



Healthcare Management: An Introduction

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QUESTION 1

A health plan may use one of several types of community rating methods to set premiums for a health plan. The following statements are about community rating. Select the answer choice containing the correct statement.

A. Standard (pure) community rating is typically used for large groups because it is the most competitive rating method for large groups.

B. Under standard (pure) community rating, a health plan charges all employers or other group sponsors the same dollar amount for a given level of medical benefits or health plan, without adjusting for factors such as age, gender, or experience.

C. In using the adjusted community rating (ACR) method, a health plan must consider the actual experience of a group in developing premium rates for that group.

D. The Centers for Medicare and Medicaid Services (CMS) prohibits health plans that assume Medicare risk from using the adjusted community rating (ACR) me

Correct Answer: B

QUESTION 2

One way in which a health plan can support an ethical environment is by

A. requiring organizations with which it contracts to adopt the plan\\'s formal ethical policy

B. developing and maintaining a culture where ethical considerations are integrated into decision making at the top organizational level only

C. establishing a formal method of managing ethical conflicts, such as using an ethics task force or bioethics consultant

D. maintaining control of policy development by removing providers and members from the process of developing and implementing policies and procedures that provide guidance to providers and members confronted with ethical issues

Correct Answer: C

QUESTION 3

Bill Clinton is a member of Lewinsky\\'s PBM plan which has a three-tier copayment structure. Bill fell ill and his doctor prescribed him AAA, a brand-name drug which was included in the Lewinsky\\'s formulary; BBB, a non-formulary drug; and CCC, a generic dr

A. CCC, AAA, BBB

B. BBB, CCC, AAA

- C. BBB, AAA, CCC
- D. CCC, BBB, AAA

Correct Answer: A



QUESTION 4

In health plan terminology, demand management, as used by health plans, can best be described as

A. an evaluation of the medical necessity, efficiency, and/or appropriateness of healthcare services and treatment plans for a given patient

B. a series of strategies designed to reduce plan members\\' needs to utilize healthcare services by encouraging preventive care, wellness, member self-care, and appropriate use of healthcare services

C. a technique that prevents a provider who is being reimbursed under a fee schedule arrangement from billing a plan member for any fees that exceed the maximum fee reimbursed by the plan

D. a system of identifying plan members with special healthcare needs, developing a healthcare strategy to meet those needs, and coordinating and monitoring the care

Correct Answer: B

QUESTION 5

From the answer choices below, select the response that correctly identifies the rating method that Mr. Sybex used and the premium rate PMPM that Mr. Sybex calculated for the Koster group.

- A. Rating Method book rating Premium Rate PMPM \$132
- B. Rating Method book rating Premium Rate PMPM \$138
- C. Rating Method blended rating Premium Rate PMPM \$132
- D. Rating Method blended rating Premium Rate PMPM \$138

Correct Answer: C

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