

AHM-540^{Q&As}

Medical Management

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QUESTION 1

Private employers are key purchasers of health plan services. The following statement(s) can correctly be made about employer expectations about the quality and cost- effectiveness of healthcare services:

1.

For both health maintenance organizations (HMOs) and non-HMO plans, employers typically have access to accreditation results and performance measurement reports to help them evaluate the quality of healthcare and service

2.

Because of employers\' concern about the quality and costs of healthcare services available through health plans, direct contracting has become a dominant model among employers who sponsor health benefit programs for their employees

A. Both 1 and 2

B. 1 only

C. 2 only

D. Neither 1 nor 2

Correct Answer: D

QUESTION 2

Determine whether the following statement is true or false:

The key to successfully managing the quality and cost-effectiveness of healthcare services for Medicaid enrollees is to merge Medicaid recipients into existing plans.

A. True

B. False

Correct Answer: B

QUESTION 3

This agency has authority over Programs of All-inclusive Care for the Elderly (PACE) and the State Children\'s Health Insurance Program (SCHIP).

A. Health Resources and Services Administration (HRSA)

B. Office of Personnel Management (OPM)

C. Department of Health and Human Services (HHS)

D. Department of Justice (DOJ)

Correct Answer: C

QUESTION 4

One difference between outcomes research and clinical research is that outcomes research

- A. provides an absolute measure of treatment results, whereas clinical research provides a relative measure of results
- B. focuses on treatment effectiveness, whereas clinical research focuses on treatment efficacy
- C. examines diseases and treatments in isolation, whereas clinical research considers the effects of changes in health status and quality of life
- D. gathers outcomes data from controlled clinical trials, whereas clinical research collects and analyzes clinical, financial, and administrative data

Correct Answer: B

QUESTION 5

Many health plans use HRA to target their preventive care programs to the healthcare needs of their members. With regard to HRA, it is correct to say that

- A. Health plans rarely delegate HRA activities to external entities
- B. Health plans typically focus their HRA efforts on newly enrolled members
- C. HRA focuses on clinical data for an entire population and does not include demographic information that might identify individual members
- D. HRA is generally a reliable predictor of medical resource utilization

Correct Answer: B

QUESTION 6

For this question, if answer choices (A) through (C) are all correct, select answer choice (D). Otherwise, select the one correct answer choice.

Ways that workers' compensation health plans can help control the costs of job-related injuries and illnesses include

- A. applying strict definitions of medical necessity
- B. developing prevention and recovery programs
- C. applying out-of-network benefit reductions
- D. all of the above

Correct Answer: B

QUESTION 7

Comorbidity can have a significant impact on the effective implementation of disease management programs. Comorbidity can correctly be defined as the

- A. degree to which the progression of a disease or condition is understood
- B. prevalence or rate of a sickness or injury within a given population
- C. degree of severity of a particular disease or condition
- D. presence of a chronic condition or added complication other than the condition that requires medical treatment

Correct Answer: D

QUESTION 8

The following statements are about health plans' complaint resolution procedures (CRPs). Three of the statements are true and one is false. Select the answer choice containing the FALSE statement.

- A. An health plan's CRPs reduce the likelihood of errors in decision making.
- B. CRPs typically provide for at least two levels of appeal for formal appeals.
- C. CRPs include only formal appeals and do not apply to informal complaints.
- D. Most complaints are resolved without proceeding through the entire CRP process.

Correct Answer: C

QUESTION 9

MCOs usually have a formal program for the oversight of delegated activities. The following statements concern typical delegation oversight programs. Select the answer choice containing the correct statement.

- A. A letter of intent is the contractual document that describes the delegated functions and the responsibilities of the MCO and the delegate.
- B. In most cases, the evaluation of a candidate for delegation is based entirely on the candidate's application and supporting documentation and does not include an on-site assessment of the candidate.
- C. Under most delegation agreements, an MCO cannot terminate the agreement before the end date stated in the agreement.
- D. One objective for a delegation oversight program is to integrate any delegated activities into the MCO's overall programs for medical management and other functions.

Correct Answer: D

QUESTION 10

In recent years, the demand for prescription drugs has increased dramatically. Factors that have contributed to this increase include

- A. increased education regarding the purpose and benefits of drug formularies
- B. reductions in the cost of prescription drugs
- C. increased use of direct-to-consumer (DTC) advertising
- D. all of the above

Correct Answer: C

QUESTION 11

For this question, if answer choices (A) through (C) are all correct, select answer choice (D). Otherwise, select the one correct answer choice.

In most commercial health plans, the case management process is directed by a case manager whose responsibilities typically include

- A. focusing on a disabled member's vocational rehabilitation and training
- B. approving all care decisions for patients under case management
- C. reducing the fragmentation of care that often results when individuals obtain services from several different providers
- D. all of the above

Correct Answer: C

QUESTION 12

Economically, health plans cannot provide coverage for every drug available from every manufacturer. As a result, purchaser contracts often include provisions specifying that certain drugs or drug types will not be covered. These provisions are referred to as

- A. limitations
- B. exceptions
- C. exclusions
- D. drug edits

Correct Answer: C

QUESTION 13

A health plan's choice of structure measures, process measures, and outcome measures to evaluate performance depends in part on the scientific soundness of the measures. One approach that a health plan can use to enhance scientific soundness is stratification, which refers to the

- A. identification and removal of unusual cases, such as patients with contraindications to a particular treatment, from consideration
- B. statistical adjustment of outcome measures to account for differences in the severity of illness or the presence of other medical conditions
- C. specification of a target population for a procedure and the data collection and analysis methods to be used
- D. elimination of variation within a patient population by dividing the population into groups that are at a similar level of risk

Correct Answer: D

QUESTION 14

A health plan's coverage policies are linked to its purchaser contracts. The following statement(s) can

correctly be made about the purchaser contract and coverage decisions: 1. In case of conflict between the purchaser contract and a health plan's medical policy or benefits administration policy, the contract takes precedence

2. Purchaser contracts commonly exclude custodial care from their coverage of services and supplies 3. All of the criteria for coverage decisions must be included in the purchaser contract

- A. All of the above
- B. 1 and 2 only
- C. 2 only
- D. 3 only

Correct Answer: B

QUESTION 15

Drugs included in a health plan's formulary can be classified according to how freely they can be prescribed. By definition, a drug that requires some sort of review or approval by a plan physician or group

of physicians before the prescription can be filled is

- A. an unrestricted drug
- B. a monitored drug
- C. a restricted drug
- D. a conditional drug

Correct Answer: B

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