

## **Chapter 1: Introduction to Coding and Coding Professions**

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### **TRUE/FALSE**

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

ANS: F                      PTS: 1                      DIF: M

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

ANS: T                      PTS: 1                      DIF: M

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

ANS: F                      PTS: 1                      DIF: D

4. Morbidity is the rate or frequency of deaths.

ANS: F                      PTS: 1                      DIF: M

5. CMS updates the ICD-10-CM diagnostic codes each quarter of the year.

ANS: F                      PTS: 1                      DIF: D

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

ANS: F                      PTS: 1                      DIF: D

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

ANS: F                      PTS: 1                      DIF: M

8. ICD-10-CM and ICD-10-PCS will be implemented on October 1, 2014.

ANS: T                      PTS: 1                      DIF: M

9. Coding plays a critical role in reimbursement of health care services..

ANS: T                      PTS: 1                      DIF: D

10. The selection of accurate codes has an impact on determining the medical necessity of cases.

ANS: T                      PTS: 1                      DIF: M

### **MULTIPLE CHOICE**

1. Which of the following credentials is NOT obtained through AHIMA?

a. RHIT    c. CCS

- b. RHIA d. CPC

ANS: D PTS: 1 DIF: M

2. Which of the following credentials is obtained through AMT?

- a. CCS-P c. CMA  
b. CPC d. RMA

ANS: D PTS: 1 DIF: M

3. Which of the following credentials is obtained through AAPC?

- a. CCS c. CMA  
b. CPC d. RMA

ANS: B PTS: 1 DIF: M

4. Which of the following credentials is obtained from AHIMA?

- a. RMA c. CPC-H  
b. CMA d. CHPS

ANS: D PTS: 1 DIF: M

5. Which of the following credentials validates a person's ability to protect healthcare data privacy and security?

- a. CHPS c. RMA  
b. CPC d. CMA

ANS: A PTS: 1 DIF: D

6. Which of the following organizations collaborates with the Curriculum Review of the AAMA to accredit medical assisting programs?

- a. AHIMA c. CAAHEP  
b. AAPC d. AMT

ANS: C PTS: 1 DIF: D

7. The organization that coordinates the modifications of the ICD-10-CM disease classifications is \_\_\_\_\_.

- a. AHMIA c. CMS  
b. AAPC d. NCHS

ANS: D PTS: 1 DIF: D

8. The updates to the procedural classifications of ICD-10-PCS is completed by \_\_\_\_\_.

- a. AHIMA c. NCHS  
b. CMS d. AMT

ANS: B PTS: 1 DIF: D

## COMPLETION

1. CCA is the abbreviation for \_\_\_\_\_.

ANS: Certified Coding Associate

PTS: 1 DIF: D

2. AAPC is the abbreviation for \_\_\_\_\_.

ANS: American Academy of Professional Coders

PTS: 1 DIF: D

3. AHIMA is the abbreviation for \_\_\_\_\_.

ANS: American Health Information Management Association.

PTS: 1 DIF: D

4. CPC is the abbreviation for \_\_\_\_\_.

ANS: Certified Professional Coder

PTS: 1 DIF: D

5. RHIT is the abbreviation for \_\_\_\_\_.

ANS: Registered Health Information Technician

PTS: 1 DIF: D

6. CHDA is the abbreviation for \_\_\_\_\_.

ANS: Certified Health Data Analyst

PTS: 1 DIF: D

7. AMBA is the abbreviation for \_\_\_\_\_.

ANS: American Medical Billing Association

PTS: 1 DIF: D

8. CMA is the abbreviation for \_\_\_\_\_.

ANS: Certified Medical Assistant

PTS: 1 DIF: D

9. AAMA is the abbreviation for \_\_\_\_\_.

ANS: American Association of Medical Assistants

PTS: 1 DIF: D

10. CCS is the abbreviation for \_\_\_\_\_.

ANS: Certified Coding Specialist

PTS: 1 DIF: D

11. CMRS is the abbreviation for \_\_\_\_\_.

ANS: Certified Medical Reimbursement Specialist

PTS: 1 DIF: D

12. MAB is the abbreviation for \_\_\_\_\_.

ANS: Medical Association of Billers

PTS: 1 DIF: D

13. CMBS is the abbreviation for \_\_\_\_\_.

ANS: Certified Medical Billing Specialist

PTS: 1 DIF: D

14. CMBS-H is the abbreviation for \_\_\_\_\_.

ANS: Certified Medical Billing Specialist for Hospitals

PTS: 1 DIF: D

15. CMBS-CA is the abbreviation for \_\_\_\_\_.

ANS: Certified Medical Billing Specialist for Chiropractic Assistants

PTS: 1 DIF: D

16. CMBSI is the abbreviation for \_\_\_\_\_.

ANS: Certified Medical Billing Specialist for Instructors

PTS: 1 DIF: D

### **SHORT ANSWER**

1. Discuss the purpose of professional coding associations.

ANS:

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.

PTS: 1 DIF: D