

NHCAA Accredited Health Care Fraud Investigator (AHFI) Practice Exam (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

- 1. Why is buy-in critical to the effectiveness of a Compliance Program?**
 - A. It ensures everyone is involved**
 - B. It allows for immediate reactions**
 - C. It helps in educating participants**
 - D. It offers an opportunity for all voices to be heard**
- 2. What intention does the confidentiality safeguard serve?**
 - A. To ensure PHI is documented accurately**
 - B. To guarantee only authorized individuals can access PHI**
 - C. To make PHI available at all times**
 - D. To ensure PHI is consistent with patient's health records**
- 3. When must an investigation occur in healthcare compliance?**
 - A. Only during routine audits**
 - B. After a positive report from management**
 - C. Upon a report of improper conduct**
 - D. When an agreement is signed**
- 4. What does the Upjohn Warning inform employees regarding legal counsel?**
 - A. That their statements are confidential**
 - B. That they are represented as individuals**
 - C. That legal counsel represents the company**
 - D. That they cannot be investigated**
- 5. What is the time frame within which disclosures must be submitted after discovery under the OIG SDP?**
 - A. 14 days**
 - B. 30 days**
 - C. 60 days**
 - D. 90 days**

- 6. In the context of compliance, what does consistency in enforcement refer to?**
- A. Uniform application of disciplinary measures**
 - B. Varying consequences based on circumstances**
 - C. Dependent enforcement based on employee level**
 - D. Random checks for compliance**
- 7. Which of the following is NOT a method to gain buy-in for Compliance Programs?**
- A. Education**
 - B. Isolation**
 - C. Motivation**
 - D. Participation**
- 8. What is a requirement of the OIG Self Disclosure Protocol regarding submissions?**
- A. Complete disclosure and quick submission**
 - B. Limited cooperation with investigators**
 - C. Submission only if the legal case is strong**
 - D. Submit within 90 days from discovery**
- 9. What does the privacy rule primarily signify?**
- A. Details on handling PHI in clinical settings**
 - B. Identification of what should be protected and individuals' rights**
 - C. Guidelines for the ethical treatment of patients**
 - D. Security measures for electronic data**
- 10. What is a primary advantage of concurrent audits?**
- A. They are based on historical data**
 - B. They are conducted in real-time**
 - C. They are easier to document**
 - D. They require less planning**

Answers

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

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Explanations

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1. Why is buy-in critical to the effectiveness of a Compliance Program?

- A. It ensures everyone is involved**
- B. It allows for immediate reactions**
- C. It helps in educating participants**
- D. It offers an opportunity for all voices to be heard**

Buy-in is critical to the effectiveness of a Compliance Program because it ensures that everyone within the organization is engaged and committed to its principles and practices. When employees at all levels of an organization understand the importance of compliance and actively participate in fostering a culture of accountability, the likelihood of successful implementation and adherence to compliance protocols increases significantly. This involvement cultivates a shared responsibility for ethical behavior and adherence to regulations, which diminishes the risk of violations and promotes a safeguarding environment against fraud and misconduct. Such collective commitment helps create a culture where compliance is integrated into everyday practices, rather than viewed as a mere checkbox requirement. While other options highlight important aspects of a Compliance Program, the foundational component of buy-in underscores the need for collective effort and engagement throughout the organization as essential for the program's sustainability and effectiveness.

2. What intention does the confidentiality safeguard serve?

- A. To ensure PHI is documented accurately**
- B. To guarantee only authorized individuals can access PHI**
- C. To make PHI available at all times**
- D. To ensure PHI is consistent with patient's health records**

The confidentiality safeguard primarily serves the intention of ensuring that only authorized individuals can access Protected Health Information (PHI). This is essential to maintaining the privacy rights of patients and complying with regulations like the Health Insurance Portability and Accountability Act (HIPAA). By limiting access to PHI, healthcare organizations can protect sensitive information from unauthorized disclosures, which in turn helps to build trust between patients and healthcare providers. The other options, while related to the management of PHI, do not specifically speak to the intention of confidentiality safeguards. Ensuring that PHI is documented accurately and consistent with patient health records addresses aspects of data integrity and accuracy but doesn't directly pertain to confidentiality. Making PHI available at all times is counterproductive to the concept of confidentiality, as it could lead to unauthorized access. Thus, the focus on restricting access to authorized individuals encapsulates the primary aim of confidentiality safeguards in healthcare settings.

