

# Communication, Documentation, and Insurance Billing Home Study Course

12 CE Hours  
Online Study Guide

Presented by the:  
*Center for Massage Therapy Continuing Education*

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It is the responsibility of the practitioner to determine the appropriateness of the principles presented in terms within the scope of practice. This information is in no way meant to diagnose or treat medical conditions. Always have your client consult a physician for diagnosis before treating any medical condition. Written medical opinions are always the best way to resolve any questions regarding communication, documentation, and insurance billing for massage therapists.

## **Instructions for the Communication, Documentation, and Insurance Billing home study course**

Thank you for investing in the Communication, Documentation, and Insurance Billing home study course, a 12 CE hour course designed to further your knowledge in the principles and practices communication, documentation, and insurance billing for professional bodyworkers and massage therapists.

This guide will contain all of the instructions you will need to complete this course. This is a 12 CE hour course, so that means it should take you approximately 12 hours to read the textbook, access the online resources, and complete the multiple choice exam and course evaluation.

### **The following are steps to follow in completing this course:**

- 1. Read the text and review the exam.**
- 2. Access the online resources and forms. To access the online resources:**
  - a. Go to: <http://thepoint.lww.com>**
  - b. Click on “new user” or “return user” depending on if you have used the site before.**
  - c. For new users, enter the access code, click next, and follow the instructions to create an account. For return users, login to your account for access.**
  - d. If you chose to have the materials mailed to you, your access code is located in the front inside cover of the textbook. If you chose to download the course, a code will be emailed to you during normal business hours.**
- 3. Access the online examination in your account. To do that, go to <https://massagetherapyceu.com/login.php> and enter your information. Once logged in you will see you course in your member area. Click on the “test” button to being your exam.**
- 4. Complete your examination and print your certificate. The exam is open book and there is no time limit for completion.**

You must pass the exam with a 70% or better to pass this home study course. You are allowed to access and take the exam up to 3 times if needed. There is no time limit when taking the exam and you can save your answers and return at a later date if needed. Feel free to review your textbook while taking the test. This course uses the text *Hands Heal, Communication, Documentation, and Insurance Billing for Manual Therapists*, by Diana Thompson. There are no trick questions on the exam. All of the answers can be found in the textbook. It is advised to write down your answers as you are testing online.

If you have any questions please feel free to contact us at 866-784-5940, 712-490-8245 or [info@massagetherapyceu.com](mailto:info@massagetherapyceu.com). Most state boards require that you keep your “proof of completion” certificates for at least four years in case of audit. Thank you for taking our Communication, Documentation, and Insurance Billing home study course.

# Communication, Documentation, and Insurance Billing Exam

## Section 1

### Chapter 1

1. In addition to nurturing touch, which of the following skills are critical for building a sound therapeutic relationship?
  - A. Clear communication, active listening, empathy, and a therapeutic environment
  - B. Clear communication, passive listening, indifference, and a therapeutic environment
  - C. Clear communication, active listening, indifference, and an unprofessional appearance
  - D. Indistinct communication, passive listening, empathy, and an outcall practice
2. A commitment to be present and available for your patients is the first step in manifesting \_\_\_\_\_ and \_\_\_\_\_, which are the cornerstones of any productive relationship.
  - A. Loyalty and repeat visits
  - B. Trust and respect
  - C. Patience and respect
  - D. Trust and loyalty
3. All of the following information is shared and gathered in “the interview” EXCEPT:
  - A. Getting to know the patient
  - B. What the patient can expect during the session
  - C. The patient’s goals and expectations for the visit
  - D. Drawing conclusions about the effectiveness of the treatment
4. When developing goals with patients, which of the following questions may be helpful?
  - A. How do your patients define wellness?
  - B. What are their expectations of you and of themselves?
  - C. How can you contribute to their vision of their own health?
  - D. All of the above
5. Treatment is all about \_\_\_\_\_.
  - A. Your education
  - B. What the patient wants
  - C. Collaboration
  - D. What you feel is best

