POST-TEST INSTRUCTIONS: View the recorded webinar located at: http://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/The-UBO-Learning-Center/Archived-Webinars and complete the 10 questions below.
Submit your answers via e-mail to webmeeting@federaladvisory.com with "Answers, Post-Test—PATCAT" in the subject line (a read receipt for your records is recommended).

Results may take up to five business days. If you have any questions, please submit them via e-mail to webmeeting@federaladvisory.com. NOTE: You must have at least 70% of the questions answered correctly, in order to receive a Certificate of Approval with Index Number (via e-mail). Individuals receiving a score of 69% or lower will be notified via e-mail and may resubmit the Post-Test, after reviewing the webinar, for processing.
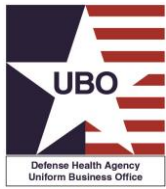
1. *True or False:* Five is the maximum number of positions in a PATCAT code.

   a. True
   b. False

2. PATCATS allow identification and grouping of patients by which type of interest?

   a. Sponsor Service
   b. Beneficiary Category
   c. Special Interest Patient Group
   d. All of the Above

3. You manually assign PATCATS in CHCS through_____?

   a. An Auto Registration
   b. Full Registration
   c. Lab interoperability registration
   d. You cannot manually assign a PATCAT during the registration process.

4. For supernumeraries, _____ charges in the _____ are waived.

5. Select all that apply. Dual eligibility problems can be resolved by:
   a. Performing a DEERS eligibility check for the patient's Dates of Service
   b. Double checking the PATCAT in the billing system
   c. Registering the patient under the highest level of legibility
   d. Moving patient between sponsors if possible
   e. A, B, and C

6. *True or False:* The PATCAT table has a field that will let you know whether or not you can skip a DEERS check.

    a. True
    b. False

7. What are the consequences of an incorrect PATCAT?

    a. Patient cannot be registered.
    b. There are no billing consequences.
    c. Incorrect or inappropriate billing, possible loss of revenue, incorrect MTF workload, inaccurate categorization of enrolled population, and poor data quality.

8. In MHS GENESIS, _____ was recently made a required field.

9. *Yes or No*: If a DoD employee is seen at an MTF for a minor issue, should they be billed as a civilian emergency?
    a. Yes.
    b. No. They should only be billed as a civilian emergency if the DoD employee had a true emergency and was seen in the MTF ER.

10. Some of the most common PATCAT updates made to a Patient Record are:

    a) Active Duty to Retired
    b) Inactive Reserve to Active Duty
    c) Retired to VA Beneficiary
    d) Inactive Reserve to VA Beneficiary
    e) All of the Above
    f) None of the above
    g) A, B, and C