AHIMA

CCS-P

AHIMA Certified Coding Specialist - Physician-based

Latest Version: 6.0

Question: 1

A 14-year-old patient is seen for an annual sports physical. During the exam, the physician discovers the patient has asymptomatic scoliosis. What is the correct sequencing?

A. Z00.00, M41.9
B. Z02.5, M41.9
C. M41.9, Z02.5
D. M41.9, Z00.121

Answer: B

Question: 2

A patient is seen for "Allergic rhinitis due to pollen". The patient also has "Asthma". What is the correct code assignment?

A. J45.909, J30.1
B. J30.2
C. J30.9
D. J30.1, J45.909

Answer: D

Question: 3

A patient with Type 2 diabetes is seen for a follow-up of "diabetic mild nonproliferative retinopathy with macular edema". What is the correct ICD-10-CM code assignment?

A. E10.3211
B. E11.9, H35.81
C. E11.3219
D. E11.311

Answer: C

Question: 4

A practice identifies a Credit Balance on a patient's account due to an overpayment by Medicare. What is the legally required action?

A. Refund the overpayment to Medicare within 60 days of identification.
B. Apply the credit to the patient's next visit.
C. Keep the money as a "bonus" for efficient coding.
D. Transfer the balance to the physician's personal account.

Answer: A

Question: 5

An established patient is seen for a 25-minute office visit. The physician spends 20 of those minutes in counseling and coordinating care regarding a new diagnosis of Stage 4 CKThe physician chooses to level by time. What is the correct E/M code?

A. 99214
B. 99212
C. 99215
D. 99213

Answer: D

Question: 6

The OIG Work Plan is updated monthly. If a coder sees an entry regarding "Audit of Orthopedic Surgeons' use of Modifier -25," what should the clinic's compliance officer do?

A. Stop using Modifier -25 immediately.
B. Report the orthopedic surgeons to the OIG proactively.
C. Ignore the notice as it only applies to hospital-based physicians.
D. Conduct an internal "shadow audit" on a sample of claims using Modifier -25 in the orthopedic department.

Answer: D

Question: 7

Which metric is most commonly used to research the "return on investment" (ROI) of a CAC implementation in a multi-specialty clinic?

A. The number of physicians in the group.
B. Coding "Days in Accounts Receivable" (A/R) and Coder Accuracy Rate.
C. The cost of CPT codebooks.
D. Total number of patients seen per day.

Answer: B

Question: 8

Under the False Claims Act, what is the legal term for a "whistleblower" who reports a provider for knowingly submitting fraudulent claims to the government?

A. Relator
B. Adjudicator
C. Beneficiary
D. Defendant

Answer: A

Question: 9

A surgeon sees a patient in the ED and decides the patient needs immediate major surgery (90-day global). The surgery is performed the same evening. What modifier is appended to the ED E/M code?

A. -58
B. -57
C. -51
D. -25

Answer: B

Question: 10

A medical scribe assists a physician by documenting the encounter in the EHR. To be compliant, what must the physician do at the end of the note?

A. Nothing; the scribe's signature is sufficient.
B. Co-sign the note at the end of the week.
C. Review, sign, and date the note, including a statement that they were present and personally performed the services.
D. Sign the note but do not edit the scribe's work.

Answer: C

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