### Chapter 2

6. Every patient referred by a health care provider (HCP) warrants all of the following EXCEPT:
  - A. Initial communication to report your diagnosis of the condition and treatment plans
  - B. Regular communication, initially to acknowledge the referral and report on your treatment plan
  - C. Progress reports to update and request additional prescriptions
  - D. Discharge reports to acknowledge the end of care for that condition

7. Which of the following is a guideline when communicating with the health care team:
  - A. Send handwritten notes even though they can be hard to read
  - B. Keep notes short and abbreviated
  - C. For privacy, never use the patient's last name
  - D. Avoid abbreviations and symbols
  
8. All of the following are standard methods of communication EXCEPT:
  - A. Introductory letters
  - B. Diagnosis
  - C. Treatment notes
  - D. Progress reports
  
9. In the context of this book, prescriptions are:
  - A. Informal referrals for adjunctive services, and they communicate information from the patient's primary care HCP to the manual therapist
  - B. Formal referrals for medication, and they communicate information from the manual therapist to the patient's primary care HCP
  - C. Formal referrals for adjunctive services, and they communicate information from the patient's primary care HCP to the manual therapist
  - D. Informal referrals for medication, and they communicate information from the patient's primary care HCP to the manual therapist
  
10. The key focus of the initial report should be:
  - A. On the treatment plan
  - B. On the initial diagnosis
  - C. On the patient's progress over a period
  - D. On the result of treatment at the end of care
  
11. Progress reports:
  - A. Present the referring HCP with your treatment plan
  - B. Summarize the patient's progress over a period
  - C. State your diagnosis and prescription
  - D. Are formal referrals for adjunctive services

### **Chapter 3**

12. How does a manual therapist contribute to the patient's legal team?
  - A. By keeping abbreviated patient records, communicating when requested, and understanding personal injury law
  - B. By not keeping patient records, communicating when requested, and understanding personal injury law
  - C. By keeping good patient records, communicating rarely, and being licensed in personal injury law
  - D. By keeping good patient records, communicating regularly, and understanding personal injury law

13. What information can the patient's attorney provide you with?
- A. Diagnosis of the injury
  - B. The patient's insurance coverage
  - C. Progress notes from other health care providers
  - D. Payment for services in advance
14. Narrative reports include all of the following EXCEPT:
- A. All initial and current subjective and objective findings that pertain to the condition
  - B. A summary of the progress that includes changes in client complaints, changes in assessments and findings, and functional outcomes
  - C. Your bill to date, including all dates of services and charges
  - D. The status of the patient that describes whether the patient's care has ended, whether the patient has reached pre-injury status, and whether a course of self-care for the future is needed
15. What is a deposition?
- A. The taking of your testimony under oath out of a courtroom setting
  - B. The taking of your testimony under oath in a courtroom setting
  - C. The submitting of your treatment records to the attorney
  - D. The submitting of your narrative report to the attorney

## **Section 2**

### **Chapter 4**

16. What does the acronym SOAP stand for?
- A. Subjective, Objective, Assessment, Plan
  - B. Subjective, Objective, Action, Proposal
  - C. Supplementation, Objective, Assessment, Palpation
  - D. Subjective, Observation, Assessment, Plan
17. All of the following may contribute to building a solid relationship between the health care professional and the patient before we ever put our hands on the person EXCEPT:
- A. Interviews focused on gathering and giving information
  - B. Receiving verbal and written consent to treat
  - C. Discussing where you will work, why, and your draping protocol
  - D. The act of not taking notes
18. Which of the following can be considered to be the least expensive form of marketing available to you?
- A. Legal assurance, such as malpractice insurance
  - B. Communicating with the health care team
  - C. Working efficiently
  - D. Setting clear boundaries
19. The insurance team uses your documentation to determine:
- A. Responsibility of payment
  - B. Proof of services
  - C. Medical necessity
  - D. All of the above

