

HMCC Practice Test Questions and Answers

1. What is healthcare fraud?

- A) Knowingly and willfully executing or attempting to execute a scheme to defraud any healthcare benefit program
- B) Accidentally submitting an incorrect billing code
- C) Disagreeing with an insurance company's coverage decision
- D) A patient providing inaccurate contact information

2. What is a qui tam provision?

- A) A provision in the False Claims Act allowing private citizens (whistleblowers) to file lawsuits on behalf of the government and share in recovered funds
- B) A medical billing code
- C) A type of patient consent
- D) A healthcare facility license

3. What is a HIPAA risk analysis?

- A) A comprehensive evaluation of potential risks and vulnerabilities to the confidentiality, integrity, and availability of electronic PHI
- B) A financial risk assessment for hospital investments
- C) A patient health risk screening
- D) A medication interaction analysis

4. What is the OIG Exclusion List?

- A) A database of individuals and entities excluded from participation in federal healthcare programs due to fraud, abuse, or other violations
- B) A list of medications not covered by insurance
- C) A list of unapproved medical devices
- D) A list of closed healthcare facilities

Answers: 1-A 2-A 3-A 4-A

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