



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

Select the correct statement about the 820-Payment Order/Remittance advice transaction.

- A. It can be used for the payment of provider claims.
- B. It can be used to pay for insurance products (either individual or group premiums).
- C. It can function solely as a remittance advice.
- D. Electronic Funds Transfer is fully supported.
- E. This transaction can carry either summary or detailed remittance information.

Answer: A

NEW QUESTION 3

Which of the following is example of "Payment" as defined in the HIPAA regulations?

- A. Annual Audits
- B. Claims Management
- C. Salary disbursement to the workforce having direct treatment relationships.
- D. Life Insurance underwriting
- E. Cash given to the pharmacist for the purchase of an over-the-counter drug medicine

Answer: B

NEW QUESTION 4

This final security rule standard addresses encryption of data.

- A. Security Management Process
- B. Device and Media Controls
- C. Information Access Management
- D. Audit Controls
- E. Transmission Security

Answer: E

NEW QUESTION 5

In an emergency treatment situation, a health care provider:

- A. Must obtain the signature of the patient before disclosing PHI to another provider.
- B. Must contact a relative of the patient before disclosing PHI to another provider.
- C. May use their best judgment in order to provide appropriate treatment.
- D. May use PHI but may not disclose it to another provider.
- E. Must inform the patient about the Notice of Privacy Practices before delivering treatment.

Answer: C

NEW QUESTION 6

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- A. The authorization has been revoked by the physician.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 7

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 8

Signed authorization forms must be retained:

- A. Indefinitely, because the life of a signed authorization is indefinite.
- B. Six (6) years from the time it expires.
- C. For as long as the patient's records are kept.
- D. Until it is specifically revoked by the individual.
- E. Ten (10) years from the date it was signed.

Answer: B

NEW QUESTION 9

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 10

The objective of this HIPAA security standard is to implement policies and procedures to prevent, detect, contain, and correct security violations.

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

Answer: C

NEW QUESTION 10

Encryption is included as an addressable implementation specification under which security rule standard?

- A. Information Access Management
- B. Security Management Process
- C. Evaluation
- D. Transmission Security
- E. Device and Media Controls

Answer: D

NEW QUESTION 14

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 15

The Data Backup Plan is part of which Security Standard?

- A. Contingency Plan
- B. Evaluation
- C. Security Management Procedures
- D. Facility Access Control
- E. Security Incident Procedures

Answer: A

NEW QUESTION 16

Implementation features of the Security Management Process include which one of the following?

- A. Power Backup plan
- B. Data Backup Plan
- C. Security Testing
- D. Risk Analysis

E. Authorization and/or Supervision

Answer: D

NEW QUESTION 18

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 record able media.
- C. Dispose of storage devices.
- D. Backup copies of health information.
- E. Prohibit alteration of health information.

Answer: E

NEW QUESTION 19

This Security Standard addresses the proper functions to be performed on a specific workstation as well as the physical attributes of its surroundings.

- A. Information Access Management
- B. Workstation Security
- C. Access Control
- D. Facility Access Controls
- E. Workstation Use

Answer: E

NEW QUESTION 20

The best example of a party that would use the 835 - Health Care Claim Payment/Advice transaction is:

- A. HHS.
- B. A community health management information system.
- C. Health statistics collection agency.
- D. Government agency
- E. Insurance Company.

Answer: E

NEW QUESTION 23

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 28

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 33

Some of the information that an authorization must include is:

- A. The date on which any automatic extension occurs.
- B. Covered entity's signature.
- C. A statement that federal privacy laws still protect the information after it is disclosed.
- D. A statement that the individual has no right to revoke the authorization.
- E. The date signed.

Answer: E

NEW QUESTION 38

This transaction is used to transmit referral transactions between UMOs and other parties:

- A. Referral Premium Payment
- B. Health Care Referral Certification and Authorization.

- C. First Report of Injury.
- D. Health Plan Referral Enrollment and Dis-enrollment.
- E. Coordination of Referral Benefits.

Answer: B

NEW QUESTION 39

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 41

This transaction is the response to a Health Care Claim (837):

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

Answer: C

NEW QUESTION 45

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 50

Which transaction covers information specific to accidents?

