

# WHO Models, Health Policy and Culture in Health Care 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. Under Medicare, when may a patient enter a skilled nursing facility (SNF) for coverage?**
  - A. After 3+ days in acute care hospital**
  - B. Immediately upon admission to hospital**
  - C. After 10 days in SNF**
  - D. After 30 days in community care**
  
- 2. In healthcare interactions, language concordance between patient and provider is associated with which outcomes?**
  - A. Improved understanding, adherence, satisfaction, and safety**
  - B. Increased appointment wait times**
  - C. Higher rates of miscommunication**
  - D. No impact on safety**
  
- 3. What are the WHO's Social Determinants of Health and why are they important in health policy?**
  - A. Structural Determinants (Income, Education, Social Status) and Intermediary Determinants (Living Conditions, Health Behaviors) That Shape Health Outcomes; Addressing Them Reduces Inequities.**
  - B. Genetic Factors Determine Health Outcomes and Cannot Be Changed**
  - C. Only Access to Hospitals Determines Health Outcomes**
  - D. Individual Lifestyle Behaviors Alone Determine Health**
  
- 4. Which choice is NOT one of the five attributes of diffusion of innovations as applied to health policy adoption?**
  - A. Relative advantage**
  - B. Simplicity of branding**
  - C. Complexity**
  - D. Observability**
  
- 5. America's health rankings describe the nation as having which combination of characteristics?**
  - A. High infant mortality, high health spending, low life expectancy.**
  - B. Low infant mortality, high health spending, high life expectancy.**
  - C. High infant mortality, low health spending, high life expectancy.**
  - D. Low infant mortality, low health spending, low life expectancy.**

- 6. What is one of the six WHO health system building blocks?**
- A. Health Financing**
  - B. Leadership/Governance**
  - C. Medical Products/Technologies**
  - D. Information and Research**
- 7. What is a tangible outcome of effective interdisciplinary collaboration in patient care?**
- A. Increased medical errors.**
  - B. Improved coordination and holistic care.**
  - C. Longer wait times due to more meetings.**
  - D. Siloed information sharing.**
- 8. Which statement about Medicaid coverage is true?**
- A. It does not pay for long-term stays like residential or nursing home care**
  - B. It pays for all long-term care services**
  - C. It covers only hospital stays**
  - D. It is solely funded by private individuals**
- 9. Which of the following is an example of using information campaigns as a health policy instrument?**
- A. Providing tax subsidies for health insurance.**
  - B. Reorganizing hospital departments.**
  - C. Running targeted public education campaigns to promote healthy behaviors.**
  - D. Establishing universal drug formularies.**
- 10. How does governance influence health system performance?**
- A. It sets strategic direction, ensures accountability and transparency, aligns resources, regulates quality and safety, and monitors performance and equity.**
  - B. It directly delivers frontline medical care to patients.**
  - C. It focuses exclusively on budgeting for staff salaries.**
  - D. It handles clinical trials and drug development.**

## Answers

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

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## **Explanations**

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**1. Under Medicare, when may a patient enter a skilled nursing facility (SNF) for coverage?**

- A. After 3+ days in acute care hospital**
- B. Immediately upon admission to hospital**
- C. After 10 days in SNF**
- D. After 30 days in community care**

Medicare SNF coverage is conditioned on a qualifying hospital stay. To be eligible for coverage of skilled nursing facility care, a patient must have been admitted for at least three consecutive days as an inpatient in a hospital and then transferred to a Medicare-certified SNF within 30 days of discharge. The days spent must be inpatient days, not observation status, and the patient must need skilled nursing or rehabilitation services as ordered by a physician. Because of this three-day hospital threshold, entering an SNF immediately, after only a short hospital stay, or after long stays in other settings does not meet the coverage rule. So the earliest time SNF coverage typically applies is after those three inpatient hospital days.

**2. In healthcare interactions, language concordance between patient and provider is associated with which outcomes?**

- A. Improved understanding, adherence, satisfaction, and safety**
- B. Increased appointment wait times**
- C. Higher rates of miscommunication**
- D. No impact on safety**

Language concordance between patient and provider improves communication quality, which in turn supports multiple positive outcomes in healthcare interactions. When patient and clinician share a common language, information is transmitted more accurately and understood more clearly. This clarity helps patients grasp their diagnosis, treatment options, and the steps they need to take, which strengthens adherence to medications, follow-up appointments, and self-care plans. Feeling heard and understood also boosts trust and satisfaction with the encounter, making patients more engaged in their care. Most importantly, clearer communication reduces the risk of unsafe outcomes by minimizing misinterpretations of instructions, warnings, or symptoms, thereby enhancing safety. Choices suggesting increased wait times, more miscommunication, or no impact on safety don't align with how language concordance typically influences care. While interpreter services can affect workflow, concordance itself is associated with better understanding, adherence, satisfaction, and safety because the message is conveyed more accurately and received more fully.