## Chapter 5

20. Health information forms for wellness care are commonly used in all of the following situations EXCEPT:
- A. Relaxation massage
  - B. Spa therapies
  - C. Whiplash injuries
  - D. Sports massage
21. Which of the following health information forms would be appropriate to use for curative care?
- A. Customized spa wellness chart
  - B. History of injuries, illnesses, and surgeries
  - C. National provider identifier
  - D. Standard wellness chart
22. What is a contract for care?
- A. An invitation for the patient to participate in treatment and share the responsibility for the result
  - B. A form which asks the patient to list, prioritize, and classify current health concerns and to identify ways in which those conditions are affecting daily life
  - C. A checklist of symptoms and conditions that you treat
  - D. An invitation for the insurance company to participate in treatment and share the responsibility for the result
23. In which of the following situations would HIPAA apply to you?
- A. You conduct all your business activities and health care transactions on paper
  - B. You conduct all your business activities and health care transactions by phone or dedicated fax (as opposed to faxing from a computer)
  - C. You use a third party billing service or clearinghouse to transmit information electronically
  - D. All of the above
24. Which of the following is a physical safeguard that you must have in place to be compliant with HIPAA?
- A. Rooms and storage facilities with locks or other safeguards to control access
  - B. Policies that define authorized access to information, including user IDs and passwords and actions that will be taken if violations occur
  - C. Procedures that define authorized access to information, including user IDs and passwords and actions that will be taken if violations occur
  - D. Encryption of electronic data and use of passwords to verify use and to track users who have logged into the system
25. When should the patient read and sign your fees and policies form?
- A. When the treatment program is completed
  - B. After the first treatment session
  - C. At each reevaluation session
  - D. Before the first session begins

26. An analog scale uses:
- A. A 0-10 pain scale to rate pain or limitations on activities
  - B. Words to describe the type of pain a patient is feeling
  - C. A line of continuum, with one extreme on one end and the opposite extreme on the other end
  - D. A picture of a body in which the patient marks their area of pain, tenderness, and/or numbness
27. When used throughout a treatment series, pain questionnaires can demonstrate:
- A. A snapshot of the patient's health
  - B. Functional progress
  - C. The treatment plan
  - D. Payments received over time
28. All of the following are included in the injury information form EXCEPT:
- A. Type of injury
  - B. Symptoms
  - C. Effect of injuries on daily activities
  - D. Fees and policies

## Chapter 6

29. In SOAP charting, what is objective data?
- A. Data provided by the patient
  - B. Data from the practitioner's perspective
  - C. Functional goals and outcomes based on activities of daily living
  - D. Treatment recommendations and self-care education
30. When documenting the 0-10 pain scale, what numbers refer to severe symptoms?
- A. 1,2, or 3
  - B. 4, 5, or 6
  - C. 7, 8, or 9
  - D. 10
31. On a session note, subjective information can be divided into all of the following parts EXCEPT:
- A. A prioritized list of health concerns or goals for the session
  - B. Symptoms relating to the current health concerns
  - C. Activities that aggravate or relieve the symptoms
  - D. Measurable findings such as palpation findings and range of motion testing
32. Which of the following is an example of a measurable finding?
- A. A list of patient activities that alleviate symptoms
  - B. Patient's breathing is shallow and rapid
  - C. Performed deep compression on left semispinalis
  - D. First treatment goal is to reduce inflammation in the neck

33. ROM testing is:
- A. A valuable assessment tool for determining the stage of inflammation, the level of severity of sprains and strains, joint trauma, and muscle weakness
  - B. An objective test used to locate and assess inconsistencies in various rhythms, pulses, and systems of the body
  - C. A broad term that includes modifying activities to decrease pain and effort and increase safety, stretching and strengthening exercises, and home remedies such as ice packs, and self-massage techniques
  - D. Using a 0-10 pain scale to determine the amount of dysfunction and limitation the patient experiences in daily living
34. Setting SMART goals is part of:
- A. Subjective
  - B. Objective
  - C. Assessment
  - D. Plan
35. Initial notes are:
- A. Comprehensive and include extensive information regarding the patient's health and current situation
  - B. Brief and primarily record the treatment provided
  - C. Used to chart reevaluation sessions
  - D. A final summary of the patient's progress, health status, and any subsequent course of action

