Product Training - Q1

The respondent's email (hemitr@meditab.com) was recorded on submission of this form.

Who is our client audience for web EHR? *	
In Patient + General Specialty	
Out Patient + General Specialty	
Out Patient + Dental	
Out Patient + Allergy	×
In Patient + Allergy	
Out Patient + Urgent Care	
Correct answer	
Out Patient + General Specialty	
★ Do our clients admit patients? *	
Yes	×
O No	
Correct answer	
No	

★ Would our clients care the patient admitted through emergency? *	A
YesNo	⊕ ★
Correct answer No	₹
★ How do majority of the patients get insurance in USA? *	?• <u>;;</u> }
Through GovernmentSelf Buy from Market PlaceThrough Employer Provided Options	<>>
Correct answer Through Employer Provided Options	
✓ an Aged Person would be covered through which Option? *	
MedicareMedicaidCommercial Insurance	

✓ A person with less income would be covered through? *	≡ ₩
Medicare	()
Medicaid	⟨S✓
Commercial Insurance	⋮
✓ How many insurances one person can have? *	.
One Primary and One Secondary	
Only One Primary	
One Primary and one family plan	
Any	=
✓ John was insured through Low income Insurance of California State. Now is moving to a new state, New York. Would he insured in New York throug low income insurance?	* h
	\triangle
Yes	(i)
O No	
If his income is less then New York's Poverty Level	/
	•
	S

Robin is having a knee pain. He wants to go to orthopochecked.	edic surgeon and get**
Yes, he can meet the orthopedic doctor	₾
No, he would have to get an approval from his insurance	
	(A)
★ When would copay be generally collected? *	₹ +
While booking appointment	
While checking the patient in	A
While creating the charge for the visit	⊕ × ♠
Correct answer	₩
While checking the patient in	
	→
★ What is Copay? *	
A Fixed amount patient has to pay for each visit	⇔
A % of amount patient has to pay for each visit	$\langle \rangle$
Any of the Above	
Correct answer	×
Any of the Above	

✓ How is patient made liable to pay in case the insurance denies the p ○ Through Verbal Committment	aymen <u>i?</u> *
 The insurance would compel the patient to pay Through Signed Financial Consent 	(<u>)</u>
✓ Which Feature is used to check whether the patient has active insuranot?	ance or *
AuthorizationIdentity Verification	(i)
Claim Check Eligibility Check	✓
O Benefits Check	
✓ How can the staff check if the patient has active insurance or not? *	2
Call the Insurance	
Go to insurance's website and check	()
Perform electronic check from application	
All of the Above	~
None of the Above	~
	0

✓ How do we store our client's data? *	=
One DB shared for all clients Each client having their own separate database Hybrid of both of the above	○✓
Tryblid of both of the above	: ≡
✓ Do we host separate front end and back end code for each client? *	i
YesNo	✓
Yes, if their database are separate	••••
✓ How would the staff know if the provider is on lunch right now or not? *	?
 ✓ How would the staff know if the provider is on lunch right now or not? * ○ They take up a meeting everyday morning and go through the whole day 	
They take up a meeting everyday morning and go through the whole day	?
 They take up a meeting everyday morning and go through the whole day Through Provider's set availability in scheduler 	
 They take up a meeting everyday morning and go through the whole day Through Provider's set availability in scheduler 	
 They take up a meeting everyday morning and go through the whole day Through Provider's set availability in scheduler 	

×	Which one is the correct sequence? *	
•	Find Slot -> Add Appointment Details -> Book Appointment -> Fill out forms -> Check In	<> × ▲
0	Find Slot -> Book Appointment -> Fill out forms -> Check In -> Fill out Forms	×
	Book Appointment -> Check Insurance -> Check In -> Collect Copay None of the Above	
0	All of the Above	<u> </u>
Corr	ect answer	95
•	All of the Above	***
		•
		Ŷ
		^
		Û
		(3)
		× *
		- ✓ ⊗ =

- X Patient bar shows *
- Demographics
- Allergies
- Diagnosis
- ✓ Vitals
- Insurance
- Immunizations
- ✓ Notes
- Problem List
- ✓ Lab Results
- All of the above

