Reg. No.										

MANIPAL UNIVERSITY

THIRD SEMESTER M.Sc. H.H.I.A. DEGREE EXAMINATION – JANUARY 2012

SUBJECT: RECENT ADVANCES IN HEALTH INFORMATION MANAGEMENT
(NEW REGULATION)

Monday, January 02, 2012

Time: 10:00 – 13:00 Hrs.   Max. Marks: 80

✍ **All questions are compulsory.**

1. Define medical ethics. Discuss IAMI code of ethics for health information professionals.

    (5+10 = 15 marks)

2. Write down the importance of quality assurance program in hospitals. Discuss the role of various accreditation bodies in maintenance of quality in Indian hospitals.

    (5+10 = 15 marks)

3. Distinguish between BPO and KPO. Discuss the role of BPO and KPO in the health care industry in India.

    (5+10 = 15 marks)

4. What is a CBHI? Discuss the different CBHI schemes in the country and the role of NGO, in promoting CBHI.

    (5+10 = 15 marks)

5. **Write short notes on the following:**

5A. Role of ISO in enhancing the documentation process in hospitals

5B. Present scenario of HIS in Indian hospitals

5C. Health Systems research in India

5D. HIPAA technical safeguards

    (5×4 = 20 marks)

꧁꧂꧁꧂꧁

MANIPAL UNIVERSITY

THIRD SEMESTER M.Sc. H.H.I.A. DEGREE EXAMINATION – JANUARY 2012

SUBJECT: OPERATIONS MANAGEMENT
(NEW REGULATION)

Wednesday, January 04, 2012

Time: 10:00 – 13:00 Hrs.   Max. Marks: 80

✍ **All questions are compulsory.**

1. **Essay questions:**

1A. What is Strategy Operations Management? What are the competitive service strategies that may be adopted?

1B. What do you understand by the term inventory management? Write a note on the concepts 'ABC analysis' and the 'EOQ System'.

1C. Explain 'Scheduling in services'

1D. **Explain:**

  i)   Process design

  ii) Process re-engineering

  iii) Process documentation and improvement

(15×4 = 60 marks)

2. **Write short notes on:**

2A. Outline the costs incurred as a result of poor quality

2B. What are responsive supply chains?

2C. Briefly outline Lyth and Johnson's steps to quality in service design

2D. What are the 'operating decisions' made by an operations manager?

(5×4 = 20 marks)

꩜꩜꩜꩜

MANIPAL UNIVERSITY

THIRD SEMESTER M.Sc. H.H.I.A. DEGREE EXAMINATION – JANUARY 2012

SUBJECT: HEALTH ECONOMICS AND ACCOUNTANCY
(NEW REGULATION)

Friday, January 06, 2012

Time: 10:00 – 13:00 Hrs.   Max. Marks: 80

✍ Answer Both Section 'A' and Section 'B' in Two Separate Answer Books.

SECTION – A: HEALTH ECONOMICS: 40 MARKS

✍ Answer ALL the questions.

1A. What is cost – benefit analysis?
1B. What do you mean by Health Policy?
1C. Explain the different sources of Health Finance.
1D. State and explain the law of demand.

(5×4 = 20 marks)

2A. Define national income. What are the methods of measuring national income? What are the difficulties faced in its calculation?

(2+4+4 = 10 marks)

2B. Explain the various methods of quality control in health care.

(10 marks)

SECTION – B: ACCOUNTANCY: 40 MARKS

3.   Answer the following questions:

3A. What are the three branches of accounting?
3B. What is posting? Explain how a transaction is posted to the ledger?
3C. What do you mean by two column cash book? Give a specimen.
3D. Distinguish between cash transaction and credit transaction.
3E. What is a bank reconciliation statement?

(2×5 = 10 marks)

4.   Answer any TWO of the following:

4A. Journalise the following transactions.

