

CPCS CREDENTIALING AND PRIVILEGING PRACTICE TEST (SAMPLE)

STUDY GUIDE



Prepare with structure. Pass with confidence



Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

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

SAMPLE

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

SAMPLE

- 1. In accreditation terminology, what term is used to describe the requirements for appointment to the medical staff or provider panel?**
 - A. Ambulatory Care Facility (AAAHHC)
 - B. URAC Directory Criteria
 - C. NCQA Standards
 - D. Definition of Criteria

- 2. Which statement describes a Medicare-related benefit of accreditation?**
 - A. It improves branding but offers no survey benefits
 - B. It reduces staffing requirements
 - C. It ensures universal access to care
 - D. Allows Medicare to enter into an agreement with any state to survey hospitals accredited

- 3. Which organization defines credentialing as the process of reviewing and evaluating qualifications of licensed independent practitioners to provide services to its members?**
 - A. AAAHC Definition of Credentialing
 - B. NCQA Definition of Credentialing
 - C. TJC Definition of Credentialing
 - D. Policy and Procedures

- 4. For written verification received by the organization, which accreditation uses the date on the letter or report, not the receipt date?**
 - A. Healthcare Facilities Accreditation Program (HFAP)
 - B. Utilization Review Accreditation Commission (URAC)
 - C. Det Norske Veritas (DNV)
 - D. National Committee for Quality Assurance (NCQA)

- 5. Which accrediting organization indicates requirements for PSV in Medical Staff Bylaws?**
 - A. Health Facilities Accreditation Program (HFAP)
 - B. Det Norske Veritas (DNV)
 - C. Utilization Review Accreditation Commission (URAC)
 - D. Accreditation Association for Ambulatory Health Care (AAAHHC)

- 6. In hospital governance, which entity typically approves bylaws and accepts appointment decisions?**
- A. MEC
 - B. Governing Body
 - C. Medical Staff
 - D. Board of Trustees
- 7. Which organization is associated with credentialing all licensed practitioners, including physicians and non-physicians?**
- A. URAC
 - B. TJC
 - C. NCQA
 - D. DNV
- 8. Which accreditation offers a Phone PSV that verifies licensure, education, training, experience, competence, and peer references?**
- A. TJC Phone PSV
 - B. NCQA Phone PSV
 - C. URAC Phone PSV
 - D. CMS Phone PSV
- 9. What term describes criteria defined by the hospital's medical staff and governing board?**
- A. Internal criteria
 - B. External criteria
 - C. Clinical criteria
 - D. Administrative criteria
- 10. NCQA uses what date on PSV letter or report to determine compliance?**
- A. The receipt date
 - B. The date the verification was created
 - C. The date on report
 - D. The credentialing decision date

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. In accreditation terminology, what term is used to describe the requirements for appointment to the medical staff or provider panel?

- A. Ambulatory Care Facility (AAAHC)
- B. URAC Directory Criteria
- C. NCQA Standards

D. Definition of Criteria

In credentialing and privileging, there is a defined set of prerequisites that determine who can join the medical staff or provider panel. This collection of requirements is described as the Definition of Criteria, signaling the exact qualifications and conditions someone must meet to be appointed. These criteria cover factors like licensure, any required board certification, appropriate training and experience, current privileges at other facilities, and a clean background without sanctions or unresolved investigations. Accreditation bodies require documenting and applying these criteria consistently so appointment decisions are fair and evidence-based. The other terms point to organizations or broader standards, not the specific, explicit requirements used to grant appointment.

2. Which statement describes a Medicare-related benefit of accreditation?

- A. It improves branding but offers no survey benefits
- B. It reduces staffing requirements
- C. It ensures universal access to care

D. Allows Medicare to enter into an agreement with any state to survey hospitals accredited

Medicare recognizes certain accrediting bodies to conduct surveys and grant deemed status to hospitals. This means a hospital can meet Medicare survey requirements by being accredited, and Medicare can rely on those accreditation surveys instead of doing its own separate survey. The statement about Medicare entering into an agreement with a state to survey hospitals that are accredited captures this arrangement: Medicare can formalize an agreement with a state survey entity to survey and oversee hospitals that have accreditation, aligning Medicare participation with the accrediting body's standards. This is the Medicare-related benefit because it streamlines oversight and reduces duplicative surveying, ensuring hospitals are held to consistent, high standards without multiple separate inspections. Accreditation can improve quality and safety, but it does not automatically guarantee universal access or reduce staffing needs, and branding improvements aren't the Medicare-focused benefit described here.

3. Which organization defines credentialing as the process of reviewing and evaluating qualifications of licensed independent practitioners to provide services to its members?

- A. AAAHC Definition of Credentialing
- B. NCQA Definition of Credentialing**
- C. TJC Definition of Credentialing
- D. Policy and Procedures

The organization described is NCQA. NCQA defines credentialing as the process of reviewing and evaluating the qualifications of licensed independent practitioners to provide services to its members. This aligns with how health plans and managed care organizations ensure that providers in their networks meet required standards before they can serve members. It emphasizes a focus on validating credentials so practitioners are qualified to care for plan members. In contrast, accrediting bodies like AAAHC or The Joint Commission center their definitions on accrediting organizations and facilities, and policy and procedures are internal guidelines rather than an external definition from a governing body.

4. For written verification received by the organization, which accreditation uses the date on the letter or report, not the receipt date?