Correct answer

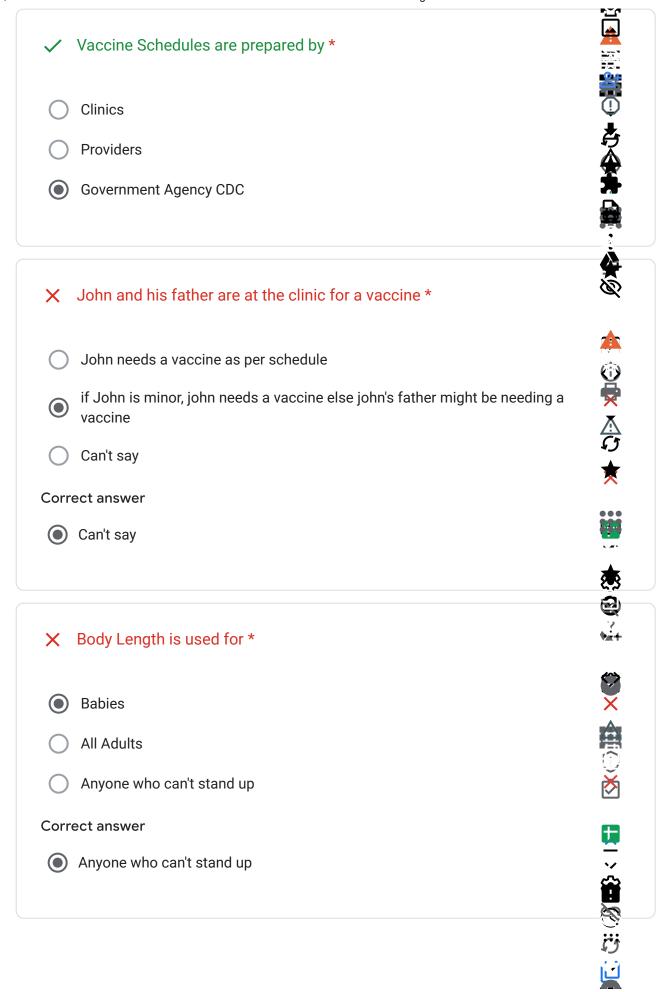
- Demographics
- Allergies
- Vitals
- Insurance
- Notes
- Problem List



✓ When would case be appropriate to use? *	
Clinic having multiple specialties	*
Patient is injured on work place	
Patient needs referral for a visit	
Patient needs authorization for a visit	
All of the Above	\checkmark
None of the Above	₩
X What would generally be not covered through a general insurance? *	į
O Dental Visits	
Eye Visits	<>
Cosmetic Surgeries	×
All of the Above	<u>企</u> [雪]
None of the Above	×
Correct answer	•
All of the Above	
	€
	:::
	Ŷ

~	Which date would be sent while checking the insurance details of the patient?	*
	Today's Date Date of the Appointment/Visit Any of the Above None of the Above	
×	Which insurance would be used while using the case? *	はなるぐ
•	Worker Compensation Insurance	X A
0	Specialty related insurance	
0	Insurance stored in Case	⊕ € €
0	None of the Above	€
Corre	ect answer	
•	Insurance stored in Case	67;
×	A clinic wants to store patient document in their own folder structure *	?
	Not Descible	K
	Not Possible Parallel through a start	× À
0	Possible through setup	※
Corre	ect answer	
•	Possible through setup	<u>+</u>
		\$

John starts having rashes on skin once he consumes peanuts. John is having	100 *
Allergy of the peanutsDiagnosis of the peanutes intolerance	©
not having enough immunity	<u>▲</u> * •
✓ John's problem list has diabetes listed as a problem *	8
O John is having diabetes	A
John's father is having diabetes	8
John's mother is having diabetes	
Any of the above is possible	*
★ John's father had an accident yesterday, should that go to john's problem list?	m ★*
Yes	
No, accidents are no hereditary	(i)×
O Doctor decides	\triangle
Correct answer	×
Doctor decides	
	::: \$\inf\$



✓ One Prescription can have *	
 only one medication multiple medication related medications can be combined 	♥★■
✓ Central Agency for Prescription *	(i)
Surescript	✓
○ CDC	==
O HL7	
Quest	•
Cab Corp	A +
Clearing House	Ż
None of the Above	()
	~
	0
	•

