to accomplish the intended purpose.
- B. Left to the professional judgment and discretion of the requestor.
- C. Controlled totally by the requestor's pre-existing authorization document.
- D. Governed by industry "best practices" regarding use
- E. Left in force for eighteen (18) years.

Answer: A

NEW QUESTION 143

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