### 3. What are the WHO's Social Determinants of Health and why are they important in health policy?

**A. Structural Determinants (Income, Education, Social Status) and Intermediary Determinants (Living Conditions, Health Behaviors) That Shape Health Outcomes; Addressing Them Reduces Inequities.**

**B. Genetic Factors Determine Health Outcomes and Cannot Be Changed**

**C. Only Access to Hospitals Determines Health Outcomes**

**D. Individual Lifestyle Behaviors Alone Determine Health**

The main idea being tested is that health is shaped by the social and economic conditions in which people live, not just by biology or medical care. The WHO frames Social Determinants of Health as two linked groups: structural determinants and intermediary determinants. Structural determinants cover the broader context that shapes people's lives—income, education, social status, and the political and economic policies that distribute resources. Intermediary determinants are the more tangible conditions that people encounter in daily life, such as living conditions, working and housing environments, nutrition, exposure to risks, and health-related behaviors, all of which arise from the structural context and influence health outcomes and access to care. This framing matters for health policy because it explains why health inequities persist and how to reduce them. If policy only tackles medical care or individual behaviors without changing the underlying social and economic conditions, health gaps across groups remain wide. By addressing both structural factors (for example, reducing poverty, improving education, and ensuring fair access to opportunities) and intermediary factors (such as safe housing, clean water, healthy food, and accessible health services), policies can create healthier conditions for everyone and shrink unjust differences in health. Choices that emphasize genetics, hospital access alone, or personal lifestyle in isolation miss the broader social context that drives health outcomes. The comprehensive view that aligns with the WHO is that health outcomes are shaped by structural and intermediary determinants, and policy action to improve health must target both levels to reduce inequities.

### 4. Which choice is NOT one of the five attributes of diffusion of innovations as applied to health policy adoption?

**A. Relative advantage**

**B. Simplicity of branding**

**C. Complexity**

**D. Observability**

Diffusion of innovations in health policy focuses on how new ideas spread and are adopted, assessed through five attributes that shape adoption decisions: relative advantage (the perceived benefit over current practice), compatibility (how well the idea fits with values and needs), complexity (how difficult it is to understand or use), trialability (the ability to test on a limited basis), and observability (the visibility of results to others). The item about simplicity of branding isn't part of these five attributes. Branding concerns how a policy or product is marketed, not the inherent characteristics that influence an organization's decision to adopt an innovation. While branding can influence perceptions indirectly, it is not one of the diffusion attributes itself.

**5. America's health rankings describe the nation as having which combination of characteristics?**

- A. High infant mortality, high health spending, low life expectancy.**
- B. Low infant mortality, high health spending, high life expectancy.**
- C. High infant mortality, low health spending, high life expectancy.**
- D. Low infant mortality, low health spending, low life expectancy.**

The main pattern this question tests is how the United States compares in health spending relative to health outcomes. The correct option describes high infant mortality, high health spending, and low life expectancy. Infant mortality is a key early-life health indicator, and the U.S. has a higher rate than many other developed nations, signaling challenges in maternal and child health and access to preventive care. At the same time, health spending in the United States is among the highest in the world, reflecting high prices for services, medical technology, and administrative costs. Yet life expectancy—the average number of years a person can expect to live—does not match these high expenditures; it is lower than in many peer countries. This combination—lots of money spent, yet relatively poorer outcomes in infant survival and overall longevity—highlights inefficiencies and disparities within the U.S. health system. Other patterns, such as low spending with strong outcomes or high spending with equally strong outcomes, do not align with the typical rankings for the United States, which is why this option best captures the described scenario.

**6. What is one of the six WHO health system building blocks?**

- A. Health Financing**
- B. Leadership/Governance**
- C. Medical Products/Technologies**
- D. Information and Research**

Strong leadership and governance coordinates the health system by setting policy, stewarding resources, regulating providers, and ensuring accountability. In the WHO model, the six building blocks are service delivery, health workforce, health information systems, medical products and technologies, financing, and leadership/governance. This block provides the guiding framework that aligns the other components, secures political commitment, and monitors performance to improve equity, quality, and efficiency. Without effective governance, policies may be inconsistent, investments misdirected, and trust in the system eroded, undermining service delivery and outcomes. That central coordinating and stewardship role is why leadership/governance is identified as one of the six building blocks. Information and research relate to the information block, but the official label for that domain is health information systems, not governance.