★ Central Agency for Insurance Claims *	
	<>
	× <u>∧</u>
Surescript	<u> </u>
○ CDC	×
O HL7	
Quest	_
Cab Corp	€ \$
Clearing House	:::
None of the Above	•
Correct answer	***
Clearing House	***
	Ż
	^
	Â
	•
	<i>C</i> 5
	•••
	()
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	=
	~
	- ✓ <u>©</u>

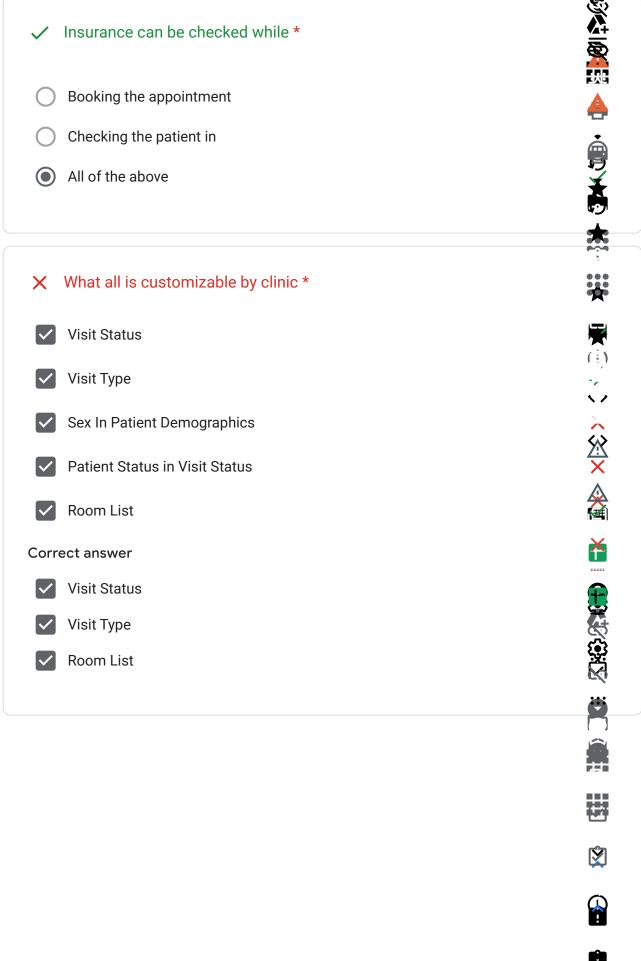
★ Central Agency for Labs *	⊘ • •
○ X12	% +
Surescript	
CDC	*
O HL7	*
Quest	₽
Cab Corp	
Clearing House	≜ © ⊕
None of the Above	ફ્કુડ <u>ઢ</u>
Correct answer	:::
None of the Above	
	⊙
	ر يف
	*
★ How can prescriptions be sent to pharmacies? *	
X How can prescriptions be sent to pharmacies? *C Eletronically	** ** **
	** **
Eletronically	** ** ** ** **
EletronicallyPapers	** ** ** ** **
EletronicallyPapersFax	** ** ** **
EletronicallyPapersFax1 and 2	** ** ** ** **
 Eletronically Papers Fax 1 and 2 All - 1,2,3 	
 Eletronically Papers Fax 1 and 2 All - 1,2,3 Correct answer 	

~	What can be part of assessment? *	
0	Problem List	盘
0	Allergy	
0	Diagnosis for this visit	
0	1 and 3	
•	All - 1,2,3	
		-
		⊕
×	What can be part of the plan? *	s
		*
0	Prescription	
0	Followup	•••
0	Referral	*
0	Lab Tests	
0	Vaccines	=
•	1,2,3 and 4	X
0	All of the above	
Corr	ect answer	
•	All of the above	

