

ADVANCED HEALTH SERVICES EXAM 2 PRACTICE (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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 of the following is an economic outcome measure?**
 - A. BP
 - B. Survival
 - C. Costs of care
 - D. Patient satisfaction

- 2. What factor most determines whether an evidence-based intervention will have impact in practice?**
 - A. It is adopted
 - B. Providers are trained to deliver it
 - C. Providers choose to deliver it
 - D. Eligible populations receive it

- 3. Which item is NOT typically included in a job description?**
 - A. Position description
 - B. Education requirement
 - C. Salary
 - D. Employee parking policy

- 4. Describe the Collaborative Care Model.**
 - A. A purely primary care approach with no mental health input
 - B. Mental health care delivered only in inpatient settings
 - C. The collaboration of primary care providers and specialty mental health care providers to develop and adjust treatment plans based on the measurement of symptom-related outcomes
 - D. No outcome measurement in care plans

- 5. The Equitable Domain ensures care does not vary in quality due to**
 - A. gender, ethnicity, geographic location, and socioeconomic status
 - B. appointment time
 - C. provider personality
 - D. personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status

6. Define quality.

- A. The degree to which a patient perceives a healthcare good/service to be valuable, beneficial, and/or effective.
- B. The service does not meet expectations.
- C. The extent to which programs/services increase the likelihood of desired patient outcomes and decrease undesired outcomes.
- D. The likelihood that a patient will remain a customer of a firm.

7. Describe follow-up in transitional care.

- A. Discharge planning does not include a primary care follow-up.
- B. Scheduled and completed follow-up visit with the PCP or specialist physician, and patient is empowered to be active participant in these interactions.
- C. Follow-up is optional and may be delayed.
- D. No follow-up is needed after discharge.

8. Which best describes 'expectations'?

- A. Past experiences and prior outcomes.
- B. A set of concrete service features that must be delivered.
- C. A blend of desires for what a good/service can be and what it should be.
- D. The price customers are willing to pay.

9. Recognizing _____ can build morale and support employee loyalty.

- A. Customer satisfaction
- B. Team cohesion
- C. Management tenure
- D. Employee performance

10. Which of the following is NOT a component of a service blueprint?

- A. Patient perspective
- B. Onstage activities
- C. Backstage activities
- D. Customer feedback loops

Answers

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

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Explanations

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1. Which of the following is an economic outcome measure?

- A. BP
- B. Survival
- C. Costs of care**
- D. Patient satisfaction

Economic outcomes focus on the financial side of care—the costs and resource use associated with delivering treatment. Costs of care quantifies the money spent on hospital stays, procedures, medications, and other resources, which is what economic outcome measures capture. In contrast, blood pressure is a physiological parameter, survival is a clinical outcome, and patient satisfaction reflects patient experience. So costs of care best represents the economic outcome measure. This kind of data supports evaluating value and cost-effectiveness across interventions.

2. What factor most determines whether an evidence-based intervention will have impact in practice?

- A. It is adopted**
- B. Providers are trained to deliver it
- C. Providers choose to deliver it
- D. Eligible populations receive it

Adoption is the key gatekeeper for real-world impact. If a clinic or organization doesn't commit to using the intervention, it won't be delivered to patients regardless of how effective it is, how well providers are trained, or how many patients could benefit. Adoption means the setting has decided to try the intervention in practice, creating the conditions for implementation, training, and outreach to actually occur. Training and providers' willingness are important, but they only matter once there is a deliberate choice to adopt the intervention. Delivering to the eligible population is the outcome of successful adoption and implementation, not the initial determinant of impact.

3. Which item is NOT typically included in a job description?

- A. Position description
- B. Education requirement
- C. Salary
- D. Employee parking policy**

A job description should outline the role's duties, responsibilities, and the qualifications or criteria needed, with compensation sometimes included. A parking policy is part of general HR policies or the employee handbook, covering logistics and rules for all staff rather than the specifics of any one position. Because a JD's purpose is to define what the job entails and what is required to perform it, the employee parking policy doesn't belong in that document. The other items fit—the description of the position, the education requirements, and salary information—since they directly pertain to the role itself.

4. Describe the Collaborative Care Model.

- A. A purely primary care approach with no mental health input
- B. Mental health care delivered only in inpatient settings
- C. The collaboration of primary care providers and specialty mental health care providers to develop and adjust treatment plans based on the measurement of symptom-related outcomes
- D. No outcome measurement in care plans

Collaborative care is an integrated, team-based approach that brings mental health expertise into primary care. A primary care clinician works with a care manager and a mental health specialist (often via consultation) to create and continuously adjust a treatment plan, guided by regular, standardized assessments of symptoms. The plan is evidence-based and use-of-measured outcomes (like tracking depression scores over time) drives decisions about changing medications, adding psychotherapy, or intensifying or de-escalating care. This coordinated method improves access, consistency, and effectiveness of treatment for mental health conditions within the primary care setting. This description fits best because it emphasizes both the collaboration between primary care and specialty mental health professionals and the use of measurement to guide treatment decisions. It's not just primary care with no mental health input, nor limited to inpatient settings, and it clearly includes outcome measurement in care plans.

