Hi here are the 10 questions to use for the flex grant.  Let me know if questions.  See you all very soon!

1. What is the strength of a financial pre –admission program?  Pick the most right answer:  a) insurance benefits confirmed,  b) pt’s self pay balance explained with payment plans outlined, c) nursing visit to discuss home plans,  d) a& b  or  e) a, b, & c   (answer   d)
2. Charge capture identifies  a) the dept who is to ensure the charges are right, b) the PFS staff who audit prior to submitting the claim or c) the dept who ensures there are orders to match the charges that matches the documentation.  (answer :  c)
3. Why is the US so slow to get converted to ICD 10:  a) physician’s concerns in their office, b) payers who are not ready, c) providers and payer testing challenges, d) inability to get a firm ‘go live’ date to begin the conversion, e) a, c, d  or  f) a, b, c.   (Answer:  e)
4. What technology is available to enhance insurance benefit history:  a) websites,  b) 270 eligibility, c) phone calls to the payers, d) a& b, e) b  (answer:  b..but it could be d too, depending on how they think of website )
5. What are the different types of point of service collection?  A) credit card,  b) cash,  c) promise of payment ,  d) payment plan initiated , e) a, b  or f) a, b, d..  (Answer f)
6. CDM means : a) a dictionary to track payments, b) a form to change charges, c) a dictionary/table to create billable and stats only,  or d) a table of all billable items. (Answer c)
7. What is the power of a detailed pt access registration? A ) 1st point of contact   b) complete demographic review, c) update of all pt information or d) insurance update  (answer c)
8. ICD-10 is a new updated coding system,.  What are some of the key features:  a) 7 digits, b)  alpha character 1st, c)  alpha and numeric for 5 digits or d) 7 alpha/numeric for all dx  (answer b)
9. Name 2 of the top lost charge items:  a) drug adm in OBS and ob  b)  OR interrupted and emergency call back   c) reduced service in all departments .  (Answer a)
10. What is the value of prior authorization:  a) identify the limitations of the insurance coverage, b) identify what the payer will cover and confirm payment or c) talk to the insurance and explain who the hospital/doctor will bill for the service.  (answer: a)