

Registered Health Information Administrator (RHIA) Domain 2 Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

This is a sample study guide. To access the full version with hundreds of questions,

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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. Don't worry about getting everything right, 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, and take breaks to retain information better.

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.

7. Use Other Tools

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!

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Questions

- 1. What is one benefit of improved security in electronic health records (EHR)?**
 - A. Enhanced patient satisfaction**
 - B. Reduced operational costs**
 - C. Access Controls**
 - D. Faster processing times**
- 2. What is the purpose of granting privileges in a healthcare organization?**
 - A. To promote employee retention**
 - B. To define what services providers may perform**
 - C. To improve patient satisfaction scores**
 - D. To facilitate teamwork among staff**
- 3. Fundraising solicitations under HIPAA may not target which of the following?**
 - A. General public**
 - B. Specific diagnosis**
 - C. Benefactors**
 - D. Volunteers**
- 4. What is the main concern with healthcare records when a patient is deemed incompetent?**
 - A. The healthcare provider must re-evaluate the patient**
 - B. Advance directives must still be followed**
 - C. All records must be destroyed**
 - D. Consent becomes the responsibility of legal guardians**
- 5. What does a facility directory typically include?**
 - A. Patient medical histories**
 - B. General condition and acknowledgment of admission**
 - C. Billing information and insurance details**
 - D. Patient personal information and demographics**

- 6. What does the term 'spoliation' refer to in a healthcare context?**
- A. Collecting patient feedback**
 - B. Creating new patient records**
 - C. Destroying a record outside of destruction standards and regulations**
 - D. Updating existing health records**
- 7. What must an entity determine regarding the Addressable Security Rule?**
- A. If it is needed for all patients**
 - B. If it is reasonable and appropriate to implement**
 - C. If it affects the quality of care**
 - D. If other entities are following it**
- 8. If a patient chooses to pay out of pocket, what restriction can they impose?**
- A. Limit information strictly to clinical notes**
 - B. Restrict insurance information from being accessed**
 - C. No restrictions can be placed**
 - D. Require a written request for all information**
- 9. What is included in a security incident procedure standard?**
- A. Identifying and responding to security events**
 - B. Reviewing financial transactions**
 - C. Analysis of marketing strategies**
 - D. Employee training programs**
- 10. What is the responsibility of an employer under the principle of Respondeat Superior?**
- A. To monitor employee behavior**
 - B. To provide benefits to employees**
 - C. To ensure safety in the workplace**
 - D. To be responsible for employees' negligence**

Answers

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

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Explanations

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1. What is one benefit of improved security in electronic health records (EHR)?

- A. Enhanced patient satisfaction**
- B. Reduced operational costs**
- C. Access Controls**
- D. Faster processing times**

Improved security in electronic health records (EHR) primarily manifests through enhanced access controls. Access controls serve as a critical mechanism to safeguard sensitive health information by ensuring that only authorized personnel can view or manipulate patient data. This is vital for maintaining patient confidentiality and compliance with regulations such as HIPAA, which mandates protecting health information from unauthorized access. By implementing strong access control measures, healthcare organizations can mitigate the risks of data breaches, prevent identity theft, and maintain the integrity of patient records. This not only enhances patient trust in the healthcare system but also ensures that sensitive information is shared appropriately among healthcare providers, thereby facilitating better patient care. Access controls can include various methods such as password protection, biometric scans, and role-based access, each designed to limit access to EHRs strictly to those who need it in order to perform their jobs, which is essential in today's digital health landscape.

2. What is the purpose of granting privileges in a healthcare organization?

- A. To promote employee retention**
- B. To define what services providers may perform**
- C. To improve patient satisfaction scores**
- D. To facilitate teamwork among staff**

The purpose of granting privileges in a healthcare organization primarily revolves around defining what services providers, such as physicians and allied health professionals, are authorized to perform. This process ensures that healthcare providers are competent in the specific procedures and treatments they are allowed to administer, thereby enhancing the safety and quality of patient care. By clearly delineating the scope of practice for various healthcare professionals, privileges help organizations manage risk and comply with regulations, as they must ensure that only qualified individuals perform specific procedures. This aligns with the organization's mission to deliver safe and effective health care to its patients. While employee retention, patient satisfaction scores, and teamwork are important aspects of a healthcare environment, they are not the direct purpose of granting privileges. Understanding this distinction is crucial for effective governance and risk management within a healthcare facility.

