1. How many years has AAPC been in business?
   A. 25 years
   B. 30 years
   C. 35 years
   D. 40 years

2. What was the first year AAPC conducted a salary survey?
   A. 1999
   B. 2006
   C. 2015
   D. 2020

3. Who is June’s local chapter officer spotlight?
   A. Rachael Willeford, from the Lafayette, Louisiana chapter
   B. Rachael Willeford, from the Colorado Springs, Colorado chapter
   C. Najwa Liscombe, from the Gainesville, Florida chapter
   D. Najwa Liscombe, from the Weston, Florida chapter

4. Which is NOT a covered preventive service under Medicare Part B when rendered via telehealth?
   A. Depression screening
   B. Lung cancer screening
   C. Prolonged preventive services
   D. Diabetes screening

5. Global aphasia is the most severe form of aphasia and involves difficulty with which two abilities?
   A. Walking and standing
   B. Speaking and language comprehension
   C. Thinking and processing information
   D. Eating and digestion

6. What is the ICD-10-CM code for primary progressive disorder, or Pick’s disease?
   A. R47.0
   B. G31.01
   C. F80.1
   D. F80.2

7. A 3-month-old patient presents to the ED with an undiagnosed new problem of fever and excessive crying. After discussion with the mother, multiple labs are ordered, which are all negative. Lumbar puncture is considered as meningitis in differential but not done, as patient’s fever responded to medications. A chest X-ray was done because of the slight wheezing noticed; interpretation finds no infiltrate. After discussion with pediatrics, it was determined to discharge with Rx at this time, and patient should return if the conditions worsen. What is the level of medical decision making for this scenario?
   A. 99284: moderate MDM, moderate NCOPA, moderate data, and moderate risk
   B. 99284: moderate MDM, high NCOPA, moderate data, and moderate risk
   C. 99285: high MDM, moderate NCOPA, extensive data, and high risk
   D. 99284: moderate MDM, moderate NCOPA, high data, and moderate risk

8. Which of the following statements is NOT true for claims with dates of service on or after Jan. 1, 2023?
   A. The 1995 Documentation Guidelines are no longer in effect for 2023 and forward.
   B. Risk is determined by the presenting problem and all management and treatment at the encounter.
   C. The history and exam of the patient is still required as part of the E/M MDM selection process.
   D. Documentation of discussion of patient management with another QHP is a data element that can be captured.

9. Which of the following statements is true about CBRs?
   A. The CBR program was established by CMS in 2008.
   B. The two topics CBRs focused on in 2022 were podiatry and laboratory.
   C. The purpose of CBRs is to detect Medicare fraud.
   D. CBRs serve as an educational resource and tool for possible billing improvements.

10. Which of the following is considered the prime source for Medicare regulations?
    A. Facebook
    B. Specialty associations
    C. MACs
    D. Federal statutes

11. Which activity should be included in the total time spent by physicians or other QHPs according to AMA guidelines?
    A. Preparing to see the patient
    B. Ordering medications
    C. Documenting clinical information in the electronic or other health record
    D. All of the above
12. Why should medical providers avoid using time ranges in their documentation?
   A. Time ranges are ambiguous and make it difficult to comply with coding guidance.
   B. Auditors are required to default to the lowest time in the range.
   C. Time ranges can lead to over-coding of E/M services.
   D. A and B

13. Which of the following is considered a symptom of agitation in the context of ICD-10-CM coding for dementia?
   A. Rocking
   B. Sleep disturbance
   C. Hallucinations
   D. Depression

14. How is severity classified in ICD-10-CM coding for dementia?
   A. Unspecified, mild, moderate, or aggressive
   B. Unspecified, mild, severe, or critical
   C. Unspecified, mild, moderate, or severe
   D. Unspecified, moderate, severe, or extreme

15. According to Medicare FIs, what is a reasonable time frame for completing medical record documentation in the office setting?
   A. Within 1 hour
   B. Within 12 hours
   C. Within 24-48 hours
   D. Within 72 hours

16. Why is timely documentation important for medical providers?
   A. Patients must sign off on their charting within 48 hours
   B. It increases the number of patients that can be seen in a day
   C. It can help mitigate the risk of malpractice allegations
   D. It makes the office environment more organized

17. Which of the following tools is NOT used for data visualization?
   A. SQL
   B. Tableau
   C. Advanced Excel
   D. Domo

18. Which of the following is best practice for running a virtual meeting?
   A. Make sure everyone is unmuted so they can engage with the speaker and other members.
   B. Test equipment ahead of time.
   C. Always cancel and reschedule a meeting as soon as technical glitches arise.
   D. Keep the agenda loose to create a collaborative atmosphere.

19. What are the three benchmarking categories?
   A. Staff, financial, quality
   B. Operational, clinical, patient
   C. Organizational, expense, revenue
   D. Organizational, financial, quality

20. Which of the following is NOT one of the purposes of clinical analytics benchmarking?
   A. Improve patient satisfaction
   B. Reduce readmissions
   C. Identify best practices
   D. Attract new doctors to a practice