

Health Systems and Consumers Exam 3 Practice (Sample)

Study Guide



Everything you need from our exam experts!

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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 level includes allocating resources within the region and has 16 regional health administrations?**
 - A. National level**
 - B. Subdistrict level**
 - C. Regional level**
 - D. District level**

- 2. What is a readmission penalty, and what is its purpose?**
 - A. A bonus paid to hospitals with low readmission rates.**
 - B. A generic penalty for all hospitals.**
 - C. A penalty that increases overall payments after a certain threshold.**
 - D. A reduction in payments to hospitals with high 30-day readmission rates to encourage better transitions and quality of care.**

- 3. Phase II reforms included which change in financing and costs?**
 - A. Increased insurance coverage and lower out-of-pocket costs**
 - B. Expansion of surveillance**
 - C. Increase in essential drug access**
 - D. Less insurance and more out-of-pocket payments**

- 4. Ghana's infant mortality rate is 31.9 per 1,000 live births. Which of the following is this statistic best described as?**
 - A. The number of infant deaths per 1000 live births**
 - B. The number of doctors per 1000 population**
 - C. The life expectancy at birth**
 - D. The gross domestic product per capita**

- 5. Quality measures generally assess which domains?**
 - A. Care quality, outcomes, safety, and patient experience.**
 - B. Time-to-treatment metrics.**
 - C. Revenue growth metrics.**
 - D. Patient experience and satisfaction.**

- 6. The health planning and services at the subdistrict level operate on what basis?**
- A. District basis**
 - B. Regional basis**
 - C. Zonal basis**
 - D. National basis**
- 7. What is health empowerment?**
- A. A process by which patients gain control over decisions about their health care**
 - B. A policy that restricts patient involvement in decision making**
 - C. A method for clinicians to standardize care without patient input**
 - D. A payment model that rewards providers for fewer patient choices**
- 8. Which province is known for being a major center of the mining industry in South Africa?**
- A. Mpumalanga**
 - B. Gauteng**
 - C. Northern Cape**
 - D. Limpopo**
- 9. In which year was Korea's Health Insurance Review and Assessment Service (HIRA) established?**
- A. 2000**
 - B. 1989**
 - C. 1990**
 - D. 2010**
- 10. Effective empowerment strategies for patients include:**
- A. Isolating patients from their caregivers**
 - B. Providing accessible information, building decision-making skills, and offering support**
 - C. Removing patient preferences from care planning**
 - D. Increasing wait times to reduce decisions**

Answers

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

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Explanations

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1. Which level includes allocating resources within the region and has 16 regional health administrations?

- A. National level**
- B. Subdistrict level**
- C. Regional level**
- D. District level**

The regional level is being described. This level translates national policies into region-specific plans, including budgeting and distributing resources across the smaller areas within that region. Having 16 regional health administrations fits this idea, as each region is managed by its own authority, coordinating resources, staffing, and services within its boundaries. The national level sets overall policy and funding, while districts and subdistricts handle direct service delivery in local areas. So allocating resources within a region and overseeing multiple regional administrations aligns with the regional level.

2. What is a readmission penalty, and what is its purpose?

- A. A bonus paid to hospitals with low readmission rates.**
- B. A generic penalty for all hospitals.**
- C. A penalty that increases overall payments after a certain threshold.**
- D. A reduction in payments to hospitals with high 30-day readmission rates to encourage better transitions and quality of care.**

A readmission penalty is a financial consequence used to discourage avoidable hospital returns by penalizing hospitals with higher-than-expected 30-day readmission rates for certain conditions. The idea is to push hospitals to strengthen discharge planning, care transitions, and post-discharge follow-up so patients don't end up back in the hospital soon after discharge. The best answer says that the penalty reduces payments to hospitals with high 30-day readmission rates to encourage better transitions and quality of care. That captures both the mechanism (payment reductions) and the aim (improve care transitions to lower avoidable readmissions). Why the other ideas don't fit: a bonus would reward low readmission rates, not penalize high ones; a universal penalty ignores variation between hospitals; and increasing payments after a threshold is the opposite of a penalty.

3. Phase II reforms included which change in financing and costs?

- A. Increased insurance coverage and lower out-of-pocket costs**
- B. Expansion of surveillance**
- C. Increase in essential drug access**
- D. Less insurance and more out-of-pocket payments**

Phase II reforms are about how care is financed and who bears the costs. In Phase II, the pattern is to shift more financial responsibility to individuals, reducing the extent of insurance protection. This shows up as higher out-of-pocket costs for patients, such as increased deductibles, co-pays, premiums, or a narrower set of covered services. That's why this change—less insurance protection and more burden on patients' wallets—best fits the idea of Phase II financing shifts. Expanding insurance coverage and lowering out-of-pocket costs would make care more affordable and is the opposite of the Phase II cost-shifting trend. Expanding surveillance is about monitoring and data, not financing. Increasing essential drug access reduces financial barriers for medications, which again does not match the described shift in who pays.

4. Ghana's infant mortality rate is 31.9 per 1,000 live births. Which of the following is this statistic best described as?

