

Promoting Health in Australia AOS 2 Practice Test (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 of the following is an example of Reorient Health Services practice?**
 - A. Doctors focusing a discussion around healthy eating rather than just medication and surgery to reduce CVD**
 - B. Ambulance workers providing road safety sessions for secondary school students**
 - C. An immunisation strategy involving media, doctors, schools and parents**
 - D. A community health centre running cooking classes**

- 2. Which statement describes the funding focus of the NDIS?**
 - A. Funding for carers and assistive technology**
 - B. Funding for private hospital care**
 - C. Funding for private health insurance rebates**
 - D. Funding for PBS medicines**

- 3. Which statement best defines equity in health care?**
 - A. An equitable health system is one that takes in the different circumstances of individuals and groups into account, so those who need more support can receive it.**
 - B. An equitable system provides the same services to everyone regardless of need.**
 - C. Equity means only reducing costs.**
 - D. Equity means excluding minority groups from services.**

- 4. Which of the following is NOT covered by Medicare?**
 - A. Cosmetic procedures**
 - B. X-Rays**
 - C. Doctor consultations**
 - D. Eye tests**

- 5. What happens under PBS Safety Net after high co-payments?**
 - A. After high total co-payments within a calendar year, PBS Safety Net provides further subsidy.**
 - B. PBS Safety Net applies to all medicines automatically.**
 - C. PBS Safety Net doubles the government subsidy for all prescriptions.**
 - D. PBS Safety Net is not related to PBS-listed medicines.**

- 6. What percentage does PBS coverage aim to provide for medicines?**
- A. About 10%**
 - B. About 60%**
 - C. About 80%**
 - D. About 40%**
- 7. PBS access: which statement is true?**
- A. Only high income earners receive PBS subsidies.**
 - B. All Australian citizens and permanent residents are entitled to access subsidised medicines through the PBS.**
 - C. PBS subsidies apply only to medicines for chronic diseases.**
 - D. PBS requires private insurance for subsidies.**
- 8. Describe the NDIS.**
- A. The NDIS is a universal health program that covers all healthcare costs.**
 - B. The NDIS is a national insurance scheme that provides services and support for people with permanent, significant disabilities, working with individuals to develop an individualized plan that enables access to reasonable and necessary supports so they can live an ordinary life and achieve their personal goals and aspirations.**
 - C. The NDIS provides pensions.**
 - D. The NDIS regulates private health insurance.**
- 9. Which statement about the Medicare Levy Surcharge is true?**
- A. It applies to all income earners regardless of private insurance**
 - B. It is 2% of taxable income for most Australian taxpayers**
 - C. It funds only cosmetic therapies**
 - D. It applies to high income earners who do not have private health insurance**

10. Which levy increased to 2 percent in July 2014?

- A. Medicare Levy**
- B. GST**
- C. NDIS Levy**
- D. Private Health Insurance Rebate**

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Answers

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

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Explanations

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1. Which of the following is an example of Reorient Health Services practice?
- A. Doctors focusing a discussion around healthy eating rather than just medication and surgery to reduce CVD
 - B. Ambulance workers providing road safety sessions for secondary school students
 - C. An immunisation strategy involving media, doctors, schools and parents**
 - D. A community health centre running cooking classes

Reorient health services means shifting how the health system works to prioritise prevention and health promotion, and coordinating across different sectors to deliver preventive interventions. An immunisation strategy that involves media, doctors, schools and parents demonstrates this shift: it reorganises roles and partnerships so vaccination is promoted, delivered, and supported across multiple settings, aligning resources, information, and access to prevent disease rather than only treating it after it occurs. Other options touch on health promotion or preventive work, but they don't illustrate a system-wide change in how services are organized to prevent illness. Focusing a clinician's discussion on healthy eating is valuable care, but it's a change in individual practice rather than how services are structured. Ambulance staff delivering road-safety sessions is outreach and education, not a reconfiguration of service delivery. A community health centre running cooking classes is a beneficial program, but again it's a service activity rather than reorienting the broader health system toward preventive action across sectors.

2. Which statement describes the funding focus of the NDIS?
- A. Funding for carers and assistive technology**
 - B. Funding for private hospital care
 - C. Funding for private health insurance rebates
 - D. Funding for PBS medicines

NDIS funding focuses on supports that help a person with disability participate in daily life and live more independently. This includes funding for assistive technology—devices and equipment that help with daily tasks or communication—and for supports for carers, such as respite or training that enable the person with a disability to function more independently. These areas reflect the NDIS aim to fund reasonable and necessary supports that promote independence and participation. By contrast, private hospital care, private health insurance rebates, and PBS medicines are funded through other systems such as Medicare/private hospitals, private insurers, or the Pharmaceutical Benefits Scheme, not the NDIS. So funding for carers and assistive technology best describes the NDIS focus.

3. Which statement best defines equity in health care?

- A. An equitable health system is one that takes in the different circumstances of individuals and groups into account, so those who need more support can receive it.**
- B. An equitable system provides the same services to everyone regardless of need.**
- C. Equity means only reducing costs.**
- D. Equity means excluding minority groups from services.**

Equity in health care means fairness in how services and support are allocated, taking into account that people have different needs and circumstances. The idea is to recognize those differences and, where needed, provide more help to those who face greater barriers or higher health risks. For example, rural residents might get extra support to access specialists, Indigenous communities may receive targeted programs to address specific health disparities, and people with chronic conditions may receive more intensive care coordination. This is why the statement describing an equitable system as one that considers individual circumstances so those who need more support can receive it is the best definition. It goes beyond giving everyone the same thing and focuses on fairness based on need. Providing the same services to everyone regardless of need reflects equality, not equity. Reducing costs alone doesn't address who gets access or how much support different groups need. Excluding minority groups is discriminatory and opposite to equity.