3. When must an investigation occur in healthcare compliance?

- A. Only during routine audits**
- B. After a positive report from management**
- C. Upon a report of improper conduct**
- D. When an agreement is signed**

An investigation must occur upon a report of improper conduct because this is essential for maintaining compliance and ensuring the integrity of healthcare operations. Reports of improper conduct can originate from various sources, including employees, patients, or external whistleblowers. Responding promptly to these reports is crucial in identifying potential violations of laws or regulations, addressing issues appropriately, and safeguarding the organization against further risks or legal challenges. While routine audits and management reports can reveal compliance issues, they are not the definitive triggers for initiating an investigation. Investigations specifically focus on addressing and resolving allegations or evidence of wrongdoing, which is the proactive step to protect both patient welfare and organizational reputation. Consequently, signing an agreement does not inherently necessitate an investigation unless there are reports of improper conduct tied to that agreement, underscoring the critical need for timely action in response to improper behavior in healthcare settings.

4. What does the Upjohn Warning inform employees regarding legal counsel?

- A. That their statements are confidential**
- B. That they are represented as individuals**
- C. That legal counsel represents the company**
- D. That they cannot be investigated**

The Upjohn Warning is an important concept in the context of attorney-client privilege and organizational representation. It informs employees that while they are speaking to an attorney from the organization, that attorney represents the interests of the company, not the individual employee. This distinction is crucial because it highlights that any communications made by the employee during such discussions do not confer individual legal protections typically associated with attorney-client privilege. Employees need to understand that their statements can be used against them in any legal scrutiny if the company faces legal challenges. The Upjohn Warning serves to clarify the relationship between the employee and the company's legal counsel, ensuring that employees do not mistakenly believe they are receiving personal representation or confidentiality for their individual statements. This understanding is key in fostering transparency and awareness during internal investigations or legal proceedings involving the organization.

5. What is the time frame within which disclosures must be submitted after discovery under the OIG SDP?

- A. 14 days**
- B. 30 days**
- C. 60 days**
- D. 90 days**

Under the OIG Self-Disclosure Protocol (SDP), health care providers are required to submit disclosures regarding potential overpayments or violations promptly after they become aware of the issue. The correct time frame for submitting these disclosures is 60 days after the organization has discovered the material facts relevant to the violation. This timeline is designed to encourage timely reporting and resolution of issues, allowing for a more efficient handling of potential fraud and abuse cases. Submitting the disclosure within this 60-day period enables the OIG to assess the situation quickly, determine the severity and scope of the issue, and engage in dialogue with the disclosing entity regarding potential corrective measures. This timeline is essential for maintaining compliance with federal regulations and avoiding significant penalties that may arise from delayed disclosures. It underscores the importance of prompt action in compliance efforts and reflects the OIG's commitment to fostering transparency within the healthcare system.

6. In the context of compliance, what does consistency in enforcement refer to?

- A. Uniform application of disciplinary measures**
- B. Varying consequences based on circumstances**
- C. Dependent enforcement based on employee level**
- D. Random checks for compliance**

In the context of compliance, consistency in enforcement refers to the uniform application of disciplinary measures. This means that when a violation of compliance policies occurs, the same standards and consequences are applied to all individuals involved, regardless of their status or circumstances. This uniformity is crucial in maintaining fairness and trust within an organization, as it demonstrates that all employees are held to the same standards. It also serves to deter potential violations, as employees know that similar actions will lead to similar consequences. Having a consistent enforcement protocol helps an organization not only in addressing compliance issues but also in fostering a culture of accountability. When everyone understands that breaches will be dealt with in a standardized manner, it promotes adherence to regulations and policies. In contrast, the other options suggest varying degrees of flexibility and subjectivity in enforcement, which can undermine the effectiveness of compliance measures and lead to perceptions of unfairness among employees. For instance, varying consequences based on circumstances might create confusion or the impression that some individuals are exempt from disciplinary actions due to their situations. Dependent enforcement based on employee level can result in perceptions of favoritism, and random checks do not ensure consistency in how violations are handled.

