

AHM-540^{Q&As}

Medical Management

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QUESTION 1

The paragraph below contains an incomplete statement. Select the answer choice containing the term that correctly completes the paragraph.

To manage the delivery of healthcare services to their members, health plans use clinical practice parameters. __________ is the type of clinical practice parameter that a health plan uses to make coverage decisions concerning medical necessity and appropriateness.

- A. A clinical practice guideline (CPG)
- B. Medical policy
- C. Benefits administration policy
- D. A standard of care

Correct Answer: B

QUESTION 2

The Carlyle Health Plan uses the following clinical outcome measures to evaluate its diabetes and asthma disease management programs:

Measure 1: The percentage of diabetic patients who receive foot exams from their providers according to the program\\'s recommended guidelines Measure 2: The number of asthma patients who visited emergency departments for acute asthma attacks

From the answer choices below, select the response that correctly identifies whether these measures are true outcome measures or intermediate outcome measures. Measure 1- Measure 2

- A. Measure 1-true outcome measure Measure 2-true outcome measure
- B. Measure 1-true outcome measure Measure 2-intermediate outcome measure
- C. Measure 1-intermediate outcome measure Measure 2-true outcome measure
- D. Measure 1-intermediate outcome measure Measure 2-intermediate outcome measure

Correct Answer: C

QUESTION 3

Health plans that offer healthcare programs for Medicare beneficiaries have a strong financial incentive for identifying high-risk seniors as early as possible. The identification of high-risk seniors is typically accomplished through the use of

- A. case management
- B. geriatric evaluation and management (GEM)
- C. intervention identification



D. interdisciplinary home care (IHC)

Correct Answer: C

QUESTION 4

Maxwell Midler\\'s health plan operates a drug formulary that includes a typical three-tier copayment structure with required copayments of \$5, \$10, and \$25. Mr. Midler recently filled a prescription for a \$75 drug that was not included in the formulary. According to the plan\\'s formulary copayment structure, the amount that Mr. Midler was required to pay for his prescription was

| A. \$5 |
|-------------------|
| B. \$10 |
| C. \$25 |
| D. \$75 |
| Correct Answer: C |

QUESTION 5

As a follow-up to a performance improvement plan for member services, the Stellar Health Plan conducted an evaluation of the success of the plan. Stellar conducted its evaluation as the plan was being carried out. The evaluation focused on specific activities and assessed the relative importance of those activities to the plan as a whole. This information indicates that Stellar\\'s evaluation of the plan was both

A. concurrent and formative

- B. concurrent and summative
- C. retrospective and formative
- D. retrospective and summative

Correct Answer: A

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