

01	☐ A	☐ B	☐ C	☐ D	☐ E
02	☐ A	☐ B	☐ C	☐ D	☐ E
03	☐ A	☐ B	☐ C	☐ D	☒ E
04	☐ A	☐ B	☐ C	☒ D	☐ E
05	☐ A	☐ B	☐ C	☒ D	☐ E
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31	☐ A	☐ B	☒ C	☐ D	☐ E
32	☐ A	☒ B	☐ C	☐ D	☐ E
33	☒ A	☐ B	☐ C	☐ D	☐ E
34	☐ A	☒ B	☐ C	☐ D	☐ E
35	☐ A	☐ B	☐ C	☒ D	☐ E
36	☐ A	☐ B	☒ C	☐ D	☐ E
37	☒ A	☐ B	☐ C	☐ D	☐ E
38	☐ A	☒ B	☐ C	☐ D	☐ E
39	☒ A	☐ B	☐ C	☐ D	☐ E

PRACTICE QUESTIONS

Elsevier Remotely Proctored Exams

MOAE1

Medical Office Administration Exit Exam V1

EDITION

Demo

QUESTIONS

9

FORMAT

Limited Edition PDF

Before you begin

What this is

9 practice questions for Elsevier Remotely Proctored Exams **MOAE1**, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, **MOAE1**
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

QUESTION 1

SINGLE CHOICE

A patient calls the office complaining of pain in the epigastric region. Which body area is the medical assistant referring to when documenting the patient's complaint?

- ☐ A Lower abdomen, below the navel
- ☒ B Upper abdomen, just below the sternum
- ☐ C Area surrounding the navel
- ☐ D Lower back, near the lumbar vertebrae

ANSWER B

WHY The epigastric region is located in the upper central abdomen, just below the sternum (xiphoid process). It is one of the nine regions of the abdomen and is commonly associated with stomach, pancreas, and upper GI complaints. The hypogastric region is below the navel, the umbilical region surrounds the navel, and lumbar refers to the lower back.

QUESTION 2

SINGLE CHOICE

Under HIPAA, which of the following situations represents a permissible disclosure of protected health information (PHI) without patient authorization?

- ☐ A Releasing a patient's diagnosis to their employer upon request
- ☐ B Sharing a patient's lab results with the patient's spouse who called for an update
- ☒ C Providing a patient's immunization records to a school when the patient is a minor and the school requires proof
- ☐ D Forwarding a patient's billing information to a collection agency without written notice

ANSWER C

WHY HIPAA permits disclosure of PHI without authorization in specific situations, including for required school immunizations when the parent/guardian has agreed. Disclosures to employers, to spouses without patient consent, or to collection agencies without proper notice and authorization are not permissible under standard HIPAA Privacy Rule exceptions.

QUESTION 3

SINGLE CHOICE

Which code set is primarily used to report physician services and procedures on insurance claim forms?

- ☐ A ICD-10-CM
- ☐ B HCPCS Level II
- ☐ C ICD-10-PCS
- ☒ D CPT

ANSWER D

WHY Current Procedural Terminology (CPT) codes, developed and maintained by the American Medical Association (AMA), are used to report physician services, procedures, and medical services on insurance claims. ICD-10-CM is used for diagnoses, ICD-10-PCS is used for inpatient hospital procedures, and HCPCS Level II is used for products, supplies, and services not included in CPT (such as durable medical equipment).

QUESTION 4

SINGLE CHOICE

A patient arrives 20 minutes late for a 15-minute appointment. The provider's next scheduled patient is a new patient with a 45-minute slot. The medical assistant should:

- ☐ A Refuse to see the late patient and reschedule them for next week
- ☐ B Work the late patient in and ask the new patient to wait
- ☐ C Ask the late patient to wait and see them after the new patient is taken back
- ☒ D See the late patient immediately and have the new patient complete paperwork until the provider is ready

ANSWER D

WHY The best practice is to accommodate the established patient who arrived late by fitting them into a brief slot while keeping the new patient occupied with required intake paperwork. New patient appointments require comprehensive history-taking and paperwork, so having them complete documents is productive use of their wait time. The late patient should be informed of any time constraints but, if possible, seen the same day.

