

HIPAA

Exam Questions HIO-201

Certified HIPAA Professional



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

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- A. The authorization has been revoked by the physician.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 3

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 4

This is a documented and routinely updated plan to create and maintain, for a specific period of time, retrievable copies of information:

- A. Disaster Recovery Plan
- B. Data Backup Plan
- C. Facility Access Controls
- D. Security Incident Procedures
- E. Emergency Mode Operations Plan

Answer: B

NEW QUESTION 5

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 6

Assigning a name and/or number for identifying and tracking users is required by which security rule implementation specification?

- A. Access Authentication
- B. Integrity Controls
- C. Authorization and/or Supervision
- D. Data Authentication
- E. Unique User Identification

Answer: E

NEW QUESTION 7

In terms of Security, the best definition of "Access Control" is:

- A. A list of authorized entities, together with their access rights.
- B. Corroborating your identity.
- C. The prevention of an unauthorized use of a resource.
- D. Proving that nothing regarding your identity has been altered

E. Being unable to deny you took part in a transaction.

Answer: C

NEW QUESTION 8

Within the context of a transaction set, the fields that comprise a hierarchical level are referred to as a(n):

- A. Loop.
- B. Enumerator.
- C. Identifier
- D. Data segment.
- E. Code set.

Answer: A

NEW QUESTION 9

Select the correct statement regarding the responsibilities of providers and payers under HIPAA's privacy rule.

- A. Optionally, they might develop a mechanism of accounting for all disclosures of PHI for purposes other than TPO.
- B. They must redesign their offices, workspaces, and storage systems to afford maximum protection to PHI from intentional and unintentional use and disclosure.
- C. They must develop methods for disclosing only the minimum amount of protected information necessary to accomplish any intended purpose
- D. They must obtain a "top secret" security clearance for all member of their workforce
- E. They must identify business associates that need to use PHI to accomplish their function and develop authorization forms to allow PHI to be shared with these business associates

Answer: C

NEW QUESTION 10

The Privacy Rule's penalties for unauthorized disclosure:

- A. Imposes fines and imprisonment as civil penalties for violations.
- B. Limits penalties to covered entities and their business associates.
- C. Imposes criminal penalties for noncompliance with standards.
- D. Limits imprisonment to a maximum of ten years.
- E. Is \$1000 per event of disclosure.

Answer: D

NEW QUESTION 10

ANSI X12 specifies the use of a (an):

- A. Simple flat file structure for transactions.
- B. Envelope structure for transactions.
- C. Employer identifier.
- D. Health plan identifier
- E. Provider identifier.

Answer: B

NEW QUESTION 14

Physical safeguards using media controls do not include procedures to:

- A. Control access to tapes, floppies, and re-writeable CDs.
- B. Track the access of recordable media.
- C. Dispose of storage devices.
- D. Backup copies of health information.
- E. Prohibit alteration of health information.

Answer: E

NEW QUESTION 15

Policies requiring workforce members to constantly run an updated anti-virus program on their workstation might satisfy which implementation specification?

- A. Risk Management
- B. Protection from Malicious Software
- C. Facility Security Plan
- D. Response and Reporting
- E. Emergency Access Procedure

Answer: B

NEW QUESTION 17

One mandatory requirement for the Notice of Privacy Practices set by HIPAA regulations is:

- A. If the notice must state that the covered entity reserves the right to disclose PHI without obtaining the individual's authorization.

- B. The notice must prominently include an expiration date.
- C. The notice must describe every potential use of PHI
- D. The notice must describe an individual's rights under the rule such as to inspect, copy and amend PHI and to obtain an accounting of disclosures of PHI
- E. The notice must clearly identify that the covered entity is in compliance with HIPAA regulations as of April 16,2003

Answer: D

NEW QUESTION 20

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 23

This code set is used to describe or identify radiological procedures and clinical laboratory tests:

- A. ICD-9-CM, Volumes 1 and 2.
- B. CPT-4.
- C. CDT.
- D. ICD-9-CM, Volume 3.
- E. HCPCS.

Answer: E

NEW QUESTION 24

This implementation specification might include actions such as revoking passwords, and collecting keys

- A. Sanction Policy
- B. access Authorization
- C. Facility Security Plan
- D. Termination Procedures
- E. Unique User Identification

Answer: D

NEW QUESTION 29

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 34

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 35

Security reminders, using an anti-virus program on workstations, keeping track of when users log-in and out, and password management are all part of:

- A. Security Incident Procedures
- B. Information Access Management
- C. Security Awareness and Training
- D. Workforce Security
- E. Security Management Process

Answer: C

NEW QUESTION 40

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 43

As part of their HIPAA compliance process, a small doctor's office formally puts the office manager in charge of security related issues. This complies with which security rule standard?