## Chapter 7

36. What are the two requirements for charting wellness sessions?
- A. An adequate health history to ensure the client's safety and a detailed plan of care for future visits
  - B. Measureable findings, such as posture and breath and a detailed record of the therapy provided
  - C. Measureable findings, such as posture and breath and a detailed plan of care for future visits
  - D. An adequate health history to ensure the client's safety and a detailed record of the therapy provided
37. All of the following are factors to consider when selecting one style of documentation over another EXCEPT:
- A. Client health and expectations
  - B. Goals of treatment and treatment results
  - C. Reimbursement for services
  - D. Time of day and location of treatment
38. Which of the following venues would benefit most from wellness charting?
- A. Spas and salons
  - B. Chiropractic office
  - C. Hospital
  - D. Medical clinic

### Section 3

#### Chapter 8

39. Which of the following is a question to ponder before you decide whether insurance billing services are appropriate for your practice?
- A. Are peers in your area billing insurance companies?
  - B. Have you ever lost a patient because you were unwilling to bill an insurance company?
  - C. Can you afford to wait 30-60 days to get paid, which is the typical turnaround time for insurance reimbursement?
  - D. All of the above
40. All of the following are questions to ask in determining if you are eligible to receive reimbursement for massage therapy services from insurance companies EXCEPT:
- A. Can you bill directly for your services? Do you need a prescription from a referring HCP, or do you have diagnostic scope?
  - B. How many ICD-10 codes can be used for billing massage therapy services to a patient's health insurance?
  - C. If you are not a licensed HCP, do regulations exist that permit you to provide health care services under the license or supervision of an HCP with primary care status?
  - D. Which types of insurance will reimburse for massage therapy services in your state?
41. Three common types of insurance coverage are:
- A. Primary injury coverage, workers' compensation, and public health insurance
  - B. Personal injury coverage, workers' reimbursement, and private health protection
  - C. Personal injury coverage, workers' compensation, and private health insurance
  - D. Personal grievance coverage, workers' reimbursement, and public health insurance
42. Which of the following is an example of private health insurance?
- A. Personal injury protection on an automobile policy
  - B. Liability insurance coverage of the at-fault party in an automobile accident
  - C. Insurance that employers are mandated to purchase for all employees
  - D. Major medical insurance, Medicare, or Medicaid
43. The *Journal*, a publication of the American Massage Therapy Association Washington Chapter, mentions paying close attention to the following sections of a contract:
- A. Fee schedules, patient access, contract termination, and records and documentation
  - B. Fee schedules, intake forms, treatment notes, and contract termination
  - C. Billing instructions, patient access, ICD-10 diagnosis codes, and records and documentation
  - D. Medicare rates, intake forms, contract termination, and progress reports
44. What two forms will help you identify the information necessary for insurance billing and reimbursement?
- A. The electronic health record (EHR) and the insurance verification form
  - B. The billing information form and the insurance verification form
  - C. The billing information form and the fees and policies form
  - D. The health history form and the billing information form

45. If you do not have a diagnostic scope, you cannot assign \_\_\_\_\_ to a patient and therefore will require a prescription with ICD-10 codes from the patient's HCP.
- A. CMS 1500 forms
  - B. CPT codes
  - C. ICD-10 codes
  - D. Fees
46. The \_\_\_\_\_ is the standard billing form approved by the AMA.
- A. ICD-10 form
  - B. CPT 1500 form
  - C. Electronic health record (EHR)
  - D. CMS 1500 form
47. Which of the following can help you track treatment and billing dates, and reimbursement dates and payment amounts?
- A. A payment and correspondence log for each patient
  - B. Confirmation letter for prescription for treatment
  - C. Billing information form
  - D. Patient and practitioner insurance verification forms
48. All of the following are ways you as a practitioner can prove medical necessity EXCEPT:
- A. Make sure prescriptions communicate that the adjunctive care is integral to the treatment plan
  - B. Prove progress specific to the patient's daily activities
  - C. Treat within the diagnosis
  - D. Document only active care
49. If you find yourself faced with a denied claim for necessary treatment after the service has been provided, what can you do?
- A. Submit a written request outlining your objection to the denial
  - B. Cite references from the insurance carrier's policy manual to support your case
  - C. Request support from the referring HCP and enclose any supportive statements or reports
  - D. All of the above

