

# *Medical Professional*

*Care-Manager  
Care Manager Certification Exam*



**For More Information – Visit link below:**

**<https://www.examsboost.com/>**

## **Product Version**

- ✓ Up to Date products, reliable and verified.
- ✓ Questions and Answers in PDF Format.

---

# Latest Version: 6.0

## Question: 1

An insurance plan that supplements services not covered by Medicare is known as:

- A. Medicaid
- B. Social Security Disability Insurance
- C. Medigap
- D. TRICARE

**Answer: C**

Explanation:

Medigap plans are insurance plans that supplement services not covered by Medicare. On the other hand, Medicaid is federally funded insurance for the poor. TRICARE is related to military.

## Question: 2

Payment based on a fixed daily dollar amount is known as:

- A. per diem reimbursement
- B. cost-based reimbursement
- C. capitation
- D. fee for service

**Answer: A**

Explanation:

The question defines a per-diem reimbursement. A cost-based reimbursement refers to actual costs of a consumer's care. In fee for service, the provider bills the insurance company and the company pays for services. Capitation is a fixed monthly payment paid to a provider in advance of services.

## Question: 3

Which of these statements is true about hospice care?

- A. Hospice care is solely for consumers with terminal malignancies
- B. Hospice is for consumers who have six or fewer months to live
- C. In hospice, all further medical treatment has been stopped, including palliation
- D. Hospice care is for any terminal condition

**Answer: D**

Explanation:

Answers A and C are common misconceptions. Hospice is for consumers with any terminal condition. Answer B is incorrect because it is difficult to know exactly how much longer a terminal consumer will live. Even in the face of discontinuing aggressive therapy, consumers in hospice care should receive palliative care to maximize comfort.

### Question: 4

All of the following are true about Medicare Select EXCEPT:

- A. Medicare Select is a Medicare supplemental health insurance product
- B. Medicare Select policies are managed care plans
- C. Medicare Select plans are higher in cost than traditional Medigap plans
- D. with Medicare Select, a consumer is required to use specific hospitals, clinics, and sometimes even specific physicians

**Answer: C**

Explanation:

Medicare Select plans have lower premiums than Medigap policies because of their requirement to use specific facilities and, sometimes, specific physicians. All of the other statements are true.

### Question: 5

Which of these is an eligibility criterion for CHIP?

- A. patient over age 65
- B. low income
- C. having supplemental insurance
- D. outpatient coverage only

**Answer: B**

Explanation:

The Children's Health Insurance Program (CHIP) is an insurance program for children. To be eligible for CHIP, federal guidelines must be met. The child's family must be of low-income status, not qualify for Medicaid, and not have any medical insurance. CHIP does cover inpatient services in addition to outpatient services.

### Question: 6

Which of the following applies to Tricare Prime?

- A. It is an HMO option

- B. It is a PPO option
- C. It is a fee-for-service option
- D. It covers all health care

**Answer: A**

Explanation:

Tricare Prime is an HMO option. Tricare is the PPO option. Tricare Standard is the fee-for-service option. Tricare Prime does not cover all health care procedures. There are some items that require preauthorization.

### Question: 7

Which of the following applies to CHAMPVA?

- A. It is valid for three of the seven uniformed services
- B. CHAMPVA is part of the Tricare system
- C. CHAMPVA coverage does not stop when the participants become eligible for Medicare
- D. CHAMPVA covers veterans

**Answer: C**

Explanation:

The Civilian Health and Medical Programs of Veterans Affairs (CHAMPVA) is a law allowing medical benefits to survivors and dependents of veterans who are permanently and completely disabled with a service-related condition. It is valid for all seven uniformed services. CHAMPVA is not part of the Tricare program. CHAMPVA coverage does not stop when a participant becomes eligible for Medicare. CHAMPVA does not cover veterans; only dependents of veterans.

### Question: 8

Which of the following is a Social Security program that provides supplemental income to eligible beneficiaries?

- A. AFDC
- B. CHIP
- C. SSDI
- D. SSI

**Answer: D**

Explanation:

SSI is part of the Social Security program. Its benefits are available to low-income people of any age who are disabled. AFDC (Aid to Families with Dependent Children) is a government program that assists low-income families. CHIP (Children's Health Insurance Program) provides assistance to low-income

---

families who do not qualify for Medicaid. SSDI is social security disability insurance.

### Question: 9

All of the following are true about disability insurance EXCEPT:

- A. disability insurance is most often limited to income replacement coverage
- B. medical care is occasionally included in coverage
- C. disability insurance is considered a medical plan
- D. disability insurance only covers illness or injury not covered by workers' compensation

**Answer: C**

Explanation:

Disability insurance is not considered a medical plan. The rest of the answer choices are correct.

### Question: 10

Medicare Part D

- A. covers hospital/hospitalization expenses
- B. provides a prescription drug benefit
- C. is synonymous with Medicare Advantage
- D. covers physician services, diagnostic tests, medical equipment, and ancillary services

**Answer: B**

Explanation:

Medicare Part D provides prescription drug benefits. Medicare Part A covers hospital expenses.

Medicare Part B covers services listed in D: Medicare Advantage is another name for Medicare Part C.

### Question: 11

Which of the following is true about viatical settlements?

- A. They are classified as an insurance product
- B. They are a type of death benefit
- C. They involve sale of a life insurance policy to a third party before death occurs
- D. When the policy is sold, it is not necessary for beneficiaries to sign a release to waive rights to the policy

**Answer: C**

Explanation:

With viatical settlements, a third party purchases the policy (or a portion of it) at an amount that is less than the death benefit. The third party then collects the death benefit after the seller dies. Viatical

---

settlements are not an insurance product. They are also known as living benefits because the seller uses the funds to improve his quality of life prior to dying of a terminal illness. Beneficiaries must sign a waiver to give up rights to the policy.

### Question: 12

A prospective payment system (PPS):

- A. is a Medicare payment based on a consumer's diagnosis at the time of hospital admission
- B. is the same as a fee-for-service system and is based on all diagnosis on discharge
- C. is part of Medicare supplemental insurance
- D. is similar to Medicare Part D

**Answer: A**

Explanation:

A PPS is a Medicare payment based on a consumer's diagnosis at the time of admission to the hospital.

---

# Thank You for Trying Our Product

For More Information – **Visit link below:**

**<https://www.examsboost.com/>**

15 USD Discount Coupon Code:

**G74JA8UF**

## FEATURES

- ✓ **90 Days Free Updates**
- ✓ **Money Back Pass Guarantee**
- ✓ **Instant Download or Email Attachment**
- ✓ **24/7 Live Chat Support**
- ✓ **PDF file could be used at any Platform**
- ✓ **50,000 Happy Customer**



Visit us at <https://www.examsboost.com/test/care-manager/>