1. What percentage of communication occurs through body language?
   a. 55
   b. 35
   c. 15
   d. 85

2. The physician who owns the practice approaches you to discuss an increased frequency of denials. Which of the following would give the physician the impression that you have low interest in what he is saying?
   a. Arms crossed
   b. Fidgeting or little eye contact
   c. Constant eye contact
   d. Rubbing mouth or nose

3. Which of the following is NOT a typical duty of a practice manager?
   a. Fostering a referral source for new patients.
   b. Inventory control for supplies needed for minor surgeries.
   c. Preparation of the patient for the physician.
   d. Implement strategies to reduce the A/R.

4. Which of the following support staff is typically not found in an outpatient physician practice?
   a. CNA
   b. MA
   c. Medical Coder
   d. Nurse Practitioner

5. The difference between efficiency and effectiveness is:
   a. Efficiency deals with process improvement where effectiveness does not.
   b. Efficiency is doing things right while effectiveness is doing the right things.
   c. Efficiency always saves money while quality always costs money.
   d. There is no difference; these two terms are used interchangeably in quality efforts.
6. In a typical patient flow, verification of benefits will typically occur:

a. After the patient calls to schedule an appointment.
b. After the patient completes their visit with the physician.
c. During the checkout process.
d. When services are denied for lack of insurance.

7. You work for a primary care practice. A patient has recently suffered a transient ischemic attack (TIA) and your physician wants to send the patient to a specialist for a consultation. Which specialty would handle this type of diagnosis?

a. Rheumatologist  
b. Infectious Disease  
c. Endocrinologist  
d. Neurologist

8. Which of the following is an effective response when a provider is complaining about how hard it is to use the new EMR system the owner’s of the practice selected?

a. “I didn’t make the rules, I just follow them.”  
b. “I understand how you feel. I’m just as confused as you are.”  
c. “This is the way it is, unfortunately. There is nothing we can do about it.”  
d. “This is a major change. I’ll do my best to show you how it works.”

9. The following are blocks of effective communication EXCEPT:

a. Speaking and expressing your thoughts  
b. Arguing or disagreeing with the speaker  
c. Let the person know, “It’s going to be alright.”  
d. Let the person know, “I understand how you feel. It has happened to me.”

10. Which of the following statements is true?

a. Leaders are focused on tactical activities and have a more directive and control approach.  
b. When you confront issues, talking it out is the most effective form of communication.  
c. A manager’s responsibility is to deal with daily tasks and inspire and motivate employees to reach a common goal.  
d. A consolation comment is considered a block to effective communication.
11. A PA (physician's assistant) has been hired by a cardiology practice to help see patients who are in the hospital. The PA performs all the rounds and notifies the physician on call if there are any patients that need to be seen by a physician. Is it appropriate to bill for the PA's services incident-to?

a. Yes, as long as the services are consistent with an established plan of care.
b. Yes, as long as the physician sees the patient later in the day.
c. No, incident to services are not covered in a hospital setting.
d. No, the physician needs to see every patient in order to bill Incident to.

12. Which of the following will motivate employees?

a. Hold employees accountable for reaching established goals.
b. Show leniency when an employee fails to meet established goals.
c. Be flexible with the employees' schedules.
d. Hold peer reviews as part of the employees' yearly evaluation.

13. When should the staff obtain a photocopy of the patient's insurance card?

a. When the patient calls to make the appointment
b. When the patient arrives for their appointment
c. Prior to the patient leaving the office after the appointment
d. Prior to the patient scheduling the appointment.
14. Use the following policy to answer this question.

Telephone Etiquette

1 - Always answer the phone: “Medical Specialist, this is (your name), May I help you?”

2 - When taking a message:

Use the 2-ply carbon message pads.

Write the patient’s name, birth date, phone number where they can be reached, name of the person calling, relationship to the patient if they are not the patient, today’s date and time of call.

Write a brief explanation for the call.

Get a pharmacy phone number if the patient needs a refill.

Pull the patient’s chart and attach the message to give to the physician’s nurse.

3 - To transfer a call:

Get the patient’s name.

Hit “transfer.”

Enter the extension number.

Wait for someone to pick up and let them know who you have on the line. Find out if it is okay to transfer the call.

Hit “transfer” again.

The red blinking light should go out if the transfer was successful.

NEVER transfer a call until you have spoken with someone on the other end.

4 - Always keep your voice low on the phone so other patients do not overhear your conversations.

