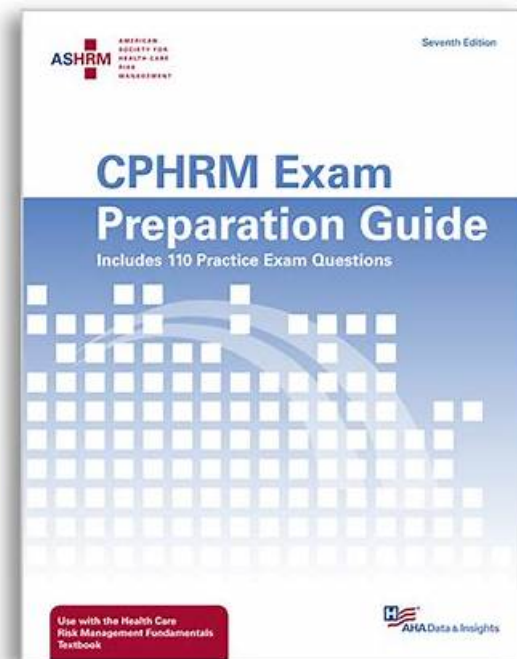


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ASHRM CPHRM Exam Syllabus Topics:

Topic	Details
Topic 1	<ul style="list-style-type: none"> • Risk Financing: This domain covers managing financial risks through insurance programs, claims coordination, loss analysis, and developing strategies to reduce financial exposure.
Topic 2	<ul style="list-style-type: none"> • Claims and Litigation: This domain focuses on handling potential claims and legal cases, including claim reporting, litigation support, legal documentation management, and analyzing claims data to understand risk exposure.
Topic 3	<ul style="list-style-type: none"> • Legal and Regulatory: This domain focuses on ensuring compliance with healthcare laws and regulations, protecting patient information, managing reporting requirements, and supporting accreditation and regulatory responses.
Topic 4	<ul style="list-style-type: none"> • Clinical • Patient Safety: This domain focuses on improving patient safety by promoting a safety culture, managing incident reporting, educating staff and patients, addressing ethical concerns, and implementing corrective actions to reduce risks and prevent harm.

Topic 5	<ul style="list-style-type: none">Healthcare Operations: This domain involves managing operational risk activities such as conducting risk assessments, developing policies, coordinating risk programs, supervising staff, and supporting patient safety initiatives.
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ASHRM Certified Professional in Health Care Risk Management (CPHRM) Sample Questions (Q121-Q126):

NEW QUESTION # 121

What group reports information (historically HIPDB content; now within NPDB) related to fraud/abuse oversight?

- A. Any patient advocacy blog
- B. Peer review organizations (for certain state/federal reporting categories)
- C. School boards
- D. Restaurant inspectors

Answer: B

Explanation:

The Healthcare Integrity and Protection Data Bank (HIPDB) was created to combat healthcare fraud and abuse; it is no longer operational as a separate bank, and its content was merged into the NPDB. Reporting and querying are governed by HRSA rules defining authorized entities, including certain peer review and oversight organizations in specific reporting frameworks. Risk management objectives include ensuring organizations understand which actions must be reported, ensure due process, and comply with data handling rules. Proper reporting supports system integrity by preventing practitioners or entities with serious adverse actions from moving undetected across organizations. For hospitals and health plans, this strengthens credentialing and contracting decisions, reducing organizational exposure to negligent credentialing and improper network participation risks.

NEW QUESTION # 122

A patient has been declared brain dead as a result of injuries sustained during a criminal act. His driver's license states that he is an organ donor. The attending physician is planning to remove the life-support equipment. A risk manager should recommend

- A. coordinating the organ retrieval.
- B. determining the family's wishes regarding organ donation.
- C. following the patient's wishes and notify the organ retrieval team.
- D. notifying authorities to determine if an autopsy is required.

Answer: D

Explanation:

According to Health Care Risk Management standards established by ASHRM and the American Hospital Association Certification Center, deaths resulting from criminal acts fall under medico-legal jurisdiction and are typically subject to coroner or medical examiner review. Even when a patient is a documented organ donor, as indicated on a driver's license under the Uniform Anatomical Gift Act framework, the circumstances of death may require legal investigation.

When a death is associated with trauma from a criminal act, it is generally considered a reportable death. The medical examiner or coroner has statutory authority to determine whether an autopsy is required and to ensure preservation of forensic evidence. Organ procurement activities must not interfere with legal investigation obligations. Therefore, prior to organ retrieval or withdrawal of life

support, the appropriate legal authorities must be notified.

While honoring the patient's documented donation wishes is important, compliance with state statutes governing reportable deaths and forensic investigations takes precedence. The family's wishes do not override a valid donor designation, but coordination must occur within the legal framework.

