

SH COMPREHENSIVE PRACTICE TEST (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED 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. 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 description best matches a Health Maintenance Organization (HMO)?**
 - A. Payer-based fee-for-service model
 - B. Prepaid group practice that integrates financing and delivery
 - C. Episode-based payment system
 - D. Per-diem hospital payments
- 2. In SEM, which level is described as the relationship between organizations?**
 - A. Individual
 - B. Community
 - C. Organizations
 - D. Interpersonal
- 3. Which pay arrangement is typical in travel, short-term assignments?**
 - A. Salary Pay
 - B. PT Contract Pay
 - C. Hourly Pay
 - D. Per Diem PT Pay
- 4. Adaptive expertise is best described as which of the following?**
 - A. ability to adapt and solve new problems
 - B. the ability to perform routine tasks without error
 - C. the capacity to memorize large amounts of information
 - D. the skill of teaching others effectively
- 5. Which SEM level involves educating a patient on food label reading?**
 - A. Individual (SEM)
 - B. Organizational (SEM)
 - C. Community (SEM)
 - D. Interpersonal (SEM)
- 6. Which statement about the mean is true?**
 - A. The mean is always equal to the median.
 - B. The mean is sensitive to extreme values.
 - C. The mean is always an integer.
 - D. The mean is never affected by outliers.

7. CPT/HCPSC codes are used to describe what?

- A. Diagnosis classification of diseases
- B. Facility accreditation codes
- C. Procedure and billing code for treatment interventions
- D. Medication dosage codes

8. G-codes are used to report what information?

- A. Functional limitation reporting for Medicare patients
- B. Medication dosage coding
- C. Geographic location coding
- D. Facility cleanliness ratings

9. In a learning health system, which practice best drives improvement?

- A. Relying on expert opinion without data
- B. Focusing on cost containment exclusively
- C. Ignoring patient feedback and outcomes
- D. Using data and feedback to improve care

10. In the pH scale, which range indicates acidic solution?

- A. pH less than 7
- B. pH between 7 and 8
- C. pH equal to 7
- D. pH greater than 7

Answers

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

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Explanations

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1. Which description best matches a Health Maintenance Organization (HMO)?

- A. Payer-based fee-for-service model
- B. Prepaid group practice that integrates financing and delivery**
- C. Episode-based payment system
- D. Per-diem hospital payments

HMO descriptions center on prepaid care that combines how care is financed with how it's delivered. In an HMO, members pay a fixed premium, and the organization provides and pays for most or all of their care through a single network. This prepaid structure funds a coordinated system where financing and delivery are integrated, often with a primary care physician guiding care and coordinating referrals. The aim is to emphasize preventive services and manage costs through tighter control of services and providers. This makes the description of a prepaid group practice that integrates financing and delivery the best match. The other options describe different payment approaches—fee-for-service, per-diem hospital payments, and episode-based (bundled) payments—which don't reflect the combined financing-and-delivery setup that characterizes HMOs.

2. In SEM, which level is described as the relationship between organizations?

- A. Individual
- B. Community**
- C. Organizations
- D. Interpersonal

In the Social-Ecological Model, the community level covers how groups and institutions relate to each other within a locality—networks, partnerships, coalitions, and shared resources that span multiple organizations. Describing the relationship between organizations fits this level because it focuses on inter-organizational connections and collaborations within a community context. The organizational level would look at internal practices and culture within a single organization, not how multiple organizations interact.

3. Which pay arrangement is typical in travel, short-term assignments?

- A. Salary Pay
- B. PT Contract Pay**
- C. Hourly Pay
- D. Per Diem PT Pay

In travel and short-term assignments, compensation is typically arranged on a contract basis. This means you're hired for a specific assignment through an agency or directly, with pay set for the duration of that assignment rather than as ongoing permanent employment. This setup fits the temporary, portable nature of these roles and often comes with a complete pay package arranged per assignment. Salary pay is usually tied to permanent, long-term positions, so it isn't the common structure for short, fixed-term gigs. Hourly pay could apply in some contexts, but for travel roles the standard is a contract arrangement that covers the defined period and responsibilities. Per diem payments are daily allowances to cover meals and incidental expenses and are typically supplementary rather than the core compensation.

4. Adaptive expertise is best described as which of the following?

- A. ability to adapt and solve new problems
- B. the ability to perform routine tasks without error
- C. the capacity to memorize large amounts of information
- D. the skill of teaching others effectively

Adaptive expertise means applying what you know to new and unfamiliar problems and changing strategies when the situation requires it. It's about flexible thinking, transferring understanding to different contexts, and innovating when standard approaches don't fit. That's why this choice—describing the ability to adapt and solve new problems—is the best fit. Merely memorizing information focuses on recall, not flexible use. Performing routine tasks without error emphasizes consistency in known situations, not adaptability. Teaching others well is important but centers on pedagogy rather than adapting to novel problems.

