
AAHAM Certification Exam Questions With Complete Solutions

What are the Federal Agencies that are part of the U.S. Department of Health and Human Services (HHS)? correct answer: Centers of Medicare & Medicaid Services (CMS) Office of Inspector General (OIG)

What are the HHS Operating Divisions? correct answer:
National Institutes of Health (NIH)
Food and Drug Administration (FDA)
Centers of Disease Control and Prevention (CDC)
Agency for Toxic Substances and Disease Registry (ATSDR)
Indian Health Service (HIS)
Health Resources and Services Administration (SAMHSA)
Agency for Healthcare Research and Quality (AHRQ)
Centers for Medicare and Medicaid Services (CMS)
Administration for Children and Families (ACF)
Administration for Community Living (ACL)

What is the role of the CMS? correct answer: CMS is responsible for developing rules and regulations that govern Medicare and Medicaid. They also administer the Quality Improvement Organization (QIO) to monitor and improve quality of care for Medicare beneficiaries.
Medicare = Title XVIII 18
Medicaid = Title XIX 19

Aaham Technical Certification Study Guide

Rose M. Dunphy,Dyan C. Anderson



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Insights From The Field includes more interviews with experienced insurance billing specialists providing a snapshot of their career paths and offering advice to the new student Scenario boxes help you apply concepts to real world situations Quick Review sections summarize chapter content and also include review questions Student Software Challenge on the Evolve website allows you to practice filling out interactive CMS 1500 forms *Insurance Handbook for the Medical Office - E-Book* Marilyn Fordney,2015-12-08 Stay up on the latest in insurance billing and coding with Marilyn Fordney s Insurance Handbook for the Medical Office 14th Edition Trusted for more than 30 years this market leading handbook equips you to succeed as medical insurance specialist in any of today s outpatient settings Coverage emphasizes the role of the medical insurance specialist in areas such as diagnostic coding procedural coding Medicare HIPAA and bill collection strategies As with previous editions all the plans that are most commonly encountered in clinics and physicians offices are incorporated into the text as well as icons for different types of payers lists of key abbreviations and numerous practice exercises that assist you in accurately filling out claim forms This new edition also features expanded coverage of ICD 10 electronic medical records electronic claims submission and the HIPAA 5010 keeping you one step ahead of the latest practices and protocols of the profession Key terms are defined and emphasized throughout the text to reinforce understanding of new concepts and terminology Separate chapter on HIPAA Compliance in Insurance Billing as well as Compliance Alerts throughout the text highlights important HIPAA compliance issues to ensure readers are compliant with the latest regulations Emphasis on the business of running a medical office and the importance of the medical insurance specialist details the importance of the medical insurance specialist in the business of the medical office Increased focus on electronic filing claims submission prepares readers for the industry wide transition to electronic claims submission Separate chapter on documentation in the medical office covers the principles of medical documentation and the rationales for it Service to Patient features in most chapters offer examples of good customer service User resources on the Evolve companion website feature performance checklists self assessment quizzes the Student Software Challenge with cases on different payer types and an interactive CMS 1500 02 12 form to fill in NEW Expanded coverage of ICD 10 prepares users to code ICD 10 with the planned effective date of October 2015 NEW Added information on the electronic medical record and electronic claims submission including information on the HIPAA 5010 equips users for the transition between paper and electronic methods of medical records and links the CMS 1500 02 12 form to the electronic submissions process NEW SimChart for the Medical Office SCMO application activities on the companion Evolve website adds additional functionality to the insurance module on the SCMO roadmap *Healthcare Financial Management* ,2009 Some issues accompanied by supplements **HCPCS Level II Expert 2006 (Compact Edition)** Ingenix,2005-12 Ingenix HCPCS Level II products enable customers to receive timely and appropriate reimbursement based upon accurate use of the most current codes for supplies and services not included in their CPT book needed for Medicare reimbursement or to bill under APCs *Encyclopedia of Associations* ,2004 **CRCS Prep**

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