5 - Always have a pleasant voice and try to be as helpful as possible. If you have a smile on your face, the patient can hear it in your voice.
Which of the following scenarios would violate the policy provided?

a. The receptionist transfers a call to the nurse to answer the patient's questions about a prescription she was given at her last visit. Prior to transferring the call, the receptionist received the approval from the nurse to transfer the call.

b. A patient calls to inquire about the results of her lab results. The receptionist takes down the patient's name, date of birth, phone number and the date and time and attaches the message to the chart for the nurse to return the call.

c. A patient calls to get a refill on his prescription. The receptionist takes down the patient's name, birth date, phone number, date and time of the call, and the phone number for the pharmacy. The receptionist attaches the message to the patient's chart and puts it in the physician's inbox.

d. The father of a 6-year-old seen in the office the day before calls to get the results from the blood work that was performed. The receptionist takes down the patient's name, the father's name, birth date of the child, phone number of the father and date and time of the call. She gives the chart and message to the nurse.

15. Which of the following is a statement that includes the payment amount and denial explanations for claims submitted?

a. Encounter form
b. Denial reconciliation report
c. Accounts Receivable report
d. Remittance advice
1. What percentage of communication occurs through body language?
   a. 55

   Rationale: 55 percent of communication happens via general body language. It is important to understand how your body language is perceived by others for effective communication.

2. The physician who owns the practice approaches you to discuss an increased frequency of denials. Which of the following would give the physician the impression that you have low interest in what he is saying?
   b. Fidgeting or little eye contact

   Rationale: Fidgeting and little eye contact is a sign you have low interest. Arms crossed would indicate you are defensive. Touching your face makes you appear timid and constant eye contact makes you appear aggressive.

3. Which of the following is NOT a typical duty of a practice manager?
   c. Preparation of the patient for the physician.

   Rationale: Practice managers do not prepare patient’s for the physician. This function is performed by clinical staff such as a nurse or medical assistant.

4. Which of the following support staff is typically not found in an outpatient physician practice?
   a. CNA

   Rationale: CNAs work in hospitals and nursing homes. They do not work in the physician office setting.

5. The difference between efficiency and effectiveness is:
   b. Efficiency is doing things right while effectiveness is doing the right things.

   Rationale: Efficiency focuses more on processes, while effectiveness focuses more on outcomes. An effective manager’s focuses on both effectiveness and efficiency, as they review processes and systems.

6. In a typical patient flow, verification of benefits will typically occur:
   a. After the patient calls to schedule an appointment.

   Rationale: When a patient calls to make an appointment, staff should verify insurance so if the patient is not covered or the provider is not on the patient’s insurance, the patient does not waste a trip to the office.
7. You work for a primary care practice. A patient has recently suffered a transient ischemic attack (TIA) and your physician wants to send the patient to a specialist for a consultation. Which specialty would handle this type of diagnosis?

   d. Neurologist

   Rationale: TIA's are neurologic dysfunction caused by ischemia. The specialist that would treat this condition is a neurologist.

8. Which of the following is an effective response when a provider is complaining about how hard it is to use the new EMR system the owner’s of the practice selected?

   d. “This is a major change. I’ll do my best to show you how it works.”

   Rationale: When handling a difficult encounter show understanding and compassionate. Also be ready to provide assistance or a solution.

9. The following are blocks of effective communication EXCEPT:

   a. Speaking and expressing your thoughts

   Rationale: Speaking expressing your thoughts is an effective form of communication. Do not argue or patronize the physicians or staff in your office.

10. Which of the following statements is true?

    d. A consolation comment is considered a block to effective communication.

    Rationale: Consolation comments can be patronizing and can hinder effective communication.

11. A PA (physician's assistant) has been hired by a cardiology practice to help see patients who are in the hospital. The PA performs all the rounds and notifies the physician on call if there are any patients that need to be seen by a physician. Is it appropriate to bill for the PA's services incident-to?

   c. No, incident to services are not covered in a hospital setting.

   Rationale: Incident to services can only be billed in the office setting. Hospital services must be submitted under the PA provider number if the physician does not have a face to face encounter with the patient in the hospital setting.
12. Which of the following will motivate employees?

a. Hold employees accountable for reaching established goals.

Rationale: Employees are motivated to perform their job if they have clear goals and know they will be held accountable for reaching those goals. Without clearly defined expectations, employees may lose direction and not perform to their full potential.

13. When should the staff obtain a photocopy of the patient's insurance card?

b. When the patient arrives for their appointment

Rationale: When patients arrive the demographic information and insurance information should be taken from the patient. This includes making a photocopy of the insurance card.

14. Which of the following scenarios would violate the policy provided?

c. A patient calls to get a refill on his prescription. The receptionist takes down the patient's name, birth date, phone number, date and time of the call, and the phone number for the pharmacy. The receptionist attaches the message to the patient's chart and puts it in the physician's inbox.

Rationale: According to the policy provider, the receptionist should give the message and chart to the nurse, not the physician.

15. Which of the following is a statement that includes the payment amount and denial explanations for claims submitted?

d. Remittance advice

Rationale: The remittance advice explains what procedures were paid for or denied by the insurance company and for what, if any, remaining liability for which the patient is responsible.