## Chapter 9

50. Webster's defines ethics as:
- A. The study of the development, structure, and functioning of society
  - B. The study of standards of conduct and moral judgement
  - C. The study of human behavior
  - D. The study of a person's bounds or limits

51. The key to an ethical fee schedule is:
- A. Apply the same fee for the same service to everyone and provide the service that is least appropriate to the patient
  - B. Apply a different fee for the same service to everyone and provide the service that is most appropriate to the patient
  - C. Apply the same fee for the same service to everyone and provide the service that is most appropriate to the patient
  - D. Apply a different fee for the same service to everyone and provide the service that is least appropriate to the patient
52. Which of the following can make all the difference between a patient feeling comfortable, wondering if a boundary was crossed, and feeling confident in the therapeutic value of the session?
- A. Clear communication and documentation
  - B. Taking it upon yourself to meet the expectations of everyone who comes to you for help
  - C. Accepting and billing insurance companies for your services
  - D. Commit to specific results and time limits for healing
53. Which of the following is an example of a privacy violation?
- A. Never revealing the name of your patients when sharing stories with colleagues
  - B. Never sharing health information of one patient with the patient immediately following
  - C. Leaving a patient in the room with another patient's chart laying out
  - D. Never leaving specific health information on a phone's messaging system without written permission
54. Regular self-evaluations:
- A. Help identify and resolve difficult situations before problems arise
  - B. Fail to identify and resolve difficult situations before problems arise
  - C. Define goals for your business and the future
  - D. Allow you to become familiar with state and local laws

## Chapter 10

55. Research teaches us all of the following EXCEPT:
- A. What is safe and effective
  - B. When it is safe and effective
  - C. How it is effective
  - D. Clinical intuition
56. Case reports are useful because:
- A. They test a theory on a larger group of people
  - B. They offer a perspective on what is possible and suggest with might warrant further study
  - C. They compare two or more clinical interventions to help determine which treatment is best for an identified population
  - D. They focus on outcomes important to patients and disseminate the results in useful ways

57. What is quantitative research?
- A. Descriptive data collected in the form of words rather than numbers
  - B. Numerical data acquired through systemic empirical investigation of measurable properties and phenomena and their relationships
  - C. A form of secondary research which involves the summary, collation, and analysis of existing research
  - D. Data collected from experimentation of one subject and one practitioner
58. Which of the following is an example of protocol development?
- A. A patient presents with pain and limited range of motion in their knee; the goals of your treatment are to reduce pain and increase range of motion; you then select techniques that can accomplish the goals
  - B. A patient presents with pain and limited range of motion in their knee; you go to your computer and do a search on PubMed for evidence of others who have been treated with massage therapy for the same condition to determine what techniques to select
  - C. A patient presents with pain and limited range of motion in their knee; once care has ended you write up the interaction, reporting the prevalence of knee pain and how the patient reacted to the intervention
  - D. A patient presents with pain and limited range of motion in their knee; you then find other people suffering from the same symptoms and perform a pilot study asking the question, can massage increase knee range of motion
59. Which of the following is presented in the results section of a case report?
- A. Summary of the study
  - B. The profile of the client and the treatment plan
  - C. Data in an organized fashion: charts, graphs or tables
  - D. Explanation of the effects of treatment
60. What are the two journals that primarily publish massage and bodywork research?
- A. American Massage Therapy Association and the Associated Massage and Bodywork Professionals
  - B. International Journal of Therapeutic Massage and Bodywork and the Journal of Bodywork and Movement therapies
  - C. American Massage Therapy Association and the Journal of Bodywork and Movement therapies
  - D. International Journal of Therapeutic Massage and Bodywork and the Associated Massage and Bodywork Professionals

This completes the Communication, Documentation, and Insurance Billing exam.