

Chapter 01: Introduction to Coding and Coding Professions

1. Medical coding is the assignment of codes to indicate the reimbursement amounts for a case.
 - a. True
 - b. False

ANSWER: False

2. By using ICD-10-CM and ICD-10-PCS codes, healthcare diagnostic and procedural information can be collected, processed, and analyzed more effectively.
 - a. True
 - b. False

ANSWER: True

3. ICD-10-CM is the abbreviation for International Coding of Diseases, Tenth Revision, Clinical Modification.
 - a. True
 - b. False

ANSWER: False

4. Morbidity is the rate or frequency of deaths.
 - a. True
 - b. False

ANSWER: False

5. CMS updates the ICD-10-CM diagnostic codes each quarter of the year.
 - a. True
 - b. False

ANSWER: False

6. CMS funded a project in 2001 to design a procedural coding system. AHIMA was awarded the contract.
 - a. True
 - b. False

ANSWER: False

7. When comparing ICD-9-CM to ICD-10-CM, ICD-10-CM has fewer codes for reporting diseases and injuries.
 - a. True
 - b. False

ANSWER: False

8. ICD-10-CM and ICD-10-PCS was implemented on October 1, 2015.
 - a. True
 - b. False

ANSWER: True

Chapter 01: Introduction to Coding and Coding Professions

9. Coding plays a critical role in reimbursement of healthcare services.
- a. True
 - b. False

ANSWER: True

10. The selection of accurate codes has an impact on determining the medical necessity of cases.
- a. True
 - b. False

ANSWER: True

11. Which of the following credentials is *not* obtained through AHIMA?
- a. RHIT b. RHIA
 - c. CCS d. CPC

ANSWER: d

12. Which of the following credentials is obtained through AMT?
- a. CCS-P b. CPC
 - c. CMA d. RMA

ANSWER: d

13. Which of the following credentials is obtained through AAPC?
- a. CCS b. CPC
 - c. CMA d. RMA

ANSWER: b

14. Which of the following credentials is obtained from AHIMA?
- a. RMA b. CMA
 - c. CPC-H d. CHPS

ANSWER: d

15. Which of the following credentials validates a person's ability to protect healthcare data privacy and security?
- a. CHPS b. CPC
 - c. RMA d. CMA

ANSWER: a

16. Which of the following organizations collaborates with the Curriculum Review of the AAMA to accredit medical assisting programs?
- a. AHIMA b. AAPC
 - c. CAAHEP d. AMT

ANSWER: c

Chapter 01: Introduction to Coding and Coding Professions

17. The organization that coordinates the modifications of the ICD-10-CM disease classifications is _____.
- a. AHMIA b. AAPC
 - c. CMS d. NCHS

ANSWER: d

18. The updates to the procedural classifications of ICD-10-PCS is completed by _____.
- a. AHIMA b. CMS
 - c. NCHS d. AMT

ANSWER: b

19. CCA is the abbreviation for _____.

ANSWER: Certified Coding Associate

20. AAPC is the abbreviation for _____.

ANSWER: American Academy of Professional Coders

21. AHIMA is the abbreviation for _____.

ANSWER: American Health Information Management Association.

22. CPC is the abbreviation for _____.

ANSWER: Certified Professional Coder

23. RHIT is the abbreviation for _____.

ANSWER: Registered Health Information Technician

24. CHDA is the abbreviation for _____.

ANSWER: Certified Health Data Analyst

25. AMBA is the abbreviation for _____.

ANSWER: American Medical Billing Association

26. CMA is the abbreviation for _____.

ANSWER: Certified Medical Assistant

27. AAMA is the abbreviation for _____.

ANSWER: American Association of Medical Assistants

28. CCS is the abbreviation for _____.

ANSWER: Certified Coding Specialist

Name: _____ Class: _____ Date: _____

Chapter 01: Introduction to Coding and Coding Professions

29. CMRS is the abbreviation for _____.

ANSWER: Certified Medical Reimbursement Specialist

30. MAB is the abbreviation for _____.

ANSWER: Medical Association of Billers

31. CMBS is the abbreviation for _____.

ANSWER: Certified Medical Billing Specialist

32. CMBS-H is the abbreviation for _____.

ANSWER: Certified Medical Billing Specialist for Hospitals

33. CMBS-CA is the abbreviation for _____.

ANSWER: Certified Medical Billing Specialist for Chiropractic Assistants

34. CMBSI is the abbreviation for _____.

ANSWER: Certified Medical Billing Specialist for Instructors

35. Discuss the purpose of professional coding associations.

ANSWER: The purpose of professional coding associations is to assist and promote correct coding and reimbursement. The associations also educate, train, and credential coders. Credentialing ensures the proper training and education of coders.