

COBGC Practice Test Questions and Answers

1. What is a clean claim?

- A) A claim submitted with all required information, correctly coded, and free of errors
- B) Any claim that is paid
- C) A claim with no diagnosis codes
- D) A paper claim only

2. How is a hysterectomy coded?

- A) By the approach (abdominal, vaginal, laparoscopic) and the extent (total, subtotal, radical)
- B) One universal code
- C) Only by surgeon preference
- D) No code differentiation exists

3. What is a remittance advice?

- A) A document from the payer explaining how a claim was processed, including payments and adjustments
- B) A patient bill
- C) A referral form
- D) A medical record

4. What is coordination of benefits?

- A) The process determining which insurance pays first when a patient has multiple coverage
- B) Coordinating appointment schedules
- C) Matching benefits to diagnoses
- D) Only applies to dental insurance

Answers: 1-A 2-A 3-A 4-A

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