- A. Security Awareness and Training
- B. Security Management Process
- C. Access Control
- D. Assigned Security Responsibility
- E. Security Incident Procedures

Answer: D

NEW QUESTION 47

Select the correct statement regarding the requirements of HIPAA regulations.

- A. A covered entity must have and apply sanction against members of its workforce who fail to comply with the privacy policies and procedures of the covered entity)
- B. A covered entity does not need to train all members of its workforce whose functions are affected by a change in policy or procedure.
- C. A covered entity must designate, and document, a privacy officer, and a HIPAA compliance officer
- D. A covered entity may require individuals to waive their rights.
- E. A covered entity must require the individual to sign the Notice of Privacy Practices prior to delivering any treatment related service.

Answer: A

NEW QUESTION 51

The National Provider Identifier (NPI) will eventually replace the:

- A. NPF.
- B. NPS.
- C. CDT.
- D. ICD-9-CM, Volume 3.
- E. UPIN.

Answer: E

NEW QUESTION 55

HIPAA Security standards are designed to be:

- A. Technology specific
- B. State of the art
- C. Non-Comprehensive
- D. Revolutionary
- E. Scalable

Answer: E

NEW QUESTION 58

Title 1 of the HIPAA legislation in the United States is about:

- A. PKI requirements for hospitals and health care providers.
- B. Encryption algorithms that must be supported by hospitals and health care providers.
- C. Fraud and abuse in the health care system and ways to eliminate the same.
- D. Guaranteed health insurance coverage to workers and their families when they change employers.
- E. The use of strong authentication technology that must be supported by hospitals and health care providers.

Answer: D

NEW QUESTION 60

This requires records of the movement of hardware and electronic media that contain PHI.

- A. Business Associate Contract
- B. Data Backup Plan
- C. Media Re-use
- D. Disposal
- E. Accountability

Answer: E

NEW QUESTION 61

An Electronic Medical Record (EMR):

- A. Is another name for the Security Ruling.
- B. Requires the use of biometrics for access to records.
- C. Is electronically stored information about an individual's health status and health care.
- D. Identifies all hospitals and health care organizations.
- E. Requires a PKI for the provider and the patient.

Answer: C

NEW QUESTION 66

Select the correct statement regarding the administrative requirements of the HIPAA privacy rule.

- A. A covered entity must apply disciplinary sanctions against members of its workforce who fail to comply with the privacy policies and procedures of the covered entity.
- B. A covered entity need not train all members of its workforce whose functions are materially affected by a change in policy or procedure.
- C. A covered entity must designate, and document, a contact person responsible for receiving acknowledgements of Notice of Privacy Practice.
- D. A covered entity may require individuals to waive their rights.
- E. A covered entity must provide maximum safeguards for PHI from any intentional or unintentional use or disclosure that is in violation of the regulations and to limit incidental uses and disclosures made pursuant to permitted or required use or disclosure.

Answer: A

NEW QUESTION 69

Policies and procedures that address the final disposition of electronic PHI (including the media on which is stored) is address by this required implementation specification.

- A. Media Re-use
- B. Termination Procedures
- C. Risk Management
- D. Maintenance Records
- E. Disposal

Answer: E

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 75

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 77

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

- A. Is required for all Business Associate Contracts.
- B. Must always be associated with a valid authorization.
- C. Must be signed before providing treatment to a patient.
- D. Must be associated with a valid Business Associate Contract.
- E. Must describe the individual's rights under the Privacy Rule.

Answer: E

NEW QUESTION 79

Select the FALSE statement regarding the transaction rule.

- A. The Secretary is required by statute to impose penalties of at least \$100 per violation on any person or entity that fails to comply with a standard except that the total amount imposed on any one person in each calendar year may not exceed \$1,000,000 for violations of one requirement
- B. Health plans are required to accept all standard transactions.
- C. Health plans may not require providers to make changes or additions to standard transactions
- D. Health plans may not refuse or delay payment of standard transactions.

E. If additional information is added to a standard transaction it must not modify the definition, condition, intent, or use of a data element

Answer: A

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 88

Select the correct statement regarding code sets and identifiers.

- A. The social security number has been selected as the National Health Identifier for individuals.
- B. The COT code set is maintained by the American Medical Association.
- C. Preferred Provider Organizations (PPO) are not covered by the definition of "health plan" for purposes of the National Health Plan Identifier
- D. HIPAA requires health plans to accept every valid code contained in the approved code sets
- E. An important objective of the Transaction Rule is to reduce the risk of security breaches through identifiers.

Answer: D

NEW QUESTION 90

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

Information in this transaction is generated by the payer's adjudication system:

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

Answer: D

NEW QUESTION 98

Physical access to workstations such as, whether or not patients can easily see a screen with PHI on it, is addressed by:

- A. Workstation Use
- B. Workstation Security
- C. Sanction Policy
- D. Termination Procedures
- E. Facility Security Plan

Answer: B

NEW QUESTION 103

Which of the following is a required implementation specification associated with the Contingency Plan Standard?