4. Which of the following is NOT covered by Medicare?

- A. Cosmetic procedures**
- B. X-Rays**
- C. Doctor consultations**
- D. Eye tests**

Medicare funds health care that is medically necessary to diagnose or treat a condition. Elective cosmetic procedures are not funded because they are primarily about appearance, not medical need. That's why cosmetic procedures sit outside Medicare coverage, while the other options fit into covered services when they're clinically indicated: X-rays are rebated when ordered by a clinician for diagnosis, doctor consultations are covered for medical care, and eye tests can be funded under specific circumstances or for eligible groups. In short, the key idea is that Medicare supports medically necessary care, not cosmetic work.

5. What happens under PBS Safety Net after high co-payments?

- A. After high total co-payments within a calendar year, PBS Safety Net provides further subsidy.**
- B. PBS Safety Net applies to all medicines automatically.**
- C. PBS Safety Net doubles the government subsidy for all prescriptions.**
- D. PBS Safety Net is not related to PBS-listed medicines.**

The Safety Net is about protecting you from high out-of-pocket costs for PBS-listed medicines in a calendar year. Once your total co-payments reach the annual threshold, the Safety Net kicks in and the government increases its subsidy for PBS medicines for the rest of that year. This means your remaining costs for PBS-listed medicines drop significantly (often to the concessional price or even free for the rest of the year), until the next year's threshold resets. It specifically applies to PBS-listed medicines, not all medicines.

6. What percentage does PBS coverage aim to provide for medicines?

- A. About 10%**
- B. About 60%**
- C. About 80%**
- D. About 40%**

The Medicines Subsidy from PBS is about making medications affordable by sharing the cost between the government and the patient. It does not cover the full price; the subsidy portion is around 40% of the typical medicine price, with the patient paying the remaining share as a co-payment. This structure helps keep essential medicines accessible while balancing government funding and patient out-of-pocket costs. The exact amount you pay can vary depending on the medicine and whether you have concessional status, but the aim of PBS coverage is to provide a meaningful subsidy rather than full price coverage.

7. PBS access: which statement is true?

- A. Only high income earners receive PBS subsidies.**
- B. All Australian citizens and permanent residents are entitled to access subsidised medicines through the PBS.**
- C. PBS subsidies apply only to medicines for chronic diseases.**
- D. PBS requires private insurance for subsidies.**

The PBS is a government program that lowers the cost of medicines for people who are eligible, ensuring affordable access. The true statement reflects that all Australian citizens and permanent residents are entitled to access subsidised medicines through the PBS, which aligns with the program's aim to provide broad, affordable coverage rather than restricting access by income. Subscriptions under the PBS cover a wide range of medicines, including those used for both acute and chronic conditions, so the subsidy isn't limited to chronic diseases. Private insurance isn't required to receive PBS subsidies; having private cover may help with costs beyond the PBS or for non-listed medicines, but eligibility for the PBS subsidy itself does not depend on it.

8. Describe the NDIS.

- A. The NDIS is a universal health program that covers all healthcare costs.
- B. The NDIS is a national insurance scheme that provides services and support for people with permanent, significant disabilities, working with individuals to develop an individualized plan that enables access to reasonable and necessary supports so they can live an ordinary life and achieve their personal goals and aspirations.**
- C. The NDIS provides pensions.
- D. The NDIS regulates private health insurance.

This item tests your understanding of what the NDIS is and how it operates in Australia. The NDIS is a national insurance-style system that provides services and supports for people with permanent, significant disabilities. It works by partnering with individuals to develop an individualized plan that identifies the reasonable and necessary supports they need to live an ordinary life and to pursue their personal goals and aspirations. The emphasis is on choice, control, and outcomes, helping people participate in daily life, school, work, and the community. The supports funded can include personal care, therapies, assistive technology, home or vehicle modifications, equipment, and supports to engage in education or employment. It's administered by the National Disability Insurance Agency and funded by the government. It isn't a universal health program covering all healthcare costs, it isn't pensions, and it doesn't regulate private health insurance.

9. Which statement about the Medicare Levy Surcharge is true?

- A. It applies to all income earners regardless of private insurance
- B. It is 2% of taxable income for most Australian taxpayers
- C. It funds only cosmetic therapies
- D. It applies to high income earners who do not have private health insurance**

The Medicare Levy Surcharge is an extra levy aimed at encouraging higher-income Australians to take out private hospital cover and to reduce demand on public hospitals. It only applies to those who earn above certain income thresholds and do not have private health insurance. If you have private hospital cover, you're generally exempt from the surcharge even if your income is above the threshold. The charge is not a universal 2% of taxable income for most taxpayers; the rate is nuanced and depends on income and family situation, but it rises with higher income. It doesn't fund cosmetic therapies, and it's not applicable to everyone regardless of private insurance. So the true statement is that it applies to high-income earners who do not have private health insurance.

10. Which levy increased to 2 percent in July 2014?

A. Medicare Levy

B. GST

C. NDIS Levy

D. Private Health Insurance Rebate

The increase to 2% was part of funding for Australia's universal health system through the Medicare Levy. In July 2014 the Medicare Levy rose from 1.5% to 2% to help finance the National Disability Insurance Scheme, so the levy that increased to 2% is the Medicare Levy. GST is a separate tax on goods and services, and the Private Health Insurance Rebate is a subsidy, not a levy.

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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://promotinghealthinausaos2.examzify.com>

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

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