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Question 1

Question Type: MultipleChoice

Network forms of managed care organization have been referred to as "virtual integration" because.

Options:

- A) The network is under one ownership.
- B) The network includes hospitals and pharmacies, but not home health agencies.
- C) The network is based on contractual relationships.
- D) None of the above.

Answer:

C

Question 2

Question Type: MultipleChoice

The U.S. healthcare system has been referred to "a paradox of excess and deprivation" because.

Options:

- A) Some people receive too little care because they are uninsured.
- B) Some people receive too little care because they are inadequately insured.
- C) Some people receive too much care that is costly.
- D) All of the above.

Answer:

D

Question 3

Question Type: MultipleChoice

HIPPA gave the option to adopt other financial and administrative transactions standards, "consistent with the goals of improving the operation of health care system and reducing administrative costs" to

Options:

- A) ASCA prohibits HHS from paying Medicare claims that are not submitted electronically after October 16, 2003.
- B) ASCA prohibits HHS from paying Medicare claims that are not submitted on paper after October 16, 2003
- C) ASCA prohibits HHS from paying Medicare claims that are not submitted electronically after October 16, 2003, unless the Secretary grants a waiver from this requirement
- D) No

Answer:

C

Question 4

Question Type: MultipleChoice

Regulatory strategies for health insurance financing seek to control public expenditures for health care by

Options:

- A) Implementing tax-financed health insurance or limiting premiums

- B) Limiting the annual use of services among patients
- C) Increasing competition among health insurance plans
- D) Only A and C

Answer:

A

Question 5

Question Type: MultipleChoice

Regulatory strategies for health insurance financing seek to control public expenditures for health care by

Options:

- A) Implementing tax-financed health insurance or limiting premiums
- B) Limiting the annual use of services among patients
- C) Increasing competition among health insurance plans
- D) Only A and C

Answer:

A

Question 6

Question Type: MultipleChoice

HIPPA gave the option to adopt other financial and administrative transactions standards, "consistent with the goals of improving the operation of health care system and reducing administrative costs" to

Options:

- A) ASCA prohibits HHS from paying Medicare claims that are not submitted electronically after October 16, 2003.
- B) ASCA prohibits HHS from paying Medicare claims that are not submitted on paper after October 16, 2003
- C) ASCA prohibits HHS from paying Medicare claims that are not submitted electronically after October 16, 2003, unless the Secretary grants a waiver from this requirement
- D) No

Answer:

C

Question 7

Question Type: MultipleChoice

The U.S. healthcare system has been referred to "a paradox of excess and deprivation" because.

Options:

- A) Some people receive too little care because they are uninsured.
- B) Some people receive too little care because they are inadequately insured.
- C) Some people receive too much care that is costly.
- D) All of the above.

Answer:

D

Question 8

Question Type: MultipleChoice

Network forms of managed care organization have been referred to as "virtual integration" because.

Options:

- A) The network is under one ownership.
- B) The network includes hospitals and pharmacies, but not home health agencies.
- C) The network is based on contractual relationships.
- D) None of the above.

Answer:

C

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