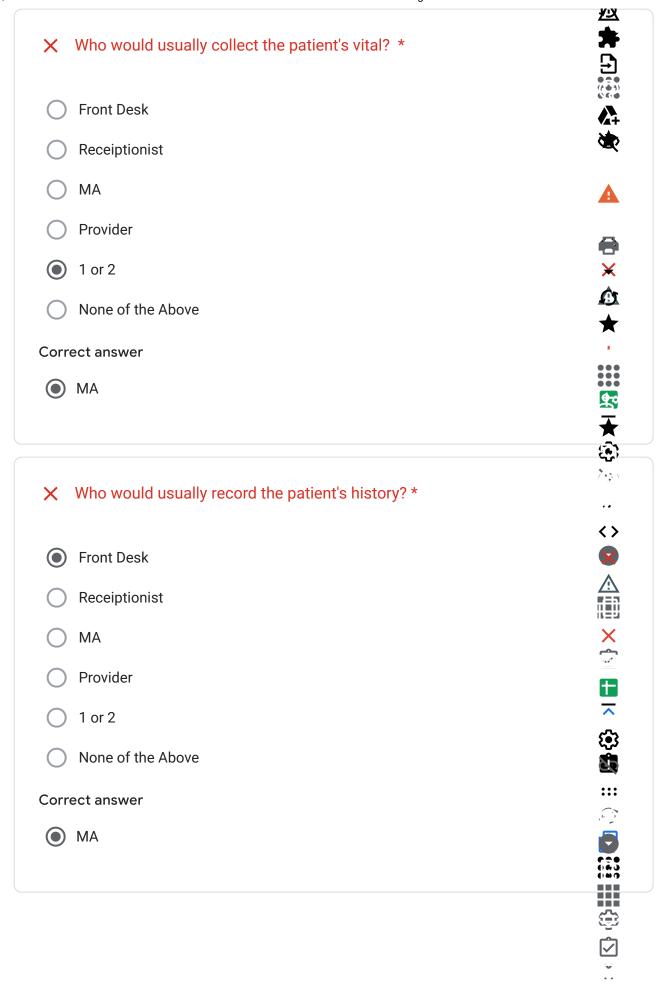
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		V .

How would provider convey that he only wants to see new patients in the morning Manually to Staff Via Reserved Slots Text Notes on the Slots What all can be possible Job Roles in a clinic? * Front Desk Medical Assistant Provider Admin Supervisor Manager **CEO** Billing Manager Billing Admin Medical Supervisor All of the Above Correct answer All of the Above

✓ How can your scheduler preferences be	_
through "Workflow Criteria" screen	
through Filter Criteria screen	<u>s</u>
though Workflow configuration screen	
✓ How would the application know the parameters of the parame	tient is in waiting or being attended
Through Visit Status of the Patient	-
Through Patient Status of the Visit Status of	of the Patient
Through Patient Status of the Patient	
X The Timer would be running when *	*
The filler would be fallining when	<u> </u>
When the patient is in waiting	
When the patient is being attended by the s	staff
All the times	staff A
Correct answer	
All the times	-
	\$\cdot \cdot
	<u>Q</u>



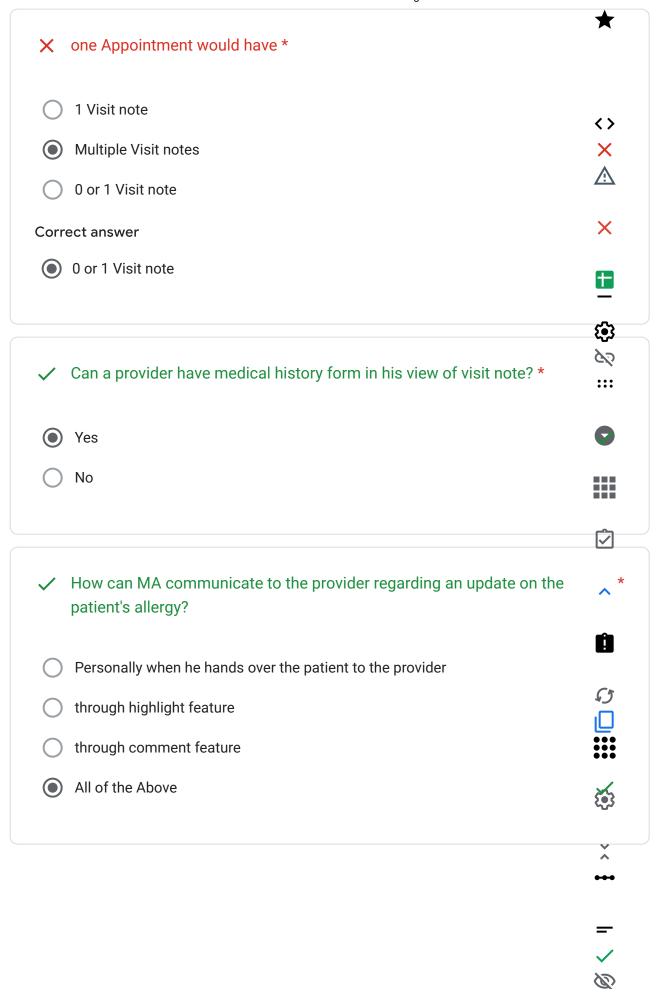
★ How many times copay payment can be made? *	
Only once at check in	X
Only once at appointment	
one time at appointment, one time at check in	×
Any number of times	₽
Correct answer	
Any number of times	क्र देश *
	*
Who would check the patient in? *	?
	<> >
Front Desk	× <u>×</u>
Receiptionist	
○ MA	×
O Provider	<u> </u>
1 or 2	æ
None of the Above	
Correct answer	***
① 1 or 2	8
	#¥#
	~~ [⊅
	⊘
	<u>-</u> ★ №



