



# AHM-540<sup>Q&As</sup>

Medical Management

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### QUESTION 1

By definition, the development and implementation of parameters for the delivery of healthcare services to a health plan's members is known as

- A. utilization management (UM)
- B. quality management (QM)
- C. care management
- D. clinical practice management

Correct Answer: D

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### QUESTION 2

Occasionally, employers combine workers' compensation, group healthcare, and disability programs into an integrated product known as 24-hour coverage. One true statement about 24-hour coverage is that it typically

- A. increases administrative costs
- B. requires plans to maintain separate databases of patient care information
- C. exempts plans from complying with state workers' compensation regulations
- D. allows plans to apply disability management and return-to-work techniques to nonoccupational conditions

Correct Answer: D

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### QUESTION 3

Adele Stanley, a member of the Greenhouse Health Plan, recently went to a network pharmacy to have a prescription filled. The pharmacist informed Ms. Stanley that the prescribed drug was not in the plan formulary and that reimbursement for the drug was not available except in extraordinary circumstances. The pharmacist asked Ms. Stanley if she would accept a generic substitute.

The paragraph below contains two pairs of terms enclosed in parentheses. Determine which term in each pair correctly completes the paragraph. Then select the answer choice containing the two terms that you have chosen.

Greenhouse's prescription drug reimbursement policy indicates that the plan formulary is classified as (open / closed), and that compliance by patients and providers is (mandatory / voluntary).

- A. open / mandatory
- B. open / voluntary
- C. closed / mandatory
- D. closed / voluntary



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Correct Answer: C

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#### QUESTION 4

Determine whether the following statement is true or false:

All health plans participating in the Federal Employee Health Benefits Program (FEHBP) are required to use the Consumer Assessment of Health Plans (CAHPS) to measure customer satisfaction.

A. True

B. False

Correct Answer: A

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#### QUESTION 5

For this question, if answer choices (A) through (C) are all correct, select answer choice (D). Otherwise, select the one correct answer choice.

The QAPI (Quality Assessment Performance Improvement Program) is a Centers for Medicaid and Medicare Services (CMS) initiative designed to strengthen health plans' efforts to protect and improve the health and satisfaction of Medicare beneficiaries. QAPI quality assessment standards apply to

A. standard medical-surgical services

B. mental health and substance abuse services

C. services offered to Medicare enrollees as optional supplementary benefits

D. all of the above

Correct Answer: D

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