

# FBLA Healthcare Administration Practice Test (Sample)

## Study Guide



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**SAMPLE**

## **Questions**

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- 1. What impact does an increasing population have on healthcare service operations?**
  - A. Decreased patient access**
  - B. Increased volumes of patients and workload for healthcare systems**
  - C. Reduced funding for hospitals**
  - D. Higher healthcare costs**
- 2. What principle is key to ensuring clear communication and task assignment in organizational management?**
  - A. Strict chain of command**
  - B. Flexible structures**
  - C. Empowerment of employees**
  - D. Team collaboration**
- 3. What type of care does Medicare Part D specifically focus on?**
  - A. Vision coverage**
  - B. Dental care**
  - C. Drug coverage**
  - D. Emergency services**
- 4. Which statement regarding interviewing a patient is considered correct?**
  - A. Ask leading questions to guide the patient.**
  - B. Restate the patient's comments to be sure the information recorded is accurate.**
  - C. Interrupt the patient for clarifications.**
  - D. Use only medical jargon to explain procedures.**
- 5. Which of the following best describes the process of controlling in healthcare management?**
  - A. Assessing patient outcomes only**
  - B. Checking performance against standards and ensuring goals are met**
  - C. Developing strategic partnerships with other organizations**
  - D. Unilaterally making decisions without staff input**

- 6. Which service is not a part of preventive care?**
- A. Vaccination programs**
  - B. Health screenings**
  - C. Non-communicable disease prevention**
  - D. Wellness education**
- 7. Which of the following is not listed as a determinant of health?**
- A. Agent**
  - B. Behavior**
  - C. Environment**
  - D. Access to Healthcare**
- 8. What are the six management functions in healthcare administration?**
- A. Planning, organizing, staffing, controlling, financing, directing**
  - B. Planning, organizing, staffing, controlling, decision-making, directing**
  - C. Planning, organizing, monitoring, controlling, decision-making, directing**
  - D. Planning, staffing, budgeting, controlling, decision-making, evaluating**
- 9. According to Gordon's classification, which of the following is not a form of disease prevention?**
- A. Primary Prevention**
  - B. Tertiary Prevention**
  - C. Secondary Prevention**
  - D. Quaternary Prevention**
- 10. In budget management, what do we call a plan that is made for various levels of activity?**
- A. Flexible budget**
  - B. Rolling budget**
  - C. Static budget**
  - D. Operational budget**

## **Answers**

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

**SAMPLE**

## **Explanations**

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**1. What impact does an increasing population have on healthcare service operations?**

**A. Decreased patient access**

**B. Increased volumes of patients and workload for healthcare systems**

**C. Reduced funding for hospitals**

**D. Higher healthcare costs**

The increasing population has a significant impact on healthcare service operations, primarily leading to increased volumes of patients and workload for healthcare systems. As more individuals enter a population, the demand for healthcare services naturally rises. This surge in patient numbers necessitates that healthcare providers manage larger patient volumes, resulting in higher workloads for healthcare personnel, including doctors, nurses, and administrative staff. When the number of patients increases, healthcare facilities may experience overcrowding, longer wait times for appointments, and a greater strain on resources such as medical equipment and facilities. This situation requires healthcare systems to adapt by potentially increasing staff, expanding facilities, or improving operational efficiencies to meet the higher demand for services. This dynamic emphasizes the need for strategic planning within healthcare operations to ensure that the quality of patient care is maintained even as the volume of patients grows. Adjustments might include optimizing workflow, enhancing telehealth services, or implementing technology to streamline processes. Overall, understanding this relationship between population growth and healthcare demand is crucial for effective healthcare management and planning.

**2. What principle is key to ensuring clear communication and task assignment in organizational management?**

**A. Strict chain of command**

**B. Flexible structures**

**C. Empowerment of employees**

**D. Team collaboration**

The principle of a strict chain of command is fundamental in organizational management because it establishes a clear hierarchy that delineates authority and responsibility among different levels of management. This clarity aids in ensuring that communication flows efficiently throughout the organization. When everyone knows who reports to whom, it minimizes confusion about roles, allows for effective task assignment, and facilitates accountability. A strict chain of command helps in setting clear expectations for each employee's responsibilities and provides a structured pathway for decision-making and problem-solving. This can be especially important in complex organizations, where a well-defined hierarchy can help prevent misunderstandings and miscommunication. While flexibility, empowerment, and teamwork also play significant roles in effective management, the strict chain of command provides the necessary framework for those principles to be applied effectively and ensures that everyone within the organization understands the proper communication channels and authority structures.