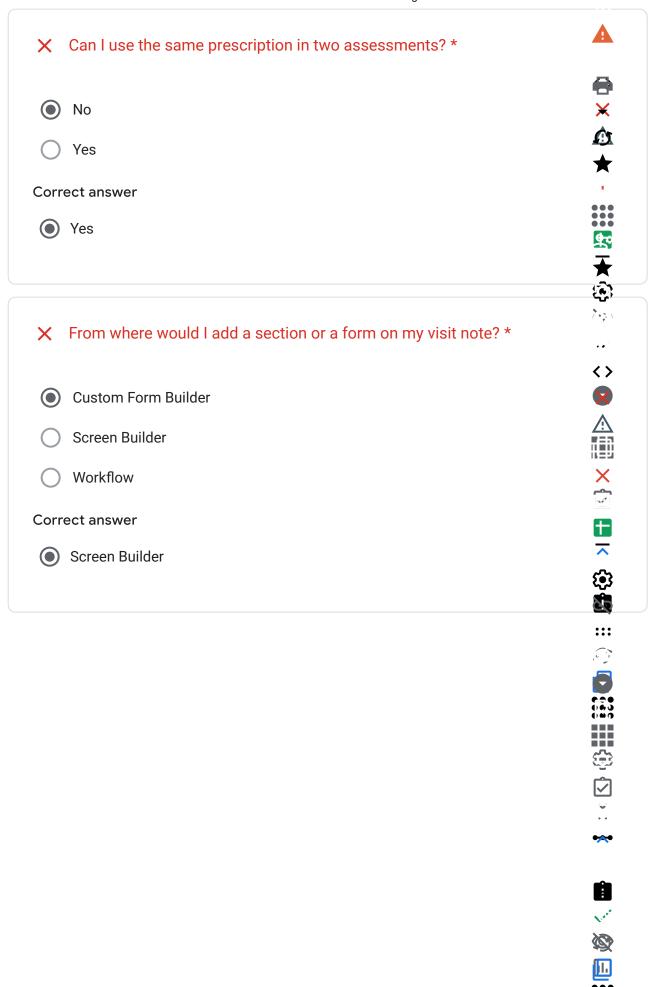
~	Who would usually create superbill *	<u>^</u>
С) Front Desk	≣
С) Receiptionist	•••
С) MA	()
•) Provider	
С	3 or 4	• • • • • • • • • • • • • • • • • • •
С	None of the Above	=
~	Who would usually do assessment & plan *	i
С) Front Desk	
С) Receiptionist	
С) MA	=
•) Provider	✓
С	3 or 4	?
С	None of the Above	4
		Ż
		(i)
		~
		()
		•

	A provider has to create superbill and then sign off the visit so billing can started	b= *
0	Yes No, just creating superbill is enough, visit note not signed off is not an issue	<> × ▲
	No, signing off visit note is enough. the billing can be started without superbill is some clinics can't say, depends on the clinic	n 🗶
Corre	ct answer can't say, depends on the clinic	<i>₩</i>
		:::
✓ \	Which screen is used most by front desk *	
0	Scheduler	Ŷ
0	Patient chart	^
•	Check In check Out	✓
0	Visit Note	î G
✓ \	Which screen is used most by provider *	•••
0	Scheduler	
0	Patient chart	× ×
0	Check In check Out	
	Visit Note	₩ *>
		<u>₩</u>