7. Which of the following is NOT a method to gain buy-in for Compliance Programs?

- A. Education**
- B. Isolation**
- C. Motivation**
- D. Participation**

Gaining buy-in for Compliance Programs is crucial for successful implementation and ongoing adherence to regulations. The correct answer, which identifies isolation as not a method to gain buy-in, highlights an important aspect of effective compliance strategies. Isolation suggests separating individuals or groups from the compliance process, which can lead to a lack of understanding, engagement, and commitment. In contrast, methods such as education, motivation, and participation foster a collaborative environment. Education equips individuals with the necessary knowledge about compliance programs, ensuring they understand the importance of compliance and their role within it. Motivation encourages individuals to recognize the personal and organizational benefits of compliance, creating a shared sense of purpose. Participation actively involves employees in compliance processes, allowing them to contribute and feel invested in the outcomes. Together, these methods promote a culture of compliance and encourage buy-in from all levels of an organization, ensuring that everyone is aligned with compliance goals and responsibilities.

8. What is a requirement of the OIG Self Disclosure Protocol regarding submissions?

- A. Complete disclosure and quick submission**
- B. Limited cooperation with investigators**
- C. Submission only if the legal case is strong**
- D. Submit within 90 days from discovery**

The requirement of the OIG Self Disclosure Protocol regarding submissions emphasizes the necessity for complete disclosure and quick submission of information related to potential violations. This protocol encourages entities to be proactive in reporting any identified issues, allowing for transparency and enabling the Office of Inspector General (OIG) to effectively address and resolve the matters at hand. The focus on completeness ensures that all relevant details are provided, which aids in a thorough understanding of the circumstances surrounding the potential violation. This approach also promotes responsibility and accountability among healthcare providers, demonstrating a commitment to compliance and ethical practices in healthcare. Timely submission is crucial since it helps mitigate potential consequences and fosters a cooperative relationship with regulatory authorities. Providing a comprehensive account of the issues as soon as they are identified can influence the outcomes, including potential leniency in penalties. The other options do not align with the principles established by the OIG Self Disclosure Protocol. Limited cooperation with investigators undermines the purpose of the protocol and could lead to more severe penalties. Submitting only if a legal case is strong could result in withholding crucial information and failing to address violations promptly. Similarly, the requirement to submit within 90 days from discovery does not capture the essence of the protocol, which prioritizes complete and swift disclosure over arbitrary timelines.

9. What does the privacy rule primarily signify?

- A. Details on handling PHI in clinical settings
- B. Identification of what should be protected and individuals' rights**
- C. Guidelines for the ethical treatment of patients
- D. Security measures for electronic data

The privacy rule primarily signifies the identification of what should be protected and individuals' rights concerning their personal health information (PHI). This framework establishes guidelines that ensure individuals have rights over their information, including the right to access their health records and request corrections. The rule also delineates the circumstances under which personal health information can be shared, thereby empowering individuals while promoting trust in the healthcare system. The other options, while related to the broader scope of health privacy and security, do not capture the core essence of the privacy rule. For instance, handling PHI in clinical settings, though important, is more operational and does not encompass the full scope of individual rights highlighted by the privacy rule. Similarly, guidelines for the ethical treatment of patients pertain to the moral responsibilities of healthcare providers, rather than the specific legal framework regarding personal health information. Security measures for electronic data focus primarily on the protection of data from unauthorized access or breaches but do not encompass the rights of individuals or the definition of what constitutes protectable information. Thus, the correct answer emphasizes the essential focus of the privacy rule on individual rights and the protections afforded to their personal health information.

10. What is a primary advantage of concurrent audits?

- A. They are based on historical data
- B. They are conducted in real-time**
- C. They are easier to document
- D. They require less planning

Concurrent audits are particularly advantageous because they are conducted in real-time, allowing auditors to review transactions as they occur rather than relying solely on historical data. This real-time approach enables immediate identification of discrepancies, irregularities, or potential fraud, allowing organizations to take corrective actions swiftly. By addressing issues as they arise, concurrent audits enhance the overall effectiveness of the audit process, improving the ability to prevent fraud and ensure compliance with regulations. This method provides a continual oversight mechanism, which can significantly reduce the risk of fraud being undetected for extended periods. While documenting concurrent audits can vary in complexity and might not always be easier, and while planning is still necessary to ensure the audit is effective, the key advantage lies in their continuous and proactive nature. This immediacy makes concurrent audits a valuable tool in the fight against health care fraud.

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://nhcaaahfi.examzify.com>

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