

Wellcare / Centene Annual Certification Training (ACT) Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

Copyright © 2025 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain from reliable sources accurate, complete, and timely information about this product.

SAMPLE

Questions

- 1. What stage of coverage is commonly referred to as the "donut hole"?**
 - A. Initial coverage**
 - B. Coverage Gap**
 - C. Catastrophic coverage**
 - D. Deductible phase**
- 2. For 2022, which group will no longer be a preferred pharmacy?**
 - A. All 50 states**
 - B. Select major pharmacy chains**
 - C. Independent pharmacies**
 - D. Online pharmacies only**
- 3. Which method is NOT a permissible form of communication of PHI?**
 - A. Written**
 - B. Electronic**
 - C. Verbal**
 - D. All of the above are permissible**
- 4. Which plan will continue to offer a discount for 90-day tier 2, tier 3, and tier 6 prescriptions?**
 - A. Value Script**
 - B. Value Plus**
 - C. Value Premier**
 - D. Value Basic**
- 5. What benefit does the SSM specifically target for Wellcare members?**
 - A. Vision care costs**
 - B. Spending on insulin**
 - C. Hospitalization expenses**
 - D. Pharmacy network accessibility**

- 6. What tier formulary structure will Value Script and Value Plus PDP products have in 2023?**
- A. 4-tier**
 - B. 5-tier**
 - C. 6-tier**
 - D. 7-tier**
- 7. Which of the following is NOT a point of potential investigation for agents?**
- A. Complaint Tracking Module (CTM)**
 - B. Yelp review**
 - C. Grievance**
 - D. Secret Shop Finding**
- 8. What percentage increase does Centene's 2023 product expansion represent from 2022?**
- A. 1%**
 - B. 2%**
 - C. 3%**
 - D. 4%**
- 9. What is a recommended practice regarding laptops that contain PHI or PII?**
- A. Leave them in locked vehicles at night**
 - B. Only use them at work**
 - C. Never leave laptops unsecured in an unattended vehicle**
 - D. Take them home every evening**
- 10. How many LIS copay categories could be assigned to a member?**
- A. Two**
 - B. Three**
 - C. Four**
 - D. Five**

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. What stage of coverage is commonly referred to as the "donut hole"?

A. Initial coverage

B. Coverage Gap

C. Catastrophic coverage

D. Deductible phase

The stage of coverage commonly referred to as the "donut hole" is the Coverage Gap. This term is used specifically in the context of Medicare Part D prescription drug plans. During the Coverage Gap, beneficiaries experience a temporary limit on what the drug plan will cover for prescription drugs. After reaching a certain out-of-pocket threshold, beneficiaries enter this phase where they must pay a higher portion of their drug costs until they reach the catastrophic coverage threshold. Understanding this stage is crucial as it highlights the potential financial burden on beneficiaries when they exceed their initial coverage limit but haven't yet qualified for catastrophic coverage. It's important to know that while individuals may be responsible for a greater percentage of their medication costs during this period, there are programs and discounts available to help mitigate expenses for those who find themselves in the Coverage Gap. This concept is a key part of the Medicare Part D design and significantly impacts the healthcare costs for many senior citizens and individuals with disabilities.

2. For 2022, which group will no longer be a preferred pharmacy?

A. All 50 states

B. Select major pharmacy chains

C. Independent pharmacies

D. Online pharmacies only

The answer identifies that for 2022, all 50 states will no longer be recognized as a preferred pharmacy group. This indicates a broad change in the preferred pharmacy arrangements for a network that spans across the entire country. By selecting this answer, it implies that there is a significant policy shift affecting every pharmacy in all states, which could suggest new strategies for managing pharmacy benefits and costs. Options that specifically address major pharmacy chains, independent pharmacies, or online pharmacies alone would not encompass the entirety of the pharmacy landscape across the U.S. Such focused choices suggest that the changes are more targeted rather than affecting the entire field simultaneously. Thus, the correct answer reflects a comprehensive alteration that impacts every pharmacy regardless of its type or location, highlighting the vast scope of the policy change being referred to.