★ Which screen is used most by Medical Assistants *	★ →
Scheduler	
Patient chart	
Check In check Out	
Visit Note	Ä
3 or 4	₽
Correct answer	<i>€</i> 3
3 or 4	द्भ
	400
★ Can a patient see doctor without an appointment? *	8
Yes	()
No	X
Correct answer	
Yes	ă
	Ŏ
	رىمان
	=
	<i>⊗</i> ;
	(E)



★ How can we customize visit note layout	?*
Layout ConfigurationScreen BuilderCustom Form Builder	
 Screen Builder and Layout Configuration Workflow Workflow Configuration Workflow and Workflow Configuration Correct answer	
Screen Builder and Layout Configuration	<i>Ç</i> y ★
X How can we customize Left hand menu	options in screens like To Be Billed? *
Layout ConfigurationScreen Builder	<u>2</u>
Custom Form BuilderScreen Builder and Layout Configuration	
Workflow Configuration	ॐ



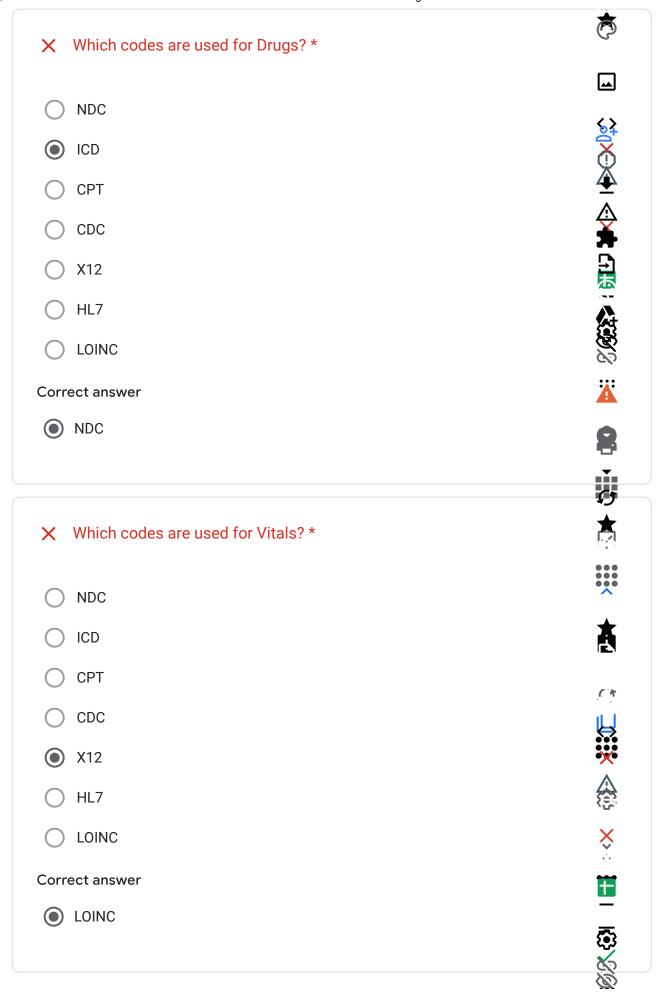
Which all mediums the application support for communication? *	<i>ಟ</i> ★
☐ Fax ☐ Email ☐ Text	***
Voicemail	
Chat All of the Above	<> × <u>∧</u>
Correct answer	<u> </u>
Fax	×
Email	
Text	=
Voicemail	€ ≿ ? :::
✓ Which one of below would usually have more and correct information	tion to b
sent for claims? Superbill Visit Note Charge Posting	