- A. Integrity Controls
- B. Access Control and Validation Procedures

- C. Emergency Mode Operation
- D. Plan Response and Reporting
- E. Risk Analysis

Answer: C

NEW QUESTION 108

This code set describes drugs:

- A. ICD-9-C
- B. Volumes 1 and 2.
- C. CPT-4.
- D. CDT.
- E. ICD-9-C
- F. Volume 3.
- G. NDC.

Answer: E

NEW QUESTION 112

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 117

Select the correct statement regarding the "Minimum Necessary" standard in the HIPAA regulations.

- A. In some circumstances a covered entity is permitted, but not required, to rely on the judgment of the party requesting the disclosure as to the minimum amount of information necessary for the intended purpose.
- B. Some examples of these requesting parties are: another covered entity or a public official.
- C. The privacy rule prohibits use, disclosure, or requests for an entire medical record.
- D. Non-Covered entities need to redesign their facility to meet the requirement for minimum necessary uses.
- E. The minimum necessary standard requires covered entities to prohibit maintenance of medical charts at bedside and to require that X-ray light boards be totally isolated.
- F. If there is a request for more than the minimum necessary PHI, the privacy rule requires a covered entity to deny the disclosure of information after recording the event in the individual's case file.

Answer: A

NEW QUESTION 120

Which one of the following implementation specifications is associated with the Facility Access Control standard?

- A. Integrity Controls
- B. Emergency Access Procedure
- C. Access Control and Validation Procedures
- D. Security Reminders
- E. Security Policy

Answer: C

NEW QUESTION 125

Select the correct statement regarding the definition of the term "disclosure" as used in the HIPAA regulations.

- A. "Disclosure" refers to employing IIHI within a covered entity.
- B. "Disclosure" refers to utilizing, examining, or analyzing IIHI within a covered entity.
- C. "Disclosure" refers to the release, transfer, or divulging of IIHI to another covered entity.
- D. "Disclosure" refers to the movement of information within an organization.
- E. "Disclosure" refers to the sharing of information within the covered entity.

Answer: C

NEW QUESTION 126

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 129

Select the FALSE statement regarding the responsibilities of providers with direct treatment relationships under HIPAA's privacy rule.

- A. Provide the individual with a Notice of Privacy Practices that describes the use of PHI.
- B. Obtain a written authorization for each and every TPO event.
- C. Obtain a written authorization for any disclosure or use of PHI other than for the purposes of TPO.
- D. Provide access to the PHI that it maintains to the individual and make reasonable efforts to correct possible errors when requested by the individual.
- E. Establish procedures to receive complaints relating to the handling of PHI.

Answer: B

NEW QUESTION 130

This transaction is typically used in two modes: update and full replacement:

- A. Premium Payment.
- B. Health Care Claim.
- C. First Report of Injury.
- D. Health Plan Enrollment and Dis-enrollment.
- E. Coordination of Benefits.

Answer: D

NEW QUESTION 133

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

- A. ICD-9-CM, Volumes 1 and 2
- B. CPT-4
- C. CDT
- D. ICD-9-CM, Volume 3
- E. HCPCS

Answer: C

NEW QUESTION 135

Performing a periodic review in response to environmental or operational changes affecting the security of electronic protected health information is called:

- A. Transmission Security
- B. Evaluation
- C. Audit Control
- D. Integrity
- E. Security Management Process

Answer: B

NEW QUESTION 137

The applicable methods for HIPAA-related EDI transactions are:

- A. Remote and enterprise.
- B. Claim status and remittance advice.
- C. Subscriber and payer
- D. Batch and real-time.
- E. HCFA-1500and837.

Answer: D

NEW QUESTION 141

Ensuring that physical access to electronic information systems and the facilities in which they are housed is limited, is addressed under which security rule standard?

- A. Security Management Process
- B. Transmission Security
- C. Person or Entity Authentication
- D. Facility Access Controls
- E. Information Access Management

Answer: D

NEW QUESTION 142

A key date in the transaction rule timeline is:

- A. October 16, 2003 - small health plans to begin testing without ASCA extension
- B. October 16, 2004 - full compliance deadline for small health plans
- C. April 16, 2004 - small health plans to begin testing with ASCA extension

- D. April 16, 2003 - deadline to begin testing with ASCA extension
- E. April 14, 2003; deadline to begin testing with the ASCA extension.

Answer: D

NEW QUESTION 143

The transaction pair used for requesting and responding to a health claim status inquiry is:

- A. 270/271
- B. 276/277
- C. 278/278
- D. 834/834
- E. 837/835

Answer: B

NEW QUESTION 148

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 151

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