

# 100% Pass AAPC - Perfect CPB - Certified Professional Biller (CPB) Practice Exam Pdf

## CPB Certified Professional Biller Certification

Abuse - correct answer Actions inconsistent with accepted, sound medical business or fiscal practice

Accept Assignment - correct answer Provider accepts as payment in full whatever is paid on the claim by the payer (except for any copayment and or coinsurance amounts.)

Accounts Receivable - correct answer The amount owed to a business for services or goods provided.

Accounts Receivable Aging Report - correct answer Shows the status (by date) of outstanding claims from each payer, as well as payments due from patients.

Accounts Receivable Management - correct answer Assists Providers in the collection of appropriate reimbursement for services rendered; include functions such as insurance verification/eligibility and preauthorization of services.

Accreditation - correct answer Voluntary Process that a healthcare facility or organization (e.g. hospital or managed care plan) undergoes to demonstrate that it has met standards beyond those required by law.

Adjudication - correct answer Judicial dispute resolution process in which an appeals board makes a final determination.

Adjusted Claim - correct answer payment correction resulting in additional payment(s) to the provider.

Advance Beneficiary Notice (ABN) - correct answer Document that acknowledges patient responsibility for payment if Medicare denies the claim.

Adverse Effect - correct answer Also called adverse reaction; the appearance of a pathologic condition due to ingestion or exposure to a chemical substance properly administered or taken.

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## AAPC Certified Professional Biller (CPB) Sample Questions (Q29-Q34):

### NEW QUESTION # 29

American Association of Medical Assistants (AAMA) enables medical assisting professionals to enhance and demonstrate the knowledge, skills, and professionalism required by employers and patients; as well as protect medical assistants' right to practice.

- A. FALSE
- B. TRUE

**Answer: B**

### NEW QUESTION # 30

What does AHFS stand for?

- A. American Healthcare Formulary Service
- B. American Hospital Formulary Standards
- C. American Healthcare Formulary Standards
- D. American Hospital Formulary Service

**Answer: D**

### NEW QUESTION # 31

Which document communicates to the payer that the provider is requesting reimbursement?

- A. Centers of Medicare and Medicaid Services 150 (CMS 1500)
- B. Hold Harmless Clause
- C. Explanation of Benefits
- D. Health Insurance Claim

**Answer: D**

### NEW QUESTION # 32

Amendment to the HMO Act of 1973 is legislation that allowed federally qualified HMOs to permit members to occasionally use non HMO physicians and be partially reimbursed.

- A. FALSE
- B. TRUE

**Answer: B**

### NEW QUESTION # 33

APDRG refers to All Patient Diagnosis Related Group.

- A. FALSE
- B. TRUE

**Answer: B**

### NEW QUESTION # 34

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