5. The Equitable Domain ensures care does not vary in quality due to

- A. gender, ethnicity, geographic location, and socioeconomic status
- B. appointment time
- C. provider personality
- D. personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status

Fairness in care across patient characteristics is the core idea. The Equitable Domain protects that care quality should not depend on who the patient is—examples include gender, ethnicity, geographic location, and socioeconomic status. Saying "personal characteristics such as" signals an inclusive, non-exhaustive list, meaning any such trait should not influence quality of care. Other factors like appointment time or provider personality address processes or interpersonal dynamics and do not embody the fundamental guarantee of equity across patient traits. So, framing it as care that remains constant across personal characteristics best captures the intended principle.

6. Define quality.

- A. The degree to which a patient perceives a healthcare good/service to be valuable, beneficial, and/or effective.
- B. The service does not meet expectations.
- C. The extent to which programs/services increase the likelihood of desired patient outcomes and decrease undesired outcomes.
- D. The likelihood that a patient will remain a customer of a firm.

Quality in health care is about the actual health impact of care—the extent to which services increase the likelihood of desired patient outcomes and decrease undesired ones. This definition centers on results and safety, not just how patients feel about the care or whether services meet expectations. It's possible for care to look satisfactory from a patient's perspective yet not improve health, or for care to meet expectations but have limited effectiveness. Conversely, focusing on customer loyalty or perceived value misses the essential goal of health care: better health outcomes. So the best answer captures the outcome-driven, harm-reducing nature of quality in health services.

7. Describe follow-up in transitional care.

- A. Discharge planning does not include a primary care follow-up.
- B. Scheduled and completed follow-up visit with the PCP or specialist physician, and patient is empowered to be active participant in these interactions.**
- C. Follow-up is optional and may be delayed.
- D. No follow-up is needed after discharge.

Follow-up in transitional care means ensuring ongoing, coordinated care after discharge. This involves scheduling a timely visit with the primary care physician or a specialist, so the care plan is reviewed, medications are reconciled, symptoms are monitored, and any test results are acted on. The patient should be empowered to participate actively in these interactions—asking questions, understanding any changes in treatment, and adhering to the plan. This structured follow-up helps maintain continuity, reduces confusion after leaving the hospital, and lowers the chance of preventable complications or readmission. Options that suggest follow-up isn't needed, is optional, or isn't part of discharge planning don't align with the goal of a seamless transition, making the scheduled, completed follow-up with active patient participation the correct approach.

8. Which best describes 'expectations'?

- A. Past experiences and prior outcomes.
- B. A set of concrete service features that must be delivered.
- C. A blend of desires for what a good/service can be and what it should be.**
- D. The price customers are willing to pay.

Expectations are beliefs about how a service will perform in the future. They arise from a blend of what customers desire—the outcomes they hope to get—and what they feel should be delivered—the standards they expect. This combines both appetite for a better experience and a judgment about the right level of service. That's why the best description is a mix of desires for what a good/service can be and what it should be. For example, you might hope for fast, friendly service (desire) and also expect consistency and reliability (what should be). Past experiences and prior outcomes influence these beliefs, shaping them, but they aren't the definition themselves. Concrete features that must be delivered describe promised offerings or service standards, not the broader expectation itself. Price relates to value and willingness to pay, not specifically what future service performance will be like.

9. Recognizing _____ can build morale and support employee loyalty.

- A. Customer satisfaction
- B. Team cohesion
- C. Management tenure
- D. Employee performance**

Recognizing performance provides a direct signal that an employee's specific efforts and results are valued. When a manager acknowledges someone for hitting goals, delivering high-quality work, or improving a process, it validates their contributions and shows appreciation for their impact. This kind of recognition strengthens intrinsic motivation, a sense of competence, and belonging, which together boost morale and deepen emotional commitment to the organization. As a result, employees feel more loyal and engaged, and are more likely to stay and perform at a high level. Recognizing customer satisfaction or team cohesion, while meaningful, doesn't connect as directly to an individual's ongoing contributions, and recognizing tenure focuses on time served rather than current impact, making them less effective for building immediate morale and loyalty.

10. Which of the following is NOT a component of a service blueprint?

- A. Patient perspective
- B. Onstage activities
- C. Backstage activities
- D. Customer feedback loops**

In service blueprinting, the map focuses on the organized flow of the service from the customer's point of view, showing what the customer does, what staff do in view (onstage), what staff do behind the scenes (backstage), the supporting processes that enable those actions, and the physical evidence the customer encounters. This structure captures the sequence of interactions and the visible versus invisible activities that together deliver the service, including the patient perspective as the customer's view of the journey and the tangible cues the patient experiences along the way. Customer feedback loops, while vital for improving quality, aren't a built-in element of the blueprint itself. They belong to the ongoing evaluation and refinement side of operations, feeding insights back into design and training cycles after the service has been delivered. So they don't fit as a core component pictured in the service blueprint.

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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://advhealthservices2.examzify.com>

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

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