

BTER Pre-Assessment/Assessment Questions (All Modules)

Module 7 - Generating Revenue		
No.	Question	Answer
1	Over 70% of healthcare providers today use electronic health records in their practices.	False – To date, the current healthcare adoption rate rests around 30-40%.
2	Generating revenue in a medical practice <u>is not</u> a collaborative effort, but mainly the responsibility of the practice administrator.	False- The successful generation of revenue hinges on the team approach of the entire staff and physicians.
3	Non-profit healthcare organizations are prohibited from distributing assets to individuals.	True
4	Medicare Part A is the compulsory portion of Medicare provides health insurance coverage for inpatient hospital admissions.	True
5	Medicare Part B is the portion of Medicare that provides prescription drug coverage.	False- Medicare Part B is the voluntary or supplemental portion that covers outpatient physician, hospital, laboratory and radiology visits. Part D provides prescription drug coverage.
6	The conversion to ICD-10 gives physicians the option of using this coding language as of 2015.	False – ICD-10 is a mandatory transition from ICD-9, which will be in effect as of 2015.
7	A physician or practice is encouraged to renegotiate reimbursements with a third-party payor at anytime during the length of the contract/agreement.	False- There is a finite window of time in which a physician can and should renegotiate the payor-provider contract.
8	Case Mix Index is a statistical calculation used by individual providers to indicate the severity of a patient's diagnosis thereby justifying a higher reimbursement.	False- The CMI is a calculation used by hospitals to indicate severity. Physicians do not use this index.