5. Which SEM level involves educating a patient on food label reading?

- A. Individual (SEM)
- B. Organizational (SEM)
- C. Community (SEM)
- D. Interpersonal (SEM)

The main idea tested is empowering the person with knowledge and skills. Teaching a patient how to read food labels directly builds the individual's ability to understand nutrition information, compare products, and make healthier choices in daily life. This focus on what the person knows and can do—rather than on relationships, organizational policies, or community programs—fits the Individual level of the SEM. The other levels involve broader contexts: interpersonal would involve interactions with others that influence choices, organizational would concern settings like clinics or workplaces and their structures, and community would address norms and programs across a community. So educating a patient on food label reading is best described as an individual-level activity.

6. Which statement about the mean is true?

- A. The mean is always equal to the median.
- B. The mean is sensitive to extreme values.
- C. The mean is always an integer.
- D. The mean is never affected by outliers.

The mean reflects the overall average by combining every value, so any extreme value can pull it toward itself. That makes the mean sensitive to extreme values: a single very large or very small number can noticeably shift the average. For example, with 1, 2, 3, and 100, the mean is 26.5 while the central tendency by position is much closer to 2 or 3, showing how the outlier drags the mean upward. This is in contrast to the median, which stays more stable in the presence of outliers. Other statements don't hold in general: the mean isn't always equal to the median (only in symmetric or specific distributions); it isn't always an integer (means can be fractional); and it can be affected by outliers (the very point above demonstrates this).

7. CPT/HCPCS codes are used to describe what?

- A. Diagnosis classification of diseases
- B. Facility accreditation codes
- C. Procedure and billing code for treatment interventions**
- D. Medication dosage codes

The main idea behind CPT/HCPCS codes is to provide a standardized way to describe the procedures and services a patient receives for billing and documentation. CPT codes (the five-digit numbers) cover physician and clinician procedures and services, while HCPCS codes extend this to other billable items such as certain devices, supplies, and non-physician services. This common language lets insurers know exactly what was done so they can reimburse appropriately. These codes aren't used to classify diseases—that's the role of ICD-10-CM. They aren't about facility accreditation. And while some drug-related codes exist within HCPCS, the broader purpose of CPT/HCPCS is reporting the service or procedure performed, not prescribing or detailing medication dosages.

8. G-codes are used to report what information?

- A. Functional limitation reporting for Medicare patients**
- B. Medication dosage coding
- C. Geographic location coding
- D. Facility cleanliness ratings

G-codes are used to report patient functional status and limitations for Medicare patients, particularly in therapy services, to capture outcomes and support quality reporting. They let clinicians indicate how a patient functions during treatment and track changes from baseline using delta codes, which helps Medicare monitor progress and adjust payments as needed. Medication dosage coding uses different systems (like NDCs) for drugs, geographic location coding pertains to where a patient is located or treated, and facility cleanliness ratings come from separate quality measures and surveys, not G-codes.

9. In a learning health system, which practice best drives improvement?

- A. Relying on expert opinion without data
- B. Focusing on cost containment exclusively
- C. Ignoring patient feedback and outcomes
- D. Using data and feedback to improve care**

Improvement comes from using data and feedback to drive changes. A learning health system continually collects information on how care is delivered and what outcomes patients experience, then analyzes that data to spot gaps, test small changes, and measure their impact. This creates a real-time loop: measure, learn, and adjust, so care gets better over time and is aligned with what patients actually need and value. Relying on expert opinion without data, focusing only on cost, or ignoring patient feedback and outcomes all miss that essential loop. Expert judgment can guide you, but without data you can't verify whether a change truly improves results. Limiting focus to costs may reduce expenses but often at the expense of quality or patient safety. Ignoring patient feedback and outcomes means you're not addressing what matters most to those receiving care. In contrast, using data and feedback to continuously refine practices directly drives meaningful improvements in safety, effectiveness, and patient experience.

10. In the pH scale, which range indicates acidic solution?

A. pH less than 7

B. pH between 7 and 8

C. pH equal to 7

D. pH greater than 7

On the pH scale, acidity corresponds to pH values below 7. This scale reflects hydrogen ion concentration: lower pH means more H^+ and stronger acidity. Therefore, a solution with pH less than 7 is acidic. A neutral solution has pH 7, while pH above 7 indicates basic/alkaline conditions. Since the question asks which range indicates acidic, the range less than 7 is the correct one. For context, acidic substances like citric acid have pH well below 7, neutral water sits at 7, and basic substances like soap have pH above 7.

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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://shcomp.examzify.com>

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

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