



Free Questions for AHM-510 by [braindumpscollection](#)

Shared by [Washington](#) on 12-12-2023

For More Free Questions and Preparation Resources

[Check the Links on Last Page](#)

Question 1

Question Type: MultipleChoice

The Hanford Health Plan has delegated the credentialing of its providers to the Sienna Group, a credential verification organization (CVO). If the contract between Hanford and Sienna complies with all of the National Committee for Quality Assurance (NCQA) guidelines for delegation of credentialing, then this contract

Options:

- A- Transfers to Sienna all rights to terminate or suspend individual practitioners or providers in Hanford's provider network
- B- Describes the process by which Hanford evaluates Sienna's performance in credentialing providers
- C- Both A and B
- D- A only
- E- B only
- F- Neither A nor B

Answer:

C

Question 2

Question Type: MultipleChoice

SoundCare Health Services, a health plan, recently conducted a situation analysis. One step in this analysis required SoundCare to examine its current activities, its strengths and weaknesses, and its ability to respond to potential threats and opportunities in the environment. This activity provided SoundCare with a realistic appraisal of its capabilities. One weakness that SoundCare identified during this process was that it lacked an effective program for preventing and detecting violations of law. SoundCare decided to remedy this weakness by using the 1991 Federal Sentencing Guidelines for Organizations as a model for its compliance program.

With respect to the Federal Sentencing Guidelines, actions that SoundCare should take in developing its compliance program include

Options:

- A- Creating a system through which employees and other agents can report suspected misconduct without fear of retribution
- B- Holding management accountable for the misconduct of their subordinates
- C- Assigning a high-level member of management to the position of compliance coordinator or administrator
- D- All of the above

Answer:

D

Question 3

Question Type: MultipleChoice

In examining accountability in the current managed care environment, one is likely to find that combinations of various models of accountability are in operation. Under one model of accountability, the primary mechanisms for accountability are the mechanisms of the marketplace failure to meet standards will result in a loss of demand for services. By definition, this model of accountability is called the

Options:

- A- Professional model of accountability
- B- Political model of accountability
- C- Due diligence model of accountability
- D- Economic model of accountability

Answer:

D

Question 4

Question Type: MultipleChoice

The Westchester Health Plan is using a pricing strategy that involves setting a low price in a highly price-sensitive market to stimulate revenue growth. In following this strategy, Westchester is sacrificing short-term profits for fast growth in selected markets. This information indicates that Westchester is following the pricing strategy known as

Options:

- A- Market skimming
- B- Buying market share
- C- Price skimming
- D- Unitary pricing

Answer:

B

Question 5

Question Type: MultipleChoice

Health plans typically divide their costs into medical and administrative expenses. Examples of medical expenses are.

Options:

- A- Equipment costs
- B- Salaries and benefits for executives and for all functional areas
- C- Sales and marketing costs
- D- Payments to providers for the delivery of healthcare

Answer:

D

Question 6

Question Type: MultipleChoice

In developing its corporate strategies, the Haven Health Plan decided to implement a growth strategy that is focused on increasing the percentage of preventive health office visits from its current plan members. To accomplish this objective, Haven will send a direct mail kit to existing plan members to remind them of the variety of preventive health services that Haven currently offers, including physical exams, cholesterol tests, and mammograms. This information illustrates Haven's use of

Options:

- A- An intensive growth strategy known as market penetration
- B- An integrated growth strategy known as product development
- C- An integrated growth strategy known as market development
- D- A diversified growth strategy known as market penetration

Answer:

A

Question 7

Question Type: MultipleChoice

The following statements appear in the Twilight Health Plan's strategic plan:

Increase the percentage of preventive health interventions for total eligible membership during each of the next three calendar years for the following services: mammography, Pap smears, immunizations, and first trimester visits for prenatal mothers

Improve customer satisfaction on an annual basis for each of the next three calendar years, as measured by satisfaction surveys for members, providers, and employer groups

Increase by 30% the number of claims processed by the automated claim payment system and reduce by 10% the cost of paying claims during the next three years

These statements are examples of Twilight's

Options:

- A- Corporate objectives
- B- Company mission
- C- Company vision
- D- Corporate strategies

Answer:

A

Question 8

Question Type: MultipleChoice

After conducting a business portfolio analysis, the Acorn Health Plan decided to pursue a harvest strategy with one of its strategic business units (SBUs)-Guest Behavioral Healthcare. By following a harvest strategy with Guest, Acorn most likely is seeking to

Options:

- A-** Maximize Guest's short-term earnings and cash flow
- B-** Increase Guest's market share
- C-** Maintain Guest's market position
- D-** Sacrifice immediate earnings in order to fund Guest's growth

Answer:

A

To Get Premium Files for AHM-510 Visit

<https://www.p2pexams.com/products/ahm-510>

For More Free Questions Visit

<https://www.p2pexams.com/ahip/pdf/ahm-510>