**3. What type of care does Medicare Part D specifically focus on?**

- A. Vision coverage**
- B. Dental care**
- C. Drug coverage**
- D. Emergency services**

Medicare Part D specifically focuses on drug coverage, providing a prescription drug benefit to eligible Medicare beneficiaries. This program is designed to lower the cost of medications and improve access to necessary prescriptions for individuals covered by Medicare. It allows participants to choose from various plans that offer different prescriptions and pricing structures, ensuring that individuals can find a plan that best meets their healthcare needs. Other types of care, such as vision coverage, dental care, and emergency services, fall outside of Medicare Part D's scope. Vision and dental care may require separate insurance plans or additional coverage under different parts of Medicare, while emergency services are typically covered under Part A and Part B of Medicare. Thus, Medicare Part D is uniquely tailored to address the needs related to prescription drugs, making it a vital component of healthcare for beneficiaries who require medications.

**4. Which statement regarding interviewing a patient is considered correct?**

- A. Ask leading questions to guide the patient.**
- B. Restate the patient's comments to be sure the information recorded is accurate.**
- C. Interrupt the patient for clarifications.**
- D. Use only medical jargon to explain procedures.**

Restating the patient's comments to ensure that the information recorded is accurate is crucial in the patient interview process. This technique confirms that the healthcare provider fully understands the patient's concerns and experiences, thereby facilitating effective communication. By reflecting back what the patient has said, the provider not only demonstrates active listening but also gives the patient an opportunity to correct any misinterpretations. This approach fosters trust and builds rapport, which are essential for obtaining accurate medical histories and understanding the patient's perspective. Effective communication in a healthcare setting relies on clarity and mutual understanding. When the provider restates what the patient has expressed, it reinforces the message that the patient's input is valued and important for their care. This practice is particularly vital in healthcare, as misunderstandings can lead to misdiagnosis or inappropriate treatment options.

5. Which of the following best describes the process of controlling in healthcare management?
- A. Assessing patient outcomes only
  - B. Checking performance against standards and ensuring goals are met**
  - C. Developing strategic partnerships with other organizations
  - D. Unilaterally making decisions without staff input

The process of controlling in healthcare management is best defined by checking performance against standards and ensuring goals are met. This involves systematically measuring the effectiveness and efficiency of organizational activities against predefined benchmarks, which are often established to align with quality care standards, regulatory requirements, and institutional objectives. In healthcare management, this process is vital for ensuring that the organization's operations are on track to meet clinical and administrative goals. It involves continuous monitoring, evaluation of patient outcomes, resource utilization, and process efficiency. Providing feedback is essential to making informed adjustments, thereby enhancing service delivery quality and patient satisfaction. The other choices do not accurately represent the control function in healthcare management. For instance, assessing patient outcomes alone is too narrow and does not encompass the broader scope of performance management that includes various operational and strategic aspects. Developing strategic partnerships is more aligned with collaboration and resource optimization rather than the direct control process. Finally, making unilateral decisions without staff input contradicts the collaborative and inclusive approach necessary in effective healthcare management, especially in environments where teamwork and communication are crucial for patient care and operational success.

6. Which service is not a part of preventive care?
- A. Vaccination programs
  - B. Health screenings
  - C. Non-communicable disease prevention**
  - D. Wellness education

Preventive care focuses on measures that are taken to prevent illnesses, disease, and other health-related problems before they occur. This is achieved through a range of services such as vaccinations, health screenings, and wellness education, all of which aim to promote healthy behaviors and early detection of potential health issues. Non-communicable disease prevention, while essential for overall health management, is more about controlling and managing diseases that have already been diagnosed rather than preventing their occurrence. It typically involves strategies aimed at individuals who may be at risk due to lifestyle, genetic predisposition, or other factors. In contrast, preventive care operates on a broader spectrum before any disease has manifested, hence making it distinct from non-communicable disease prevention efforts. Such efforts are typically part of secondary or tertiary care rather than preventive care initiatives. This distinction clarifies why non-communicable disease prevention does not fall under the umbrella of preventive care services.

