



**POST-TEST for DHA UBO Webinar:**  
*Denials Management and ABACUS Capabilities*  
*February 2022*

**POST-TEST INSTRUCTIONS:** View the recorded webinar located at: <https://www.health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/UBO-Learning-Center/Archived-Webinars> and complete the 10 questions below.

Submit your answers via e-mail to [webmeeting@federaladvisory.com](mailto:webmeeting@federaladvisory.com) with "Answers, Post-Test— **Denials Management and ABACUS Capabilities**" in the subject line (a read receipt for your records is recommended).

Results may take up to five business days. If you have any questions, please submit them via e-mail to [webmeeting@federaladvisory.com](mailto:webmeeting@federaladvisory.com). **NOTE:** You must have at least 70% of the questions answered correctly, in order to receive a Certificate of Approval with Index Number (via e-mail). Individuals receiving a score of 69% or lower will be notified via e-mail and may resubmit the Post-Test, after reviewing the webinar, for processing.

1. The purpose of an Explanation of Benefits (EOB) is to provide detailed \_\_\_\_\_ information relative to a specific claim.
2. Name three reasons why a payer may deny an MTF's claim for reimbursement for care provided to the payer's beneficiary: \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_.
3. Title 32, Code of Federal Regulations, Part 220 implements 10 U.S.C. 1095 and specifies which of the following?
  - a) Rights and obligations of beneficiaries
  - b) Applicable charges
  - c) Certain payers excluded from Third-Party Collections Program
  - d) Special rules for Medicare supplemental plans, automobile insurance, and workers' compensation
  - e) All of the above
4. True or False: The health care industry has one universal definition for what constitutes a claim denial?
5. Name three challenges presented by denial reason codes: \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_.
6. With whom should you ask to speak if the payer representative is not helpful? \_\_\_\_\_
7. The \_\_\_\_\_ tool, within the Accounts Management table, allows users to track and reconcile accounts.
8. The \_\_\_\_\_ tab allows users to generate templates.
9. In the Account Information section of the Recovery screen, denials can be grouped into \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_.



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10. Which of the following is not a question you should ask when speaking with a payer representative?
- a) What data was missing or inaccurate on the claim?
  - b) How long do I have to resubmit the claim?
  - c) Why don't you know what you're doing?
  - d) Where does the additional information need to be sent?