Thus, the most appropriate action for the risk manager is to ensure that authorities are notified to determine autopsy requirements before proceeding.

NEW QUESTION # 123

Which of the following are proactive elements of a workplace violence prevention program?

- A. de-escalation, law enforcement notification, restraining order, and victim support
- **B. pre-employment background screening, training, rounding, and active shooter drills**
- C. notification to Drug Enforcement Agency of drug theft and crisis intervention
- D. medical record documentation of events and emergency command center activation

Answer: B

Explanation:

According to Health Care Risk Management standards outlined by ASHRM and the American Hospital Association Certification Center, proactive workplace violence prevention focuses on measures implemented before an incident occurs. These strategies aim to identify risks, strengthen preparedness, and reduce the likelihood or severity of violent events.

Pre-employment background screening helps identify applicants with histories that may pose safety concerns, consistent with legal hiring standards. Ongoing staff training enhances awareness of warning signs, communication skills, and reporting procedures. Leadership rounding increases visibility, supports early identification of environmental or behavioral risks, and reinforces safety culture. Active shooter drills and emergency preparedness exercises ensure that staff understand response protocols and can act effectively under stress.

Options B, C, and D primarily describe reactive or post-incident measures. Law enforcement notification, restraining orders, crisis intervention, DEA notification, documentation, and emergency command activation occur after an event has taken place or when an immediate threat is present.

Health Care Operations objectives emphasize prevention, preparedness, environmental assessment, and workforce education as foundational elements of a workplace violence program. Therefore, pre-employment screening, training, rounding, and drills represent proactive components of an effective prevention strategy.

NEW QUESTION # 124

An organization has recently changed insurance. The risk manager receives a claim from a former patient on July 3, 2004, claiming injury and alleging negligence by the surgery staff on September 5, 2003. Which of the following would apply to this claim?

* a claims-made policy for the period 1/1/03 to 1/1/04 with a retro date of 1/1/02

* an occurrence policy for the period 1/1/03 to 1/1/04

* a claims-made policy for the period 1/1/03 to 1/1/04 with a 1-year tail coverage

* an occurrence policy for the period 1/1/04 to 1/1/05

- A. 3 and 4 only
- **B. 2 and 3 only**
- C. 1 and 2 only
- D. 1 and 4 only

Answer: B

Explanation:

According to Health Care Risk Management standards supported by ASHRM and the American Hospital Association Certification Center, coverage determination depends on both the policy trigger and relevant dates. The alleged negligence occurred on September 5, 2003. Under an occurrence policy in effect from 1/1

/03 to 1/1/04, coverage applies because the event occurred during that policy period, regardless of when the claim was filed.

Therefore, option 2 applies.

For a claims-made policy covering 1/1/03 to 1/1/04, coverage would require that the claim be made and reported during the policy period unless tail coverage is in place. Because the claim was received on July 3,

2004, after expiration of the 1/1/03 to 1/1/04 claims-made policy, coverage would apply only if a 1-year tail was purchased. Thus, option 3 applies.

Option 1 would not apply because the claim was made after the claims-made policy period ended, and no tail is specified. Option 4

would not apply because occurrence coverage from 1/1/04 to 1/1/05 would not cover an event that occurred in 2003. Risk financing objectives emphasize understanding policy triggers, reporting requirements, and tail coverage. Therefore, the applicable coverage scenarios are the occurrence policy for 2003 and the claims-made policy with tail coverage.

NEW QUESTION # 125

An organization's CEO has requested that the risk manager develop policies and procedures for the risk management department. The risk manager should consider developing policies for all of the following EXCEPT

- A. responses to freedom of information requests.
- B. risk management reporting process to the governing body.
- C. departmental accountability for occurrence reporting.
- D. coordination of responses to subpoenas.

Answer: A

Explanation:

According to Health Care Risk Management standards outlined by ASHRM and the American Hospital Association Certification Center, the risk management department should establish formal policies addressing core operational responsibilities. Coordination of responses to subpoenas is a critical function involving legal compliance, protection of privileged information, and collaboration with counsel. Departmental accountability for occurrence reporting is essential to ensure proper event identification, investigation, and trending.

Additionally, defining the risk management reporting process to the governing body supports board oversight and enterprise risk management responsibilities.

Responses to freedom of information requests, however, are generally governed by legal, compliance, or public information offices, particularly in public institutions subject to open records laws. While risk management may provide input if records involve claims or adverse events, primary responsibility for handling such requests typically resides outside the risk management department.

Health Care Operations objectives emphasize clearly defined departmental scope, structured reporting relationships, and alignment with governance responsibilities. Therefore, while subpoena coordination, occurrence reporting, and board reporting are appropriate policy areas for risk management, responses to freedom of information requests fall outside its primary policy development scope.

NEW QUESTION # 126

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