3. Fundraising solicitations under HIPAA may not target which of the following?

- A. General public**
- B. Specific diagnosis**
- C. Benefactors**
- D. Volunteers**

Under HIPAA, fundraising solicitations cannot target individuals based on specific diagnoses. This is because doing so could potentially reveal confidential health information about patients, which HIPAA aims to protect. Fundraising activities should respect the privacy of individuals and ensure that any communications do not disclose or imply personal health conditions or treatment details. In contrast, soliciting the general public, benefactors, or volunteers does not involve the same risks because these groups are not specifically tied to an individual's health data. Targeting the general public or people who support the organization through donations or volunteer work does not violate privacy concerns, as these individuals do not have a specific connection to health information that could be compromised. Therefore, the restriction is primarily about avoiding the use of sensitive health information tied to specific diagnoses in fundraising efforts.

4. What is the main concern with healthcare records when a patient is deemed incompetent?

- A. The healthcare provider must re-evaluate the patient**
- B. Advance directives must still be followed**
- C. All records must be destroyed**
- D. Consent becomes the responsibility of legal guardians**

The main concern with healthcare records when a patient is deemed incompetent is that consent for treatment and decision-making is typically transferred to a legal representative, such as a guardian or an agent designated in an advance directive. Advance directives are legal documents that articulate a patient's preferences regarding medical treatment when they are unable to make those decisions themselves. In this context, it is crucial for healthcare providers to honor the directives that the patient had put in place while they were competent. These directives provide guidance on the patient's wishes concerning medical care, thus respecting their autonomy even when they can no longer express their decisions. Adhering to these directives ensures that the medical treatment aligns with the previously stated preferences of the patient. Other considerations, like re-evaluating the patient's condition or destroying records, do not pertain directly to the handling of patient wishes regarding care in the context of incompetence. Instead, it is the responsibility to follow advance directives that highlights the ethical obligation of healthcare providers to respect the patient's rights and prior decisions.

5. What does a facility directory typically include?

- A. Patient medical histories
- B. General condition and acknowledgment of admission**
- C. Billing information and insurance details
- D. Patient personal information and demographics

A facility directory is designed to provide essential information about patients admitted to the facility while maintaining a balance between information sharing and patient privacy. The inclusion of general condition and acknowledgment of admission ensures that visitors and staff can understand and access basic details about the patients without delving into confidential medical histories or personal information. By offering information on the general condition of a patient - such as whether they are in stable, critical, or recovering condition - the directory assists in communication and support among healthcare providers, visitors, and other authorized individuals. Additionally, the acknowledgment of admission signifies that the individual is indeed a patient within the facility, which supports accountability and administrative procedures. While options like patient medical histories, billing information, and demographic details provide vital data within a healthcare environment, they are typically not included in the facility directory due to privacy regulations and the sensitive nature of that information. Thus, detailing a patient's general condition and their admission status in the directory serves the purpose of balancing patient communication needs while adhering to confidentiality requirements.

6. What does the term 'spoliation' refer to in a healthcare context?

- A. Collecting patient feedback
- B. Creating new patient records
- C. Destroying a record outside of destruction standards and regulations**
- D. Updating existing health records

In the context of healthcare, 'spoliation' refers specifically to the improper destruction or alteration of records in a way that violates established standards and regulations. This term is particularly significant in legal and compliance discussions, as it indicates that records have been tampered with or discarded when they should have been preserved according to regulatory obligations. Spoliation can lead to serious consequences for healthcare organizations, including legal penalties, loss of credibility, and the inability to defend against claims in court due to the absence of key evidence. Therefore, understanding spoliation is crucial for health information professionals who are responsible for maintaining the integrity and security of patient records. The other options, while related to various aspects of healthcare operations, do not encapsulate the specific legal implications and practices associated with spoliation. Collecting patient feedback, creating new records, and updating existing records all involve the proper management of information but do not pertain to the unlawful destruction or mishandling of records.