- A. The number of infant deaths per 1000 live births**
- B. The number of doctors per 1000 population**
- C. The life expectancy at birth**
- D. The gross domestic product per capita**

Infant mortality rate is defined as the number of infants who die before reaching age one per 1,000 live births in a given year. The Ghana figure of 31.9 per 1,000 live births means that about 32 babies die for every 1,000 babies born, reflecting deaths in the birth cohort and the health conditions surrounding pregnancy, birth, and the first year of life. This is distinct from workforce size (doctors per 1,000 people), life expectancy at birth (average expected lifespan), or GDP per capita (economic measure).

5. Quality measures generally assess which domains?

- A. Care quality, outcomes, safety, and patient experience.**
- B. Time-to-treatment metrics.**
- C. Revenue growth metrics.**
- D. Patient experience and satisfaction.**

Quality measures are meant to capture several important aspects of healthcare performance. The four commonly assessed areas are the overall quality of care (how well care aligns with evidence-based standards and aims to improve health), patient outcomes (the actual health results for patients), safety (the presence or absence of harm, errors, and preventable complications), and patient experience (how patients view communication, responsiveness, and overall satisfaction with their care). Because quality measurement covers all these facets, the option that includes care quality, outcomes, safety, and patient experience best fits what quality measures typically assess. The other options focus on only parts of the picture—time-to-treatment metrics analyze a single process timing dimension, revenue growth metrics are financial and not about care quality, and patient experience and satisfaction alone miss the safety and outcome dimensions that are also central to quality measurement.

6. The health planning and services at the subdistrict level operate on what basis?

- A. District basis**
- B. Regional basis**
- C. Zonal basis**
- D. National basis**

The idea being tested is organizing health planning and services at the subdistrict level using a zonal framework. In this setup, a district is divided into smaller zones, and each zone has its own planning, supervision, and resource decisions tailored to the specific local needs and population it serves. This zonal approach matters because health needs, population characteristics, and service gaps can vary widely within a single district. By planning and delivering services within zones, programs can target outreach, staffing, and resource allocation more precisely, monitor performance more responsively, and adjust strategies based on local data. If planning were done at a district level, the unique needs of different parts of the district might be averaged out, making some areas underserved. A regional or national basis, while useful for overarching policy, would be too broad to respond quickly to micro-level variations. The zonal basis strikes a balance by staying connected to district structures while enabling ground-level, localized action.

7. What is health empowerment?

- A. A process by which patients gain control over decisions about their health care**
- B. A policy that restricts patient involvement in decision making**
- C. A method for clinicians to standardize care without patient input**
- D. A payment model that rewards providers for fewer patient choices**

Health empowerment means patients gaining control over decisions about their health care, including access to information, education, and support to participate actively with clinicians in choosing among options, setting goals, and managing their conditions. This emphasis on informed, shared decision making and self-management is what makes it the best description. The other ideas describe restricting involvement, standardizing care without patient input, or tying payments to limiting choices, none of which capture the active role patients take in guiding their own health care.

8. Which province is known for being a major center of the mining industry in South Africa?

- A. Mpumalanga**
- B. Gauteng**
- C. Northern Cape**
- D. Limpopo**

Mpumalanga stands out because it sits on the Highveld coal basin and hosts most of South Africa's coal mining activity. The region includes key coal mines and towns like Emalahleni, and the coal mined there fuels many of the country's power stations. This direct link between large-scale mining and energy production makes Mpumalanga a major mining center. While other provinces have valuable minerals, the scale and industrial role of coal in Mpumalanga give it the strongest claim as a mining hub.

9. In which year was Korea's Health Insurance Review and Assessment Service (HIRA) established?

- A. 2000**
- B. 1989**
- C. 1990**
- D. 2010**

Understanding how a country structures oversight of medical services helps explain why HIRA was created when it was. The Health Insurance Review and Assessment Service was established in 2000 to review and assess medical services and determine appropriate reimbursement within Korea's National Health Insurance system. This creation marked a shift to separate the evaluation of care and pricing from direct payment decisions, aiming for standardized quality and fair reimbursement. The other years don't align with the actual founding timeline of HIRA, which is why 2000 is the correct point in time.

10. Effective empowerment strategies for patients include:

- A. Isolating patients from their caregivers**
- B. Providing accessible information, building decision-making skills, and offering support**
- C. Removing patient preferences from care planning**
- D. Increasing wait times to reduce decisions**

Empowering patients hinges on giving them the tools to participate in their own care. When patients have information they can understand, the skills to weigh options and express preferences, and solid support from the care team, they can take an active role in decisions that affect their health. Accessible information means presenting options, risks, and benefits in plain language, with translations or alternative formats as needed, so patients can truly grasp what choices exist. Building decision-making skills goes beyond information: it involves teaching patients how to compare options, ask informed questions, and articulate what matters most to them. Offering support encompasses ongoing guidance, reassurance, and practical help from clinicians, family, or patient navigators to sustain engagement throughout the care journey. These elements together create a collaborative, patient-centered approach that improves satisfaction, adherence, and outcomes. In contrast, isolating patients from caregivers removes important social support; removing patient preferences disrespects autonomy and personalization; and increasing wait times delays decisions and undermines patient engagement.

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://healthsysconsumers3.examzify.com>

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

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