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QUESTION 1
de
A. half
B. skin
C. right
D. lack of, down
Correct Answer: D
QUESTION 2
DRG
A. Disproportionate share hospital (adjustment)
B. Diagnostic and statistical manual
C. Diagnosis related groups
D. (California) Employment Development Department
Correct Answer: C
QUESTION 3
hyp hyph
A. above, excessive
B. uterus, womb
C. condition
D. below, under
Correct Answer: D

QUESTION 4

EGHP

- A. Electronic Healthcare Network Accreditation Commission
- B. Electronic Health Record



C. Evaluation and Management
D. Employer group health plan
Correct Answer: D
QUESTION 5
Which part of the body does cervic refer to?
A. vagina
B. head
C. skull
D. neck
Correct Answer: D
QUESTION 6
HAVEN stands for Home Assessment Validation and Entry.
A. TRUE
B. FALSE
Correct Answer: A
QUESTION 7
What does it mean by erythr?
A. blue
B. green
C. yellow
D. red
Correct Answer: D
QUESTION 8

Which of the following suffixes means half?

A. bi



- B. di
- C. demi

Correct Answer: C

QUESTION 9

CAC (Choose two.)

- A. Computer Assisted Coding
- B. Common Access Card
- C. Computerized Axial Tomography
- D. Certified Coding Specialist

Correct Answer: AB

QUESTION 10

ASC (Choose two.)

- A. Ambulatory Surgical Center
- B. Accredited Standards Committee
- C. Blue Cross
- D. Beneficiary Counseling and Assistance Coordinator

Correct Answer: AB

QUESTION 11

What does HIPAA stand for?

- A. Health Insurance portability and accountability Act of 1995
- B. Health Insurance portability and accountability Act of 1997
- C. Health Insurance portability and accountability Act of 1994
- D. Health Insurance portability and accountability Act of 1996

Correct Answer: D

QUESTION 12



Accounts Receivable Aging Report

- A. Assists Providers in the collection of appropriate reimbursement for services rendered; include functions such as insurance verification/eligibility and preauthorization of services.
- B. Voluntary Process that a healthcare facility or organization (e.g. hospital or managed care plan) undergoes to demonstrate that it has met standards beyond those required by law.
- C. Shows the status (by date) of outstanding claims from each payer, as well as payments due from patients.
- D. Judicial dispute resolution process in which an appeals board makes a final determination.

COHECLAHOWEL.	orrect Answer:	U
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QUESTION 13

infra

- A. between
- B. within, into
- C. same
- D. within, into

Correct Answer: D

QUESTION 14

CMS1450

- A. Insurance claim used by noninstitutional providers and supplier to bill payers
- B. clinical nurse specialist
- C. UB04 Claim used by institutional and other selected providers to bill payers
- D. Coordination of Benefits

Correct Answer: C

QUESTION 15

Which is a professional member of the healthcare team who provides services or supplies to the insured?

- A. Health Insurance Specialist
- B. Independent Contractor
- C. Healthcare Provider



Correct Answer: C

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