- A. Accident Report.
- B. First Report of Injury.
- C. Health Care Claim.
- D. Health Care Claim Payment/Advice.
- E. Premium Payment.

Answer: B

NEW QUESTION 53

Once a year, a team at ABC Hospital reviews environmental and operational changes that may have had an impact on the security of electronic PHI. This is an example of:

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

Answer: B

NEW QUESTION 54

As defined in the HIPAA regulations, a group of logically related data in units is called a:

- A. Data group
- B. Segment
- C. Transaction set
- D. Functional group
- E. Interchange envelope

Answer: B

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 56

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 61

A business associate:

- A. Requires PKJ for the provider and the patient.
- B. Is electronically stored information about an individual's lifetime health status and healthcare.
- C. Is another name for an HMO.
- D. Identifies all non-profit organizations.
- E. Is a person or an entity that on behalf of the covered entity performs or assists in the performance of a function or activity invoking the use or disclosure of health- related information.

Answer: E

NEW QUESTION 65

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 70

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 74

Processes enabling an enterprise to restore any lost data in the event of fire, vandalism, natural disaster, or system failure are defined under:

- A. Risk Analysis
- B. Contingency Operations
- C. Emergency Mode Operation Plan
- D. Data Backup Plan
- E. Disaster Recover Plan

Answer: E

NEW QUESTION 76

Which one of the following is a required implementation specification of the Security Management Process?

- A. Risk Analysis
- B. Access Control and Validation Procedures
- C. Integrity Controls
- D. Access Authorization
- E. Termination Procedures

Answer: A

NEW QUESTION 79

A health care clearinghouse is an entity that:

- A. Requires PKI for the provider and the patient.
- B. Is exempt from HIPAA regulations.
- C. Is a not-for-profit operation.
- D. Identifies all hospitals and health care organizations.
- E. Performs the functions of format translation and data conversion.

Answer: E

NEW QUESTION 80

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 83

Select the FALSE statement regarding the transaction rule.

- A. The Secretary is required by statue 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 85

HIPAA defines transaction standards for:

- A. Encrypted communication between patient and provider.
- B. All patient events.
- C. Security.
- D. Benefits inquiry.
- E. Emergency treatment.

Answer: D

NEW QUESTION 90

When limiting protected health information (PHI) to the minimum necessary for a use or disclosure, a covered entity can use:

- A. Their professional judgment and standards.
- B. The policies set by the security rule for the protection of the information.
- C. Specific guidelines set by WEDI.
- D. Measures that are expedient and reduce costs.
- E. The information for research and marketing purposes only.

Answer: A

NEW QUESTION 94

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 99

Select the FALSE statement regarding violations of the HIPAA Privacy rule.

- A. Covered entities that violate the standards or implementation specifications will be subjected to civil penalties of up to \$100 per violation except that the total amount imposed on any one person in each calendar year may not exceed \$25,000 for violations of one requirement

- B. Criminal penalties for non-compliance are fines up to \$65,000 and one year in prison for each requirement or prohibition violated
- C. Criminal penalties for willful violation are fines up to \$50,000 and one year in prison for each requirement or prohibition violated.
- D. Criminal penalties for violations committed under ??false pretenses?? are fines up to \$100,000 and five years in prison for each requirement or prohibition violated
- E. Criminal penalties for violations committed with the intent to sell, transfer, or use PHI for commercial advantage, personal gain or malicious harm are fines up to \$250,000 and ten years in prison for each requirement or prohibition violated

Answer: B

NEW QUESTION 104

HIPAA establishes a civil monetary penalty for violation of the Administrative Simplification provisions. The penalty may not be more than:

- A. \$1,000,000 per person per violation
- B. \$10 per person per violation
- C. \$10,000 per person per violation
- D. \$100 per person per violation
- E. \$1000 per person per violation

Answer: D

NEW QUESTION 108

Which of the following is NOT a correct statement regarding HIPAA requirements?

- A. A covered entity must change its policies and procedures to comply with HIPAA regulations, standards, and implementation specifications.
- B. A covered entity must reasonably safeguard PHI from any intentional or unintentional use or disclosure that is in violation of the regulations.
- C. A covered entity must provide a process for individuals to make complaints concerning privacy issues.
- D. A covered entity must document all complaints received regarding privacy issues.
- E. The Privacy Rule requires that the covered entity has a documented security policy.