	Particulars	Amount (₹)
	Commenced business with furniture	2,000
2000 Jan. 1	Cash	4,000
" 3	Bought goods for cash	5,000
" 4	Bought goods from Chandan	2,000
" 5	Made cash sale	8,000
" 6	Paid cash to Chandan	500
" 7	Sold goods to Shankar	5,000
" 9	Purchased goods on credit from Vivek	7,000
" 12	Cash received from Shankar	1,000
" 20	Received cash from Vivek	4,000
" 25	Sold goods to Vivek on credit	7,000
" 30	Paid rent	6,000
	wages	4,000

Page 1 of 2

4B. Record the following transactions in an analytical petty cash book and balance the same. On 01/04/04 the petty cashier had a balance of ₹ 200

	Particulars	Amount (₹)
2004 April 1	Postage stamp purchased	5
" 3	Sweeper and scavenger paid	5
" 5	Conveyance to manager	2
" 6	Telegram to Bangalore	8
" 7	Stationary Purchased	5
" 10	Lorry hire for goods sent	25
" 13	Cartage and coolie on goods bought	7
" 17	Salary to office boy	15
" 18	Servicing charges to typewriters	6
" 22	Ink and gum purchased	8
" 24	Advertisement in 'Indian Express'	50
" 28	Tea to customers	5
" 30	Paid Asha on account	12

4C. Enter the following transactions in a Two Column cash book.

	Particulars	Amount (₹)
2007 Jan. 1	Opening balance of cash	4,000
" 2	Received from Krishna	2,500
	and allowed him discount	50
" 4	Paid Mohan ₹ 1,000 in full settlement of his account	1,100
" 5	Sold goods for cash	3,200
" 8	Bought goods for cash	200
" 9	Paid Vijayendra	400
" 12	Bought office furniture for cash	275
" 15	Received commission from Sudhindra	1,000
" 16	Received interest from Raju	600
" 19	Paid for Advertisement	300
" 22	Received from Ram ₹ 700 and allowed him discount	50
" 26	Withdrew cash for personal use	500
" 31	Paid office rent	800
" 31	Paid telephone bills	500

(15×2 = 30 marks)

ꗊꗊꗊꗊ

MANIPAL UNIVERSITY

THIRD SEMESTER M.Sc. H.H.I.A. DEGREE EXAMINATION – JANUARY 2012

SUBJECT: CODING FOR HEALTH INSURANCE
(NEW REGULATION)

Monday, January 09, 2012

Time: 10:00 – 13:00 Hrs.   Max. Marks: 80

✍ **All questions are compulsory.**
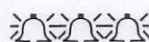
1.   Answer the following questions:

1A.   What are standard 'Code Sets', brief about each code sets.

(15 marks)

1B.   Brief about leading industries involved in developing and maintaining of ICD-9-CM.

(15 marks)

1C.   Write briefly about community based health insurance programs in India.

(10 marks)

1D.   List the chapters of ICD-9-CM and write the coding guidelines for HIV infections.

(10 marks)

2.   Write short notes on:

2A.   FFS
2B.   Medical Underwriting
2C.   Experience rating
2D.   TPA
2E.   Claim
2F.   Formulary
2G.   Coordination of benefits
2H.   Non cancellable policy
2I.   SNDO
2J.   Nature of presenting problem

(2×10 = 20 marks)

3.   Define the following Health insurance terminologies:

3A.   Exclusions
3B.   Appeal
3C.   Copayment
3D.   Assignment of benefits
3E.   Out patient
3F.   Medigap
3G.   Customary fee
3H.   Code
3I.   Cap
3J.   Covered injury

(1×10 = 10 marks)

Reg. No.									

MANIPAL UNIVERSITY

THIRD SEMESTER M.Sc. H.H.I.A. DEGREE EXAMINATION – JUNE 2012

SUBJECT: RECENT ADVANCES IN HEALTH INFORMATION MANAGEMENT

Saturday, June 09, 2012

Time: 10:00 – 13:00 Hrs.   Max. Marks: 80

✍ **All questions are compulsory.**

1. Discuss the recent developments of with regards to laws and regulations in India on use of Electronic records as evidence.

(10 marks)

2. Discuss the barriers in implementation of electronic health records in Indian hospitals.

(10 marks)

3. What do you understand by public private partnership in health care sector? Explain with an example. What are the different levels of health care delivery system in India? Briefly describe each of them.

