

AAHAM CERTIFIED COMPLIANCE TECHNICIAN (CCT) PRACTICE TEST (SAMPLE) STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE**

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Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	15

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. Which program identifies improper Medicare payments and fights fraud, waste, and abuse?**
 - A. QIOSC
 - B. PHSA
 - C. Recovery Audit Programs
 - D. Qui tam

- 2. AABB stands for which organization?**
 - A. American Association of Blood Banks
 - B. American Association of Biomedical Biologists
 - C. Association of American Blood Banks
 - D. American Allergy and Blood Bankers

- 3. Which is a type of Physical Safeguard?**
 - A. Facility access control
 - B. Device and media controls
 - C. Workstation use
 - D. Workstation security

- 4. ASHI stands for which organization?**
 - A. American Society of Histocompatibility and Immunogenetics
 - B. American Society of Histocompatibility and Immunology
 - C. American Society of Histocompatibility and Immunogenetics
 - D. Association for Histocompatibility and Immunogenetics

- 5. Which statement accurately describes hospital accreditation and Medicare requirements?**
 - A. It is not permissible to certify only part of a general hospital.
 - B. A hospital accredited by TJC and AOA is not deemed to meet all Medicare requirements.
 - C. An individual or entity should not allow immediate access to a surveyor.
 - D. Accreditation status has no bearing on Medicare certification.

- 6. Which full name corresponds to the act abbreviated as HITECH?**
- A. Health Insurance Portability and Accountability Act
 - B. Hospital Payment Monitoring Program
 - C. International Classification of Diseases
 - D. Health Information Technology for Economic and Clinical Health Act
- 7. Violating the Anti-Kickback Statute can result in which penalties?**
- A. Nonpayment of claims only
 - B. Nonpayment of claims, civil monetary penalties, exclusion from Medicare, liability for false claims, imprisonment, and criminal fines
 - C. Exclusive civil penalties only
 - D. None of the above
- 8. Which organization is Region B for RACs?**
- A. HealthDataInsights, Inc.
 - B. Connolly
 - C. CGI Federal of Fairfax, Virginia
 - D. Diversified Collection Services, Inc.
- 9. Which states have earned CLIA exemption status?**
- A. New York and Washington
 - B. California and New York
 - C. Florida and Texas
 - D. Illinois and Ohio
- 10. GME stands for which program?**
- A. Graduate Medical Education
 - B. General Medical Education
 - C. Global Medical Education
 - D. Government Medical Education

Answers

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1. C
2. A
3. B
4. C
5. A
6. D
7. B
8. C
9. A
10. A

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Explanations

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1. Which program identifies improper Medicare payments and fights fraud, waste, and abuse?

A. QIOSC

B. PHSA

C. Recovery Audit Programs

D. Qui tam

Recovery Audit Programs are designed to target improper Medicare payments and combat fraud, waste, and abuse by performing post-payment reviews to detect overpayments and recover funds. Under CMS, Recovery Audit Contractors review paid claims, identify coding errors, duplicate payments, misapplied rules, and other improper payments, and then recoup the overpaid amounts to strengthen program integrity. The audits generate data that helps reduce future improper payments and improve payment accuracy across the program. Other options focus on different functions: one centers on quality improvement in care, another on the statutory framework behind federal health programs, and a different mechanism is a whistleblower-driven enforcement path under the False Claims Act, not a standing program for ongoing Medicare payment recovery.

2. AABB stands for which organization?

A. American Association of Blood Banks

B. American Association of Biomedical Biologists

C. Association of American Blood Banks

D. American Allergy and Blood Bankers

This acronym points to the professional body that focuses on blood banking and transfusion medicine. The correct expansion is American Association of Blood Banks. This organization is well known for developing and publishing standards for blood banks and transfusion services, and it often provides accreditation and guidance used by hospitals and blood centers. The other proposed names don't correspond to the real organization, so they aren't correct.

3. Which is a type of Physical Safeguard?

A. Facility access control

B. Device and media controls

C. Workstation use

D. Workstation security

Physical safeguards focus on protecting the actual hardware and storage media that hold electronic protected health information. This includes how facilities are protected, how workstations are used and secured, and how devices and media themselves are managed. The choice that best fits a type of Physical Safeguard is the one dealing with device and media controls. This area covers procedures for restricting the movement of devices and media, securely transporting them, protecting them from loss or theft, and properly disposing of or reusing media to prevent data exposure. While facility access control and workstation-related safeguards are also essential physical protections, device and media controls specifically address safeguarding the hardware and storage media that carry data.

4. ASHI stands for which organization?

- A. American Society of Histocompatibility and Immunogenetics
- B. American Society of Histocompatibility and Immunology
- C. American Society of Histocompatibility and Immunogenetics**
- D. Association for Histocompatibility and Immunogenetics

ASHI stands for American Society of Histocompatibility and Immunogenetics. This name signals the organization's focus on tissue compatibility and the genetic factors of the immune system that influence transplantation. The other options differ in key words—Immunology instead of Immunogenetics changes the specialty, and Association instead of American Society points to a different entity—so they don't match the standard expansion of the acronym. The familiar and correct full name is American Society of Histocompatibility and Immunogenetics.

