

## HFMA CRCR Exam Questions and 100% Correct Answers 2023/2024 Updated Guide

Through what document does a hospital establish compliance standards? - Correct ANSWER-code of conduct

What is the purpose of an OIG work plan? - Correct ANSWER-Identify Acceptable compliance programs in various provider settings

If a Medicare patient is admitted on Friday, what services fall within the three-day DRG window rule? - Correct ANSWER-Non-diagnostic service provided on Tuesday through Friday

What does a modifier allow a provider to do? - Correct ANSWER-Report a specific circumstance that affected a procedure or service without changing the code or its definition

If outpatient diagnostic services are provided within three days of the admission of a Medicare beneficiary to an IPSP (Inpatient Prospective Payment System) hospital, what must happen to these charges? - Correct ANSWER-They must be billed separately to the part B Carrier

What is a recurring or series registration? - Correct ANSWER-One registration record is created for multiple days of service

What are non-emergency patients who come for service without prior notification to the provider called? - Correct ANSWER-Unscheduled patients

Which of the following statements apply to the observation patient type? - Correct ANSWER-It is used to evaluate the need for an inpatient admission

Which services are hospice programs required to provide around the clock patient? - Correct ANSWER-Physician, Nursing, Pharmacy

Scheduler instructions are used to prompt the scheduler to do what? - Correct ANSWER-Complete the scheduling process correctly based on service requests

The time needed to prepare the patient before service is the difference between the patient's arrival time and which of the following? - Correct ANSWER-Procedure time

Medicare guidelines require that when a test is ordered for a LCD or NCD exists, the information provided on the order must include: - Correct ANSWER-Documentation of the medical necessity for the test

What is the advantage of a pre-registration program - Correct ANSWER-It reduces processing times at the time of service

What data are required to establish a new MPI(Master patient Index) entry - Correct ANSWER-The responsible party's full legal name, date of birth, and social security number

Which of the following statements is true about third-party payments? - Correct ANSWER-The payments are received by the provider from the payer responsible for reimbursing the provider for the patient's covered services.

Which provision protects the patient from medical expenses that exceed the pre-set level - Correct ANSWER-stop loss

what documentation must a primary care physician send to HMO patient to authorize a visit to a specialist for additional testing or care? - Correct ANSWER-Referral

Under EMTALA (Emergency Medical Treatment and Labor Act) regulations, the provider may not ask about a patient's insurance information if it would delay what? -Correct ANSWER-Medical screening and stabilizing treatment

Which of the following is a step in the discharge process? - Correct ANSWER-Have a case management service complete the discharge plan

The hospital has a APC based contract for the payment of outpatient services. Total anticipated charges for the visit are \$2,380. The approved APC payment rate is \$780. Where will the patient's benefit package be applied? - Correct ANSWER-To the approved APC payment rate

A patient has met the \$200 individual deductible and \$900 of the \$1000 co-insurance responsibility. The co-insurance rate is 20%. The estimated insurance plan responsibility is \$1975.00. What amount of coinsurance is due from the patient? - Correct ANSWER-\$100.00

When is a patient considered to be medically indigent? - Correct ANSWER-The patient's outstanding medical bills exceed a defined dollar amount or percentage of assets.

What patient assets are considered in the financial assistance application? - Correct ANSWER-Sources of readily available funds , vehicles, campers, boats and saving accounts

If the patient cannot agree to payment arrangements, What is the next option? - Correct ANSWER-Warn the patient that unpaid accounts are placed with collection agencies for further processing