Answer: E

NEW QUESTION 110

A pharmacist is approached by an individual and asked a question about an over-the-counter medication. The pharmacist needs some protected health information (PHI) from the individual to answer the question. The pharmacist will not be creating a record of this interaction. The Privacy Rule requires the pharmacist to:

- A. Verbally request consent and offer a copy of the Notice of Privacy Practices.
- B. Verbally request specific authorization for the PHI.
- C. Do nothing more.
- D. Obtain the signature of the patient on their Notice of Privacy Practices.
- E. Not respond to the request without an authorization from the primary physician.

Answer: C

NEW QUESTION 113

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 115

A State insurance commissioner is requesting specific, individually identifiable information from an insurer as a part of a routine review of the insurer's practices. What must the insurer do to deidentify the information?

- A. The protected health information must be removed from the information
- B. A substitute "key" may be supplied to allow re-identification, if needed.
- C. Limit the information to coverage, dates of treatment, and payment amounts to avoid collecting any protected data.
- D. Nothing
- E. An oversight agency has the right to access this information without prior authorization.
- F. Request that the insurance commissioner ask for an exception from HIPAA from the Department of Health and Human Services.
- G. A written authorization is required from the patient.

Answer: C

NEW QUESTION 116

The security standard that has the objective of implementing mechanisms to record and examine system activity is:

- A. Access Control
- B. Audit Controls
- C. Authorization Controls

- D. Data Authentication
- E. Person or Entity Authentication

Answer: B

NEW QUESTION 118

Select the FALSE statement regarding the X12N Implementation Guides.

- A. The Washington Publishing Company has the exclusive rights to publish the X12N Implementation Guides.
- B. HHS has adopted the Implementation Guides as standards for HIPAA transactions.
- C. The guides are intended to be instructive and need not be followed strictly.
- D. The guides may be downloaded free from WPC's Website.
- E. The guides explain the usage of the transaction set segments and data elements.

Answer: C

NEW QUESTION 121

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 126

The Privacy Rule interacts with Federal and State laws by:

- A. Establishing an orderly hierarchy where HIPAA applies, then other Federal law, then State law.
- B. Defining privacy to be a national interest that is best protected by Federal law.
- C. Allowing State privacy laws to provide a cumulative effect lower than HIPAA.
- D. Mandating that Federal laws preempt State laws regarding privacy.
- E. Establishing a "floor" for privacy protection.

Answer: E

NEW QUESTION 127

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 128

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 132

This transaction, which is not a HIPAA standard, may be used as the first response when receiving a Health Care Claim (837):

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

Answer: E

NEW QUESTION 137

The Final Privacy Rule requires a covered entity to obtain an individual's prior written authorization to use his or her PHI for marketing purposes except for:

- A. Situations where the marketing is for a drug or treatment could improve the health of that individual.
- B. Situations where the patient has already signed the covered entity's Notice of Privacy Practices.
- C. A face-to-face encounter with the sales person of a company that provides drug samples
- D. A communication involving a promotional gift of nominal value.
- E. The situation where the patient has signed the Notice of Privacy Practices of the marketer.

Answer: D

NEW QUESTION 140

Select the best statement regarding organized health care arrangements (OHCA).

- A. An organized health care arrangement is a clinically integrated setting in which patients receive care from multiple providers.
- B. Independent providers participating in an organized health care arrangement are business associates of each other.
- C. An example of an OHCA is a nurse employed in a physician's office.
- D. An example of an OHCA is a laboratory attached to a physician's office.
- E. An example of an OHCA is a health insurance company and its affiliated life insurance company.

Answer: A

NEW QUESTION 142

Select the correct statement regarding the Notice of Privacy Practices.

- A. The Notice must be signed before a State authorized notary
- B. Direct Treatment Providers must make a good faith effort to obtain patient's written acknowledgement of Notice of Privacy Practices.
- C. Organizations may not have a "layered" Notice - a short, summary Notice preceding the more detailed Notice.
- D. Authorization forms are mandatory for the Notice to be valid
- E. An individual must sign an authorization before a state authorized notary.

Answer: B

NEW QUESTION 147

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