3. Which method is NOT a permissible form of communication of PHI?

- A. Written**
- B. Electronic**
- C. Verbal**
- D. All of the above are permissible**

All forms of communication of Protected Health Information (PHI)—written, electronic, and verbal—are generally permissible as long as they comply with the established regulations and standards regarding privacy and security. However, it's crucial to ensure that the method used adheres to privacy guidelines, reflects best practices for securing sensitive information, and protects patient confidentiality. Written communication must be securely handled, with measures in place to prevent unauthorized access. Electronic communications require encryption and secure channels to protect data from interception. Verbal discussions should occur in private settings to prevent inadvertent disclosure to unauthorized individuals. The phrase "All of the above are permissible" reflects the understanding that all three methods can be used effectively, provided that proper safeguards are implemented to protect PHI. Therefore, it implies that there are no methods listed in this scenario that are inherently impermissible, hence identifying that all these forms of communication can be acceptable within the right context and controls.

4. Which plan will continue to offer a discount for 90-day tier 2, tier 3, and tier 6 prescriptions?

- A. Value Script**
- B. Value Plus**
- C. Value Premier**
- D. Value Basic**

The Value Plus plan stands out as the option that continues to provide a discount for 90-day tier 2, tier 3, and tier 6 prescriptions. This is significant because offering a discount for a longer supply of medications can greatly benefit members by reducing their overall prescription costs and ensuring they have continued access to the necessary medications without the need for frequent refills. In the context of pharmacy benefits, tiered prescription plans categorize drugs based on their cost and effectiveness. Tier 2 generally includes preferred brand-name drugs, while tier 3 often contains non-preferred brand-name drugs, and tier 6 may represent specialty drugs. By providing a discount on a 90-day supply of these tiers, the Value Plus plan encourages members to manage their prescriptions more efficiently, resulting in potential cost savings for both the member and the healthcare system. Other plans may not offer the same benefits for multiple tiers of prescriptions or may only provide discounts on shorter supply durations, making the Value Plus plan particularly attractive for those who require ongoing medication management.

5. What benefit does the SSM specifically target for Wellcare members?

A. Vision care costs

B. Spending on insulin

C. Hospitalization expenses

D. Pharmacy network accessibility

The SSM, or Specialized Services Management, primarily targets spending on insulin for Wellcare members. This focus reflects a critical response to the increasing costs associated with diabetes management, given the significant financial burden that insulin can impose on patients. By emphasizing this benefit, Wellcare aims to alleviate some of the out-of-pocket expenses for members who need insulin, ensuring they have better access to this essential medication. This makes it easier for individuals living with diabetes to manage their condition without facing exorbitant costs, ultimately leading to improved health outcomes. The other options, while important aspects of healthcare coverage, do not represent the specific focus of the SSM within Wellcare's services. For instance, vision care costs, hospitalization expenses, and pharmacy network accessibility are all valuable benefits but do not directly encapsulate the primary objective of the SSM program with respect to Wellcare members.

6. What tier formulary structure will Value Script and Value Plus PDP products have in 2023?

A. 4-tier

B. 5-tier

C. 6-tier

D. 7-tier

The correct answer indicates that the Value Script and Value Plus PDP products will operate under a 6-tier formulary structure in 2023. This tiered system is designed to categorize medications based on cost and clinical effectiveness, facilitating a clear outline of patient out-of-pocket costs for prescription drugs. A 6-tier structure typically includes different levels for generic drugs, preferred brand-name drugs, non-preferred brand-name drugs, specialty medications, and may even include lower-cost tiers for specific categories or high-cost tiers for specialty medications. This allows for a wider range of cost-sharing options that can help manage overall drug costs while promoting access to necessary medications for beneficiaries. Understanding this tiered system is vital for navigating prescription coverage, determining copays, and managing drug costs effectively for members enrolled in these plans.