		
×	A provider has added two services in the superbill and 2 diagnosis for each	∤ . ★
	of them. What can the biller do?	\$
~	Change the services and Dx, cannot add a 3rd service	×
	Change the services and Dx, can add more services , can't delete the services	_
	added by provider	-
	Change Dx only, can't change services	•
		€
	Whatever the biller wants	-
Corre	ect answer	
	Whatever the biller wants	123
	Whatever the biller wante	÷ : :
		*
		2
×	From where the biller would start his flow usually? *	
	•	
		<>
	Superbill	1% 1
		☆
	To be billed	<u> </u>
	Charge Posting	×
		<u> </u>
Corre	ect answer	
	T 1 120 1	
	To be billed	1 7
		2
		:::
		∵

		٦
		1
		Ø

★ Which codes are used for Services? *	
NDC	
OICD	
○ CPT	<u>*</u>
CDC	<u> </u>
O HL7	*
LOINC	Ø
Correct answer	<u> </u>
○ CPT	
★ Which codes are used for diagnosis? *	***
★ Which codes are used for diagnosis? *	**
Which codes are used for diagnosis? * NDC	
	1 21 G 4 A
O NDC	
O NDC O ICD	
○ NDC ○ ICD ○ CPT	
NDCICDCPTCDC	
NDCICDCPTCDCX12	
 NDC ICD CPT CDC X12 HL7 	
 NDC ICD CPT CDC X12 HL7 LOINC 	

E



✓ Who decides the standards for Claims? *	<u>↓</u> <u>↑</u>
NDC	₹
OICD	≣ :::
○ CPT	•••
○ CDC	()
O HL7	✓ : :
LOINC	≡
Which screen would be used to generate and send claims service?	_
Claim Tracking	
Batch Tracking	
Batch TrackingReady to Claim	=
	7
	? ⊘ △
	7
	? ∴ ∴
	?
	? ∴ ∴
	? ∴ ∴

	_
✓ What does EOB stands for? *	≣
Electronic Objection of Benefits	
Explanation Of Beneficiary	()
Explanation of Benefits	✓ -
Example of Benefits	✓ • • ≡
Explanation of Bounty	≡
✓ What does ERA stands for? *	(j)
Electronic Remittance Adjustment	
Electronic Remittance Advice	✓
Explanation of Remittance Advice	::::
Electronic Result Advice	
Electronic Result Adjustment	?
	Ż
	(i)
	~
	0

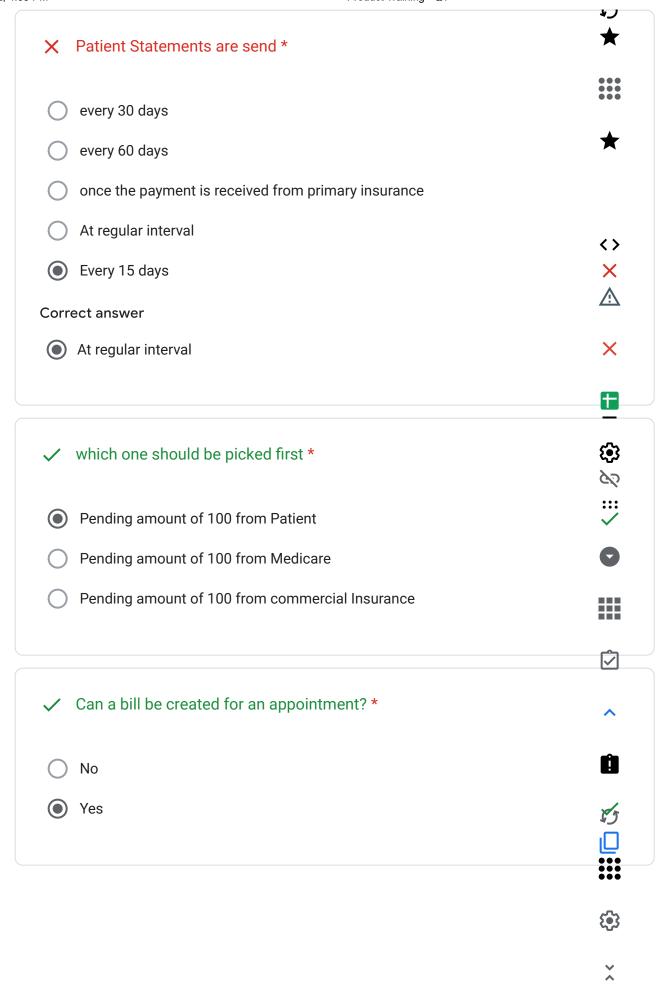
✓ Which standard is used for sending paper claims? *	≡
X12 837	()
© CMS 1500	
O CDC 1500	✓ : :
O CMK 1500	=
O CMS 1550	
O CDC 1550	<u>.</u>
✓ How would the clinic receive the payment from insurance? *	
Cash	: <u>:::</u> :
Check	
Electronic Fund Transfer	•
Any of the Above	
	Ź
	<u> </u>
	U
	~
	0
	•