7. What must an entity determine regarding the Addressable Security Rule?

- A. If it is needed for all patients**
- B. If it is reasonable and appropriate to implement**
- C. If it affects the quality of care**
- D. If other entities are following it**

In the context of the Addressable Security Rule, the entity is required to determine if it is reasonable and appropriate to implement the specified safeguards. This determination is crucial because the Addressable Security Rule allows for flexibility in compliance. Unlike mandatory requirements, which must be implemented without exception, addressable items require entities to evaluate their specific circumstances, resources, and risks to decide whether and how to implement them. When an entity assesses whether a safeguard is reasonable and appropriate, it takes into consideration factors such as its size, the nature and complexity of its operations, the costs of implementing the safeguards, and the potential risks involved. This tailored approach ensures that the security measures adopted align closely with the entity's particular environment and the sensitivity of the data being protected. In contrast, the other options do not reflect the primary focus of the Addressable Security Rule. The evaluation does not directly relate to whether it is needed for all patients or if it affects the quality of care, as these outcomes are more about patient care practices rather than the security rule's compliance. Additionally, while it can be useful for an entity to be aware of other entities' compliance, this consideration does not determine whether the specific safeguards are justified as reasonable and appropriate for that entity's situation.

8. If a patient chooses to pay out of pocket, what restriction can they impose?

- A. Limit information strictly to clinical notes**
- B. Restrict insurance information from being accessed**
- C. No restrictions can be placed**
- D. Require a written request for all information**

When a patient opts to pay out of pocket for their healthcare services, they can impose specific restrictions on how their information is handled. One of the key aspects of this arrangement is that patients can restrict access to their insurance information. By paying out of pocket, the patient may choose to keep their health records and any related information private from their insurance provider to avoid potential implications such as higher premiums or other disclosures that could affect their coverage. The reasoning behind this is rooted in privacy rights and the Health Insurance Portability and Accountability Act (HIPAA), which grants patients the right to access and control their health information. When patients pay out of pocket and do not involve their insurance, they have the ability to dictate how much information can be shared and to whom, particularly concerning sensitive insurance-related information that they might prefer not to disclose. This option reflects the idea that patients who assume full financial responsibility for their care have greater control over their health information, especially regarding how it may be used or disclosed by third parties, like insurance companies. This demonstrates their autonomy in managing their healthcare and the associated details without outside influences.

9. What is included in a security incident procedure standard?

- A. Identifying and responding to security events**
- B. Reviewing financial transactions**
- C. Analysis of marketing strategies**
- D. Employee training programs**

A security incident procedure standard is fundamentally designed to establish a framework for managing security incidents effectively. It includes the processes for identifying and responding to security events, which is critical in mitigating potential damage and ensuring a swift resolution. This involves the detection of security threats, assessing the impact of these events, and implementing appropriate responses to contain and recover from breaches. On the other hand, reviewing financial transactions, analyzing marketing strategies, and employee training programs, while they may play roles in the broader context of organizational security and compliance, do not fall under the specific components of a security incident procedure standard. These areas may address different aspects of organizational operations but lack direct relevance to the immediate response and management of security incidents, which is the focus of the correct answer.

10. What is the responsibility of an employer under the principle of Respondeat Superior?

- A. To monitor employee behavior**
- B. To provide benefits to employees**
- C. To ensure safety in the workplace**
- D. To be responsible for employees' negligence**

The principle of Respondeat Superior translates to "let the master answer," which holds employers legally responsible for the actions of their employees when those actions occur in the course of their employment. This means that if an employee acts negligently while performing their job duties, the employer can be held liable for any resulting damages or injuries. This principle is crucial in the legal context, as it ensures that employers cannot simply distance themselves from the actions of their employees and reinforces the importance of proper training and oversight. Employers are expected to take responsibility for the behavior of their staff during work hours, which underscores the significance of hiring qualified individuals and providing adequate training to reduce the risk of negligent acts. In contrast, monitoring employee behavior, providing benefits, and ensuring safety are important responsibilities for an employer but are not directly tied to the legal implications of Respondeat Superior. Each of these responsibilities contributes to a better work environment and a positive workplace culture, but they do not relate to an employer's liability for the actions of their employees in the way that Respondeat Superior does.

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://rhiadomain2.examzify.com>

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