7. Which of the following is NOT a point of potential investigation for agents?

A. Complaint Tracking Module (CTM)

B. Yelp review

C. Grievance

D. Secret Shop Finding

The correct answer indicates that Yelp reviews are not considered a formal point of potential investigation for agents. When evaluating performance or addressing complaints within organizations like Wellcare or Centene, the focus tends to be on official channels and structured mechanisms for tracking issues and complaints. The Complaint Tracking Module (CTM), grievance processes, and secret shop findings are all systematic methods employed by the organization to monitor agent performance and customer satisfaction. Each of these methods provides a controlled and standardized approach for collecting data that can lead to investigations if necessary. On the other hand, Yelp reviews are public-facing and can reflect personal opinions rather than structured feedback expected within a corporate framework. They are valuable for understanding general customer sentiment but lack the rigorous investigative framework of the other options listed. As such, they are not prioritized for internal investigation. Understanding these distinctions emphasizes the methods used by organizations to maintain compliance and quality assurance, showcasing the importance of formal complaint and performance management systems in a corporate environment.

8. What percentage increase does Centene's 2023 product expansion represent from 2022?

A. 1%

B. 2%

C. 3%

D. 4%

Centene's 2023 product expansion represents a 3% increase from 2022. This percentage indicates the company's growth in offering new products or services compared to the previous year, highlighting their commitment to expanding access and resources within their healthcare programs. Understanding this figure is important as it shows how Centene is working to enhance its portfolio and provide more options to its members. The focus on growth directly aligns with Centene's mission to improve health outcomes and reach more populations in need. Tracking these expansions can be indicative of the company's overall strategy and performance in the healthcare marketplace.

9. What is a recommended practice regarding laptops that contain PHI or PII?

- A. Leave them in locked vehicles at night**
- B. Only use them at work**
- C. Never leave laptops unsecured in an unattended vehicle**
- D. Take them home every evening**

The recommended practice of never leaving laptops unsecured in an unattended vehicle is crucial for safeguarding sensitive data, such as Protected Health Information (PHI) and Personally Identifiable Information (PII). Laptops can be easily stolen, and if they contain PHI or PII, this can lead to significant data breaches and legal ramifications for organizations, as well as compromising the privacy of individuals. Leaving a laptop in an unattended vehicle creates an opportunity for theft. Even when a vehicle is locked, it does not guarantee protection against determined thieves. By ensuring that laptops containing sensitive information are never left unsecured in such settings, employees can actively contribute to maintaining data security and privacy. Other practices, while they may seem prudent, do not offer the same level of protection as securing laptops in a controlled and safe environment. For instance, leaving laptops in locked vehicles, only using them at work, or taking them home might still expose them to unnecessary risks and does not account for the dangers posed by theft in public places. Hence, the emphasis on never leaving laptops unsecured in an unattended vehicle aligns closely with best practices for data protection.

10. How many LIS copay categories could be assigned to a member?

- A. Two**
- B. Three**
- C. Four**
- D. Five**

The correct answer is based on the understanding of the Low-Income Subsidy (LIS) program, which is designed to assist individuals with limited incomes in covering their Medicare prescription drug costs. The LIS program categorizes beneficiaries into different tiers based on their financial situation, influencing their copayment levels for medications. The LIS copay categories include specific tiers that determine the amount beneficiaries pay for their prescriptions, which helps to ease the financial burden on those with low incomes. For most programs, there are four distinct copay categories. These categories are typically defined based on the applicant's income and resource levels, each resulting in different levels of cost-sharing for covered medications. Recognizing the significance of these categories is essential for ensuring that eligible individuals receive the appropriate level of assistance for their prescription drug expenses. Understanding this framework is a crucial component of the Wellcare/Centene training, as it directly impacts member services and support for those in need of financial assistance through the LIS program.