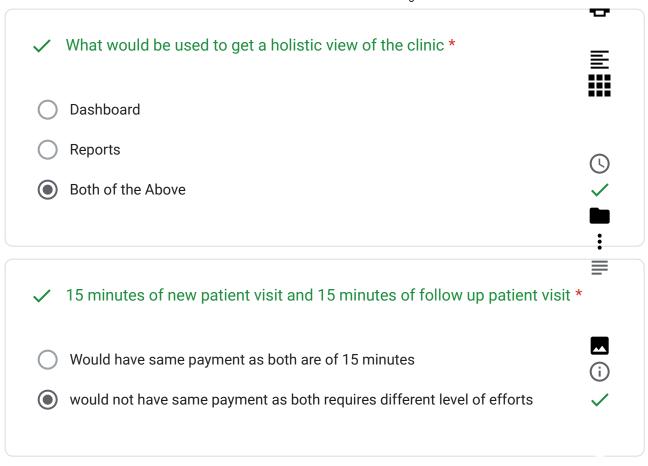
★ When would clinic receive payment from insurance? *	&+ & <>>
With EOB	X
O Before EOB	
○ After EOB	×
Any of the Above	
Correct answer	
Any of the Above	ঞ্ ১২ ★
	*
★ What does AR stands for *	?
	K 3
Amounts Receivable	×
Accounts Receivable	
Accounts Review	×
Amounts Review	<u> </u>
Accounts Result	<u></u>
Amounts Result	
Correct answer	•••
Accounts Receivable	
	<u> </u>
	÷ ✓ ₹

	*
★ What all can happen after response from primary insurance? *	
Transfer nanding amount to accordant	
Transfer pending amount to secondary	<>
Transfer pending amount to patient	X
orrect and resubmit the claim again to primary	A
appeal to primary	×
All of the above	_
	<u>+</u>
Correct answer	س م
All of the above	€ }
	:::
The insurance is not going to pay as the services are not covered for the	*
patient, hence the claim is	
Rejected	Ż
Dejected for normant	
Rejected for payment	^
Denied	✓
	Û
	55
	•••
	~~~
	<b>~</b>
	^
	*
	_
	<b>✓</b>
	Ø

There was some error in information hence the insurance was r start the process, hence the claim is	not able to **
Rejected Rejected for payment Denied	<> × <u>∧</u>
Correct answer  Rejected	×
✓ Where is the insurance's payment related information stored for	r each service *
<ul><li>With Insurance, we don't get it</li><li>Fee Schedule</li><li>Fee Structure</li></ul>	
✓ The Clinic would charge more because *	
<ul> <li>They don't know the latest allowed amount from insurance</li> <li>They don't want to maintain the updated amounts</li> <li>Both of the Above</li> </ul>	
	× ••• = •/

<ul> <li>If 100 is pending to be claimed from Medicare and 100 is pending to be claimed from Commercial insurance, which should be picked first and</li> <li>Medicare as it is tough to extract payment from govt</li> <li>Commercial as it is tough to extract payment from them</li> <li>Commercial as it has less number of days to send claim</li> </ul>	why *
Medicare as it is tough to extract payment from govt	X
Commercial as it is tough to extract payment from them	
Commercial as it has less number of days to send claim	×
Medicare as it has less number of days to send claim	<b>£</b>
Correct answer	_
Commercial as it has less number of days to send claim	्र्य इंट
	*
★ Showing the Chronological record of what happened for one service *	?
	<>
AR	×
Patient Ledger	
Charge Posting	×
Insurance Payment Posting	Ê
Patient Payment Posting	<u> </u>
Correct answer	
Patient Ledger	•••
	•
	<u>-</u> ✓
	\$\$





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