**7. What is a tangible outcome of effective interdisciplinary collaboration in patient care?**

- A. Increased medical errors.**
- B. Improved coordination and holistic care.**
- C. Longer wait times due to more meetings.**
- D. Siloed information sharing.**

Interdisciplinary collaboration brings together diverse expertise to shape a single, cohesive plan for the patient. When professionals from different fields—like medicine, nursing, social work, pharmacy, and rehabilitation—work as a team, they share information openly, align goals, and coordinate actions. The tangible result is improved coordination and holistic care: care that is well-organized across services, minimizes gaps and duplications, and addresses the full range of the patient’s needs—medical, psychological, social, and cultural. This leads to safer, more efficient care and higher patient and family satisfaction. The other options describe outcomes that would undermine or contradict effective collaboration. Increased medical errors signal a breakdown rather than a strength of teamwork. Longer wait times due to more meetings can occur, but the aim of a well-functioning team is to streamline communication to prevent delays, not create them. Siloed information sharing is the opposite of collaborative practice, which relies on shared, accessible information.

**8. Which statement about Medicaid coverage is true?**

- A. It does not pay for long-term stays like residential or nursing home care**
- B. It pays for all long-term care services**
- C. It covers only hospital stays**
- D. It is solely funded by private individuals**

Medicaid coverage for long-term care is driven by eligibility, not a blanket entitlement. It is a joint federal-state program that pays for many services for people with limited income and resources, and this includes long-term care in nursing homes or through home- and community-based services for those who meet the state-specific criteria. Because eligibility rules—income limits, asset limits, and other state requirements—determine who qualifies, the statement that Medicaid does not pay for long-term stays is not accurate in general. When someone meets the criteria, Medicaid can cover long-term residential or nursing home care, though not every possible service or setting is funded in every state, and there can be limits or variations in coverage. By contrast, other claims in the choice options—such as Medicaid paying for all long-term care services, covering only hospital stays, or being funded solely by private individuals—do not reflect how Medicaid actually operates (it is not universal for all services, it extends beyond hospital stays, and it is funded by both federal and state governments).

**9. Which of the following is an example of using information campaigns as a health policy instrument?**

- A. Providing tax subsidies for health insurance.**
- B. Reorganizing hospital departments.**
- C. Running targeted public education campaigns to promote healthy behaviors.**
- D. Establishing universal drug formularies.**

Information campaigns as a health policy instrument aim to influence health behavior by providing targeted information, education, and messaging to the public. Running targeted public education campaigns to promote healthy behaviors directly embodies this approach because it uses information to shape knowledge, attitudes, norms, and practices to prevent disease or improve health outcomes. Tax subsidies are a fiscal tool designed to shift economic incentives rather than inform behavior. Reorganizing hospital departments is about how services are structured and delivered. Establishing universal drug formularies focuses on access and cost containment through coverage rules. These are not about informing or educating the public, so they don't illustrate information campaigns.

**10. How does governance influence health system performance?**

- A. It sets strategic direction, ensures accountability and transparency, aligns resources, regulates quality and safety, and monitors performance and equity.**
- B. It directly delivers frontline medical care to patients.**
- C. It focuses exclusively on budgeting for staff salaries.**
- D. It handles clinical trials and drug development.**

Governance shapes how well a health system performs by providing the stewardship and framework that guides all other functions. It involves setting strategic direction, ensuring accountability and transparency, aligning resources with priorities, regulating quality and safety, and monitoring performance and equity. When governance establishes clear policies and goals, it directs financing, staffing, information systems, and service delivery toward those priorities. Accountability mechanisms—such as oversight bodies and public reporting—hold actors responsible for results, while transparency builds trust and supports informed decision-making. Aligning resources means allocating funds, personnel, and assets where they are most needed, reducing waste and promoting fairness. Regulation of quality and safety creates consistent standards that drive improvements across providers. Ongoing monitoring of performance and equity lets leadership spot gaps, measure progress, and adjust strategies to reduce disparities. In contrast, frontline care is carried out by clinicians and health facilities, budgeting for salaries is only one financial task, and clinical trials or drug development belong to research and innovation, not system stewardship. So governance best explains how health system performance is shaped.

## 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](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://whomodelshealthpolicycultureinhc.examzify.com>**

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

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