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AAPC CPB FINAL EXAM 2025/2026
ACCURATE QUESTIONS WITH
CORRECT DETAILED ANSWERS
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<RECENT VERSION>

1. Health plan, clearinghouses, and any entity transmitting health information is considered by the Privacy Rule to be a: - ANSWER
✓ covered entity
2. The process of reviewing and validating professional qualifications of healthcare providers applying to participate with an organization is known as: - ANSWER ✓ credentialing
3. Carl has enrolled in a healthcare insurance plan that allows him to choose to have services provided within the Blue Cross/Blue Shield network or outside of the network. What type of plan best describes Carl's insurance coverage? - ANSWER ✓ pt of service
4. Not allowed under a participating provider's contract. - ANSWER
✓ balance billing

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AAPC Certified Professional Biller (CPB) Sample Questions (Q39-Q44):

NEW QUESTION # 39

Which scenario would most likely result in a claim denial for lack of medical necessity?

- A. Incorrect patient demographics
- **B. Diagnosis code does not support the procedure**
- C. Late filing
- D. Missing modifier

Answer: B

Explanation:

Medical necessity denials occur when the diagnosis does not justify the billed service.

NEW QUESTION # 40

The word root "hema" refers to:

- A. liver
- B. half
- **C. blood**

Answer: C

NEW QUESTION # 41

Who is the person who prepares and reviews claims for accuracy to ensure prompt payment?

- **A. Health Insurance Specialist**
- B. Independent Contractor
- C. Healthcare Provider

Answer: A

NEW QUESTION # 42

HPSA stands for Health Personnel Shortage Area.

- A. FALSE
- **B. TRUE**

Answer: B

NEW QUESTION # 43

What does it mean by dextr?

- **A. right**
- B. left

Answer: A

NEW QUESTION # 44

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