5. Which statement accurately describes hospital accreditation and Medicare requirements?

- A. It is not permissible to certify only part of a general hospital.**
- B. A hospital accredited by TJC and AOA is not deemed to meet all Medicare requirements.
- C. An individual or entity should not allow immediate access to a surveyor.
- D. Accreditation status has no bearing on Medicare certification.

Hospital accreditation and Medicare certification are tied to patient-safety oversight and compliance with care standards. Medicare participation hinges on meeting the hospital's Conditions of Participation, and accreditation from a CMS-recognized body can help demonstrate those standards, but certification generally applies to the facility as a whole rather than just a portion of it. That's why the statement that you cannot certify only part of a general hospital is the best answer: in ordinary practice, a general hospital is certified as a single facility, not in fragments. The other options either overstate or misstate how accreditation interacts with Medicare, or describe survey access in a way that isn't accurate, or suggest accreditation has no bearing on Medicare certification, which it does.

6. Which full name corresponds to the act abbreviated as HITECH?

- A. Health Insurance Portability and Accountability Act
- B. Hospital Payment Monitoring Program
- C. International Classification of Diseases
- D. Health Information Technology for Economic and Clinical Health Act**

This item tests recognizing what HITECH stands for and its purpose in health information policy. HITECH is Health Information Technology for Economic and Clinical Health Act. It was enacted as part of the American Recovery and Reinvestment Act to promote the widespread adoption of electronic health records and to strengthen privacy and security protections for health information under HIPAA, including breach notification requirements and incentives to use certified EHR technology. Knowing the exact expansion helps you connect the acronym to its focus on technology in healthcare, economic and clinical health improvements, and tighter privacy/security rules. The other options refer to a different law (the Health Insurance Portability and Accountability Act), a coding system (International Classification of Diseases), or a non-existent program, so they don't match the acronym.

7. Violating the Anti-Kickback Statute can result in which penalties?

- A. Nonpayment of claims only
- B. Nonpayment of claims, civil monetary penalties, exclusion from Medicare, liability for false claims, imprisonment, and criminal fines**
- C. Exclusive civil penalties only
- D. None of the above

Violating the Anti-Kickback Statute brings a mix of criminal and civil consequences because the statute is meant to deter improper payments tied to referrals in federal health care programs. On the criminal side, violations can lead to fines and imprisonment, with penalties that can apply per violation and can be severe for repeat offenses. Civilly, the government can impose civil monetary penalties and, importantly, can exclude the individual or entity from participating in Medicare and other federal programs, which effectively stops them from billing those programs. If a kickback leads to false claims being submitted, liability under the False Claims Act can also attach, exposing the party to civil penalties and damages. Nonpayment of claims isn't a direct penalty itself, but can result from exclusion or enforcement actions. So the full suite of penalties—civil monetary penalties, exclusion from Medicare, False Claims Act liability, imprisonment, and criminal fines—captures the range of consequences, making it the best answer.

8. Which organization is Region B for RACs?

- A. HealthDataInsights, Inc.
- B. Connolly
- C. CGI Federal of Fairfax, Virginia**
- D. Diversified Collection Services, Inc.

RACs are private firms contracted by CMS to review Medicare payments, and each geographic region has a designated contractor. For Region B, the contractor is CGI Federal, based in Fairfax, Virginia. This organization handles post-payment reviews and related communications for providers in that region. The other firms listed correspond to other regions, not Region B, which is why CGI Federal is the correct choice.

9. Which states have earned CLIA exemption status?

- A. New York and Washington**
- B. California and New York
- C. Florida and Texas
- D. Illinois and Ohio

Exemption status under CLIA is federal, not state-based. The CLIA program, run by CMS, assigns laboratories a category—such as certificate of waiver for those performing only waived tests—based on the lab's capabilities and testing complexity. This designation applies nationwide and is not granted by individual states. States may have their own licensure requirements in addition to CLIA, but there isn't a list of states that "earn" CLIA exemption status. Therefore, the premise that specific states have earned CLIA exemption status doesn't align with how CLIA operates; any facility performing waived testing anywhere in the U.S. would need a CLIA certificate of waiver from CMS, regardless of state.

10. GME stands for which program?

A. Graduate Medical Education

B. General Medical Education

C. Global Medical Education

D. Government Medical Education

GME stands for Graduate Medical Education, which describes the postgraduate training physicians undergo after medical school, including residencies and fellowships. This is the phase where doctors gain specialty-specific skills and clinical experience under supervision, and it is the term most commonly used in policy, accreditation, and program descriptions. The other phrases aren't standard terms in medical training, so they don't convey the recognized level of education that GME refers to.

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Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://aahamcct.examzify.com>

We wish you the very best on your exam journey. You've got this!

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