QUESTION 5

SINGLE CHOICE

When correcting an error in a paper medical record, the medical assistant should:

- ☐ A Erase the error completely and write the correction nearby
- ☐ B Use correction fluid to cover the error and write the correction above it
- ☒ C Draw a single line through the error, write the correction, initial and date the entry
- ☐ D Tear out the page and rewrite the entire entry on a new page

ANSWER C

WHY Proper medical record correction involves drawing a single line through the error (so it remains legible), writing the correct information, and initialing and dating the correction. This maintains the legal integrity of the record and ensures the original entry remains visible for audit purposes. Erasing, using correction fluid, or removing pages are all unacceptable as they obscure the original documentation.

QUESTION 6

SINGLE CHOICE

When answering the telephone in a medical office, which of the following is the most appropriate greeting?

- ☐ A Hello, this is Sarah, how can I help you?
- ☐ B Doctor's office, hold please.
- ☒ C Good morning, Dr. Johnson's office, this is Sarah, how may I help you?
- ☐ D Yes?

ANSWER C

WHY A professional telephone greeting identifies the office/practice, provides the staff member's name, and offers assistance in a courteous manner. This establishes a professional tone, confirms the caller has reached the correct office, and immediately invites the caller to state their purpose. Brief or abrupt greetings are unprofessional and may leave callers uncertain about whether they have reached the right office.

QUESTION 7

SINGLE CHOICE

When posting payments in a medical office, the term 'EOB' stands for:

- ☒ **A** Explanation of Benefits
- ☐ **B** Electronic Office Billing
- ☐ **C** Estimated Outpatient Balance
- ☐ **D** Explanation of Billing

ANSWER A

WHY EOB stands for 'Explanation of Benefits,' a document sent by an insurance company to both the provider and patient that explains how a claim was processed, including the amount paid, the patient's responsibility (deductible, coinsurance, copay), and any adjustments or denials. The medical assistant uses the EOB to post payments, adjustments, and balances to the patient's account.

QUESTION 8

SINGLE CHOICE

A patient refuses to sign the consent form for a recommended procedure. The medical assistant should:

- ☐ **A** Tell the patient the procedure is necessary and encourage them to sign
- ☐ **B** Sign the form on behalf of the patient since refusal seems unwise
- ☒ **C** Document the patient's refusal and notify the provider
- ☐ **D** Have another patient talk to the refusing patient about the importance of the procedure

ANSWER C

WHY Patients have the right to refuse treatment, and that refusal must be respected and documented. The medical assistant should document the refusal in the medical record and immediately notify the provider so the provider can discuss the risks of refusal with the patient. Coercing a patient to sign, signing on their behalf, or using other patients to persuade them all violate patient autonomy and informed consent principles.

QUESTION 9

MULTIPLE CHOICE

Which of the following are required elements of the OSHA Bloodborne Pathogens Standard in a medical office? (Choose three.)

- ☒ **A** Written exposure control plan
- ☒ **B** Universal precautions training for all at-risk employees
- ☒ **C** Free hepatitis B vaccination for at-risk employees
- ☐ **D** Mandatory flu shots for all patients
- ☐ **E** Annual tuberculosis testing for all visitors

ANSWER **A • B • C**

WHY The OSHA Bloodborne Pathogens Standard (29 CFR 1910.1030) requires: (1) a written exposure control plan updated annually, (2) training for employees with occupational exposure, (3) offering the hepatitis B vaccine series at no cost to at-risk employees, plus use of PPE, proper sharps disposal, and post-exposure evaluation. Mandatory flu shots for patients and annual TB testing for visitors are not Bloodborne Pathogens Standard requirements.