UBO Defense Health Agency

POST-TEST for DHA UBO Webinar:

SIT/OHI: Standardized Insurance Tables, and Other Health Insurance Broadcast: 03/24/2015, 03/26/2015

INSTRUCTIONS: View the recorded Webinar located

at http://www.tricare.mil/ocfo/mcfs/ubo/learning_center/training.cfm#recent and then complete all of the 10 questions below. Submit your answers via e-mail to UBO.LearningCenter@altarum.org with "Answers, Post Test—"SIT/OHI Basics" in the subject line (a read receipt for your records is recommended). If at least 70% of the questions are answered correctly, you will receive a Certificate of Approval with Index Number via e-mail. If you receive a score of 69% or lower, you will be notified via e-mail and may review the archived Webinar and resubmit the post-test. Results may take up to five business days. If you have any questions, please submit those as well to UBO.LearningCenter@altarum.org.

- 1) The correct abbreviation for the HIC I.D. of Blue Cross Blue Shield of Maryland is:
 - a) MDBLU0001
 - b) BCBSMD0001
 - c) BLUMD0001
 - d) BCBMD0001
- 2) SIT data is used by MTFs located where?
 - a) CONUS
 - b) OCONUS
 - c) Both CONUS and OCONUS
- 3) In SIT operations you should avoid using which function:
 - a) Deactivate a HIC ID
 - b) Cancel a HIC ID
 - c) Update a HIC ID
 - d) Add a new HIC ID
- 4) True/False: OHI can only be attached to a HIC once the HIC has been verified by the VPOC.
- 5) True/False: In entering a new HIC addition request for pharmacy coverage, it is not necessary to include the BIN.
- 6) The following are associated with High Deductible Health Plans (HDHP) except:
 - a) Flexible Spending Account (FSA)
 - b) Health Reimbursement Account (HRA)
 - c) Health Improvement Account (HIA)
 - d) Health Spending Account (HSA)
- 7) The following are non-billable under the Third Party Collections Program (TPCP)
 - A) Spouses of Active Duty Personnel
 - B) Military retirees
 - C) Active Duty personnel
 - D) Children of Active Duty personnel



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- 8) When entering VPOC Helpdesk requests:
 - a) You should include the patient's date of birth (DOB), name and plan policy number so that the VPOC can verify patient eligibility.
 - b) You should only include the patient's name and date of birth (DOB)
 - c) You may include the insurance company name, address, coverage type.
 - d) You should include the patient's name and the reason for their visit, so that the VPOC can verify medical necessity.
- 9) PHI stands for:
 - a) Patient Health Information
 - b) Protected Health Information
 - c) Private Health Information
 - d) Portable Health Information
- 10) List 2 items that are wrong with this HIC addition request screen:-