**7. Which of the following is not listed as a determinant of health?**

- A. Agent**
- B. Behavior**
- C. Environment**
- D. Access to Healthcare**

The correct choice identifies "Agent" as not being listed as a determinant of health. Determinants of health typically include a wide range of factors that influence the health status of individuals and populations. These determinants are broadly classified into categories such as behavior, environment, and access to healthcare. Behavior refers to the choices individuals make and their habits, which can positively or negatively impact their health. For example, lifestyle choices related to diet, exercise, smoking, and substance use play a crucial role in determining overall health outcomes. Environment encompasses various aspects, including physical, social, and economic factors that can affect health. This includes air quality, water quality, housing conditions, and access to healthy food and safe recreational areas. Access to healthcare is another vital determinant, highlighting how availability and affordability of healthcare services can significantly impact health outcomes. Individuals who have better access to healthcare are more likely to receive preventive services, timely diagnoses, and effective treatments. In contrast, "Agent," while it may refer to biological agents or pathogens involved in disease causation (like viruses or bacteria), is not traditionally classified as a principal determinant of health in the same way that behavior, environment, and access to healthcare are. The focus of health determinants typically emphasizes the broader social, economic,

**8. What are the six management functions in healthcare administration?**

- A. Planning, organizing, staffing, controlling, financing, directing**
- B. Planning, organizing, staffing, controlling, decision-making, directing**
- C. Planning, organizing, monitoring, controlling, decision-making, directing**
- D. Planning, staffing, budgeting, controlling, decision-making, evaluating**

The six management functions in healthcare administration include planning, organizing, staffing, controlling, decision-making, and directing. Each function plays a critical role in ensuring that healthcare organizations operate efficiently and effectively. Planning involves setting objectives and determining the best course of action to achieve them. It is essential for anticipating future needs and challenges in the healthcare environment. Organizing refers to structuring resources and activities to implement the plan, ensuring that the right people are assigned to the right tasks. Staffing is about recruiting, hiring, and training personnel, which is crucial in healthcare where the quality of care directly depends on the skills and capabilities of the staff. Controlling involves monitoring and evaluating performance to ensure that goals are being met and to make necessary adjustments. Decision-making is integral to all aspects of management; it drives the processes and strategies that guide an organization. Finally, directing involves leading and motivating staff to achieve the organization's objectives, which is vital in fostering a positive working environment and delivering quality patient care. The inclusion of decision-making as a distinct function emphasizes its importance in the management process, distinguishing it from other options that may not accurately reflect the comprehensive scope of healthcare administration management functions.

**9. According to Gordon's classification, which of the following is not a form of disease prevention?**

- A. Primary Prevention**
- B. Tertiary Prevention**
- C. Secondary Prevention**
- D. Quaternary Prevention**

In Gordon's classification of disease prevention, primary, secondary, and tertiary prevention are well-defined levels of intervention aimed at reducing the burden of disease at various stages. Primary prevention focuses on preventing the onset of disease before it occurs, such as through vaccination and health education. Secondary prevention aims at early detection and prompt treatment of disease, thus preventing it from becoming more severe. Tertiary prevention involves reducing the impact of an ongoing illness or injury that has lasting effects, aiming to improve quality of life and prolong survival. Quaternary prevention, while recognized in some health frameworks, is not typically included in traditional classifications of disease prevention. It concerns the prevention of unnecessary medical interventions. It will not fit neatly within the established categories that directly focus on the prevention of disease itself, unlike the other three levels which are geared towards keeping individuals healthy and managing existing conditions effectively. This distinction highlights why quaternary prevention does not align with Gordon's more conventional tiers of disease prevention.

**10. In budget management, what do we call a plan that is made for various levels of activity?**

- A. Flexible budget**
- B. Rolling budget**
- C. Static budget**
- D. Operational budget**

A flexible budget is designed to adapt to different levels of activity within an organization. This type of budget allows for the adjustment of costs and revenue projections based on actual levels of output or sales. For instance, if a healthcare facility experiences fluctuations in patient volume, a flexible budget can be adjusted to reflect this change, providing more accurate and relevant financial information. In contrast, a static budget remains unchanged regardless of activity levels, which may lead to inaccuracies in forecasting expenses and revenues when actual conditions deviate from the initial plan. A rolling budget continuously updates itself, typically on a quarterly basis, but it does so within a fixed time frame rather than varying with operational levels. An operational budget focuses on the income and expenditures necessary for the day-to-day functioning of the organization, often without the breadth of flexibility across different activities that a flexible budget offers. Overall, the flexibility of a flexible budget makes it particularly valuable for organizations that experience variable or unpredictable activity levels, such as those in the healthcare sector. This adaptability supports better managerial decision-making and financial planning.