Health Care Information Systems
A Practical Approach for Health Care Management
4th Edition

Chapter 2: Health Care Data

1. Health care data and health care information are synonymous and can be used interchangeably.
True
<mark>False</mark>
Answer: p. 22-23

2. Which of the following describes protected heath information?
a. Oral or recorded in any form or medium
b. Created or received by a health care provider, health plan, public health authority, employer, life insurer, school/university, or health care clearinghouse
c. Related to past, present, or future physical or mental health or condition of an individual
<mark>d. All of the above</mark>
Answer: p. 24

3. Which organization is the major accrediting agency for health care organizations in the US?
<mark>a. The Joint Commission</mark>
b. NCQA
c. CMS
d. AHIMA
Answer: p. 24

4. Electronic medical records (EMRs) are a digital version of the paper charts within one practice whereas electronic health records (EHRs) have all those capabilities but are equipped to communicate and share information with other providers.
<mark>True</mark>
False
Answer: p. 25

5. Which of the following best defines continuum of care?
a. Services provided for a specific condition for a specific period of time
<mark>b. Tracks patients over time through a comprehensive array of health services</mark>
c. Improves health outcomes within defined communities
d. None of the above
Answer: p. 25-26

6. Which of the following is the primary purpose for creating and maintaining patient records?
<mark>a. Patient care</mark>
b. Communication
c. Legal documentation
d. Billing and reimbursement
Answer: p. 26

7. If the state in which you work does not specify retention requirements for patient records, you should

a. Maintain the records per the Joint Commission's guidelines
b. <mark>Maintain the records for as long as the state's statute of limitations or other regulations require</mark>
c. Maintain the records for 10 years
d. Maintain the records indefinitely
Answer: p. 28

8. Which of the following is a characteristic of personal health records (PHRs)?
a. Is a legal document of care
b. Is maintained by a health provider
c. <mark>Is maintained by the patient</mark>
d. Does not contain as much health care information as an EHR
Answer: p. 28-29

9. In which component of the patient record would you find the SOAP note?
a. Problem list
b. Physicians orders
c. Medication record
d. <mark>Progress notes</mark>
Answer: p. 30

10. In which component of the patient record would you find detailed information about tissue removed during a surgical procedure?
a. Operative report
b. <mark>Pathology report</mark>
c. Laboratory report
d. Discharge summary
Answer: p. 32

11. The third-party payer receives which standard billing form for health care provider services such as those provided by a physician's office?
a. UB-04
b. CMS-1450
c. UB-82
d. <mark>CMS-1500</mark>
Answer: p. 35

12. The American Hospital Association publishes and updates CPT codes annually.
True
<mark>False</mark>
Answer: p. 37

13. Which agency is responsible for publishing and annually updating the ICD-10-CM classification system in the US?
a. <mark>National Center of Health Statistics (NCHS)</mark>
b. World Health Organization (WHO)
c. Diagnosis Related Group (DRG)
d. American Medical Association (AMA)
Answer: p. 37

14. Which entity is responsible for investigating fraud involving government health insurance programs?
a. The Joint Commission
b. Centers for Medicare and Medicaid Services (CMS)
c. Office of Inspector General (OIG)
d. American Medical Association (AMA)
Answer: p. 42

15. Which of the following is NOT a basic element of health care data analysis?
a. Data must be stored in a retrievable manner.
b. Data must be verified and cleaned.
c. An analytical tool must be applied to the data.
d. Data must be reported in a usable manner.
Answer: p. 42

16. A database refers to only large structured, accessible data sets that are stored electronically.
True
False
Answer: p. 43

17. Which of the following is NOT considered one of the "three Vs" of big data?
a. Validity
b. Volume
c. Variety
d. Velocity
Answer: p. 43

18. Which of the following is NOT a discharge statistics?
a. Autopsy rates
b. Bed occupancy rates
c. Consultation rates
d. Death rates
Answer: p.45

19. Which of the following is one of the five areas of analysis that is crucial for holding providers accountable for the care delivered to patients?
a. Population management
b. Disease management
c. Cost modeling
d. All of the above
Answer: p. 48

20. Which of the following areas of big data analysis is characterized by best practice care protocols over multiple care settings, enhancing the coordination of care, and monitoring and improving adherence to best practice care protocols?
a. Population management
b. Disease management
c. Point of care health gap

d. None of the above
Answer: p. 48

21. The criteria against which quality is measured change depending on the product, service, or use.
True
False
Answer: p. 49

22. Which professional organization has developed and published a data quality management tool that defines a specific set of characteristics of health care data that should always be present?
a. The Joint Commission
b. NCQA
c. AHIMA
d. CMS
Answer: p. 50

23. Using an abbreviation that has two different meanings is an example of a lack of:
a. Data comprehensiveness
b. Data definition
c. Data consistency
d. Data precision
Answer: p. 51

24. Errors attributed to a flaw or discrepancy in adherence to standard operating procedures or systems are known as:
a. Systematic errors
b. Random errors
c. Preventable errors
d. Programming errors
Answer: p. 54

25. Which of the following would help reduce errors during data collection and processing?
a. Standardize data entry fields
b. Institution real-time quality checking
c. Building human capacity
d. All of the above
Answer: p. 55