- A. Healthcare Facilities Accreditation Program (HFAP)
- B. Utilization Review Accreditation Commission (URAC)
- C. Det Norske Veritas (DNV)
- D. National Committee for Quality Assurance (NCQA)**

When evaluating written verification, the date that matters is the date shown on the document from the issuer. NCQA requires you to treat the verification as received on that issue date, not the date the organization actually received it. This matters because credentialing timelines and renewal windows depend on the issuer's date, not processing delays. Using the letter's date keeps the verification currency clear and standardized across files, avoiding distortions that could happen if you relied on when the document arrived. Some other accrediting bodies may handle receipt dates differently, but NCQA's standard keeps the verification's validity anchored to the issuer's date, which is why this is the best choice.

5. Which accrediting organization indicates requirements for PSV in Medical Staff Bylaws?

- A. Health Facilities Accreditation Program (HFAP)**
- B. Det Norske Veritas (DNV)
- C. Utilization Review Accreditation Commission (URAC)
- D. Accreditation Association for Ambulatory Health Care (AAAHC)

Primary Source Verification (PSV) is the process of confirming credentials directly with the issuing sources, such as licensing boards, medical schools, specialty boards, and previous employers, before or during credentialing and privilege decisions. Accrediting bodies shape how this verification is embedded in the medical staff governance, including what must be documented in Medical Staff Bylaws. This accrediting organization sets standards that specifically require Medical Staff Bylaws to outline PSV procedures, ensuring that credentialing data are verified against primary sources and re-verified at appropriate intervals (for example at reappointment or when privileges change). Because its standards explicitly tie PSV requirements to the Medical Staff Bylaws, it is the organization that indicates these PSV requirements most directly. Other accrediting bodies address credentialing and governance in different areas or with different emphasis, rather than explicitly mandating PSV language within Medical Staff Bylaws, which is why the first organization is the best fit for this requirement.

6. In hospital governance, which entity typically approves bylaws and accepts appointment decisions?

- A. MEC
- B. Governing Body**
- C. Medical Staff
- D. Board of Trustees

Ultimate authority in hospital governance rests with the governing body, which is responsible for setting policy and ensuring due process. Bylaws are the rules that govern how the hospital operates, and they are adopted or amended by this governing body. For appointments, the medical staff conducts the credentialing process and makes recommendations through committees (such as the Medical Executive Committee), but the governing body formally approves or accepts those appointment decisions. The Medical Executive Committee provides expert input and recommendations, but final approval rests with the governing body. In many organizations, the governing body is referred to as the Board of Trustees, so the two terms describe the same controlling entity.

7. Which organization is associated with credentialing all licensed practitioners, including physicians and non-physicians?

- A. URAC
- B. TJC
- C. NCQA**
- D. DNV

The main idea is provider credentialing and privileging across all licensed clinicians. The National Committee for Quality Assurance (NCQA) is the organization that develops and enforces standards for credentialing providers and accredits credentialing processes used by health plans and integrated delivery systems. NCQA's framework covers verification of licensure, board certification where applicable, sanctions, training, and work history for all licensed practitioners, including physicians and non-physician clinicians. Because of this broad scope and the emphasis on standardized, rigorous credentialing across the provider universe, NCQA is the go-to reference for credentialing all licensed practitioners. By contrast, the others tend to focus on different areas: Joint Commission and DNV primarily credential and accredit facilities and programs, while URAC does credentialing as well but is not as universally tied to the comprehensive credentialing of all licensed practitioners across organizations.

8. Which accreditation offers a Phone PSV that verifies licensure, education, training, experience, competence, and peer references?

- A. TJC Phone PSV**
- B. NCQA Phone PSV
- C. URAC Phone PSV
- D. CMS Phone PSV

Phone primary source verification is direct confirmation of a clinician's credentials by contacting the original sources—the licensing boards, schools, training programs, past employers, and professional references—typically done by telephone to quickly and reliably verify the information. The Joint Commission offers a Phone PSV service specifically for this purpose, checking licensure, education, training, experience, competence, and peer references. This approach helps ensure the information a practitioner provides is accurate and current, which is essential for safe privileging and for meeting accreditation standards. While other accrediting bodies also require verification of credentials, the formal "Phone PSV" service is a feature most closely associated with The Joint Commission, making it the best answer.

9. What term describes criteria defined by the hospital's medical staff and governing board?

- A. Internal criteria**
- B. External criteria
- C. Clinical criteria
- D. Administrative criteria

Internal criteria are standards set within the hospital itself by the medical staff and governing board to determine who may be granted privileges. These criteria reflect the institution's mission, available resources, patient population, and the scope of services the hospital can safely offer, ensuring decisions about privileges are aligned with what the hospital can support. External criteria come from outside bodies or professional organizations to standardize expectations across institutions. Administrative criteria cover the application, verification, and maintenance processes for privileges, while clinical criteria focus on a clinician's ability to perform specific medical procedures safely and competently. The phrase "criteria defined by the hospital's medical staff and governing board" points to internal criteria, since it denotes standards established within the organization itself.

10. NCQA uses what date on PSV letter or report to determine compliance?

- A. The receipt date
- B. The date the verification was created
- C. The date on report**
- D. The credentialing decision date

The key idea is that NCQA determines PSV compliance by the actual verification date shown on the PSV letter or report. This date marks when the primary source verified the information, so it tells you how current the verification is. Timeliness matters for accreditation, because verifications need to be within a defined window (for example, within the last 12 months) to be considered current. Receiving the document later, or when the verification was created, doesn't tell you when the verification occurred or whether it's still valid. The credentialing decision date reflects the committee's outcome, not the freshness of the verification. Therefore, the date on the report is the critical indicator for compliance.

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://cpcscredentialingprivileging.examzify.com>

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

SAMPLE