***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 [UBO.LearningCenter@federaladvisory.com](mailto:UBO.LearningCenter@federaladvisory.com) with “Answers, Post-Test— **Accounts Receivable in the MHS and Best Practices"** 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 UBO.LearningCenter@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. Initial claim follow‐up begins once a claim is \_\_\_\_\_\_\_\_\_\_\_\_\_\_ and received by the payer.
2. Name three methods of assigning accounts for follow‐up:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Name the two types of A/R in governmental accounting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. True or False: Service Financial Statements can be found on the OSD (Comptroller) website.
3. Name three ways Providers can maximize the success of follow‐up efforts:

­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. A/R are reported on the annual audited financial statements.

* 1. True
  2. False

1. Medical A/R was previously being reported by the SMA activities.
   1. True
   2. False
2. Account follow‐up is best performed when the hospital has defined \_\_\_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_\_\_.
3. All funds collected by \_\_\_\_\_\_\_\_\_\_\_ are retained by your MTF.
   1. TPC Only
   2. TPC, MSA, MAC
   3. MAC Only
   4. None of the above
4. What is NOT a valid method to verify claims status?
   1. Payer on‐line websites for claims information
   2. Phone call to the payer
   3. Submitting a written inquiry letter (i.e. certified mail, internet)
   4. Contacting the patient