(10+10 = 20 marks)

4. Define disaster management. Discuss the one of health information in disaster management.

(10 marks)

5. Write down in detail about HIPAA administrative security standards.

(10 marks)

6. **Write short notes on the following:**

6A. Accreditation and the role of NABH

6B. Bottleneck for the growth of telemedicine in India

6C. Main reasons for failure of public health information systems in India

6D. Role of CBHI in poverty alleviation

(5×4 = 20 marks)

MANIPAL UNIVERSITY

THIRD SEMESTER M.Sc. H.H.I.A. DEGREE EXAMINATION – JUNE 2012

SUBJECT: OPERATIONS MANAGEMENT

Tuesday, June 12, 2012

Time: 10:00 – 13:00 Hrs.   Max. Marks: 80

✍ **All questions are compulsory.**

1. **Essay questions:**

1A. What is process management? Identify when a process decision is made and outline briefly the principles concerning process management.

1B. Outline in length, the various decisions an operations manager needs to make.

1C. Explain the various inventory reduction tactics employed by an operations manager.

1D. Write a detailed note on various layout types.

(15×4 = 60 marks)

2. **Write short notes on:**

2A. What is product operations management? Explain its characteristic features.

2B. As a healthcare service provider, how can quality be measured?

2C. What are efficient supply chains?

2D. What do you understand by 'the Kanban system'?

(5×4 = 20 marks)

✵✵✵✵✵

MANIPAL UNIVERSITY

THIRD SEMESTER M.Sc. H.H.I.A. DEGREE EXAMINATION – JUNE 2012

SUBJECT: HEALTH ECONOMICS & ACCOUNTANCY

Thursday, June 14, 2012

Time: 10:00 – 13:00 Hrs.   Max. Marks: 80

✍ **Answer Both Section 'A' and Section 'B' in Two Separate Answer Books.**

SECTION – A: HEALTH ECONOMICS: 40 MARKS

✍ **Answer ALL the questions.**

1A. What are the different sources of health finance?
1B. Distinguish between micro and macro economics.
1C. Explain the role of time in price determination.
1D. What is cost – benefit analysis?

(5×4 = 20 marks)

2A. Explain the role of health sector in the economy.
2B. State and explain the law of diminishing marginal utility with assumptions and exceptions.

(10×2 = 20 marks)

SECTION – B: ACCOUNTANCY: 40 MARKS

3.   **Answer the following questions:**

3A. Distinguish between a journal and ledger.
3B. Explain the meaning of:
   i)   Entry
   ii)   Narration and
   iii)   L.F.
3C. What are subsidiary books? Mention any three of them.
3D. Explain the different types of cash book.
3E. What is a bank reconciliation statement?

(2×5 = 10 marks)

4.   **Answer any TWO of the following:**
4A. Enter the following transactions in the purchase book of Mr. Manohar.

2004	Particulars
January 1	Bought from Nandan Bangalore 100 bags of Rice @ ₹ 80 per bag.
" 2	Bought from Mysore Sugar Mills Ltd.Mandya, 20 bags of Sugar @ ₹ 200 per bag.
" 5	Bought from Nilgiri Tea Company 10 cases of tea @ ₹ 100 per case.
" 6	Bought from Canara Stores, Mangalore 100 bags of rice @ ₹ 100 per bag 50 bags of wheat @ ₹ 400 per bag 200 bags of sugar @ ₹ 200 per bag Less : Trade discount 10%
" 10	Bought from Salam Stores 100 bags of rice @ ₹ 90 per bag 100 bags of cotton @ ₹ 300 per bag
" 20	Bought from Delhi Stores 200 bags of rice @ ₹ 100 per bag Less : Trade discount 15%

4B. Enter the following transactions in Two Column Cash Book.

2006	Particulars
October 1	Opening Balance of Cash ₹ 2000
” 2	Received from Raj ₹ 1500 and allowed discount ₹ 50
” 4	Paid to Mr. X ₹ 500 in full settlement of his account ₹ 550
” 5	Sold goods for cash ₹ 1600
” 8	Bought goods for cash ₹ 200
” 9	Paid Vijay ₹ 200
” 12	Bought office furniture for cash ₹ 225
” 15	Received commission ₹ 500
” 16	Received interest ₹ 300
” 19	Paid for advertisement ₹ 150
” 22	Received from Ram ₹ 700 and allowed him discount ₹ 50
” 26	Withdrew cash for personal use ₹ 500
” 31	Paid office rent ₹ 800 and Salaries ₹ 500

4C. Journalise the following transactions:

	Particulars	Amount (₹)
2000 Dec. 1	Commenced business with furniture	2,000
	Cash	4,000
” 3	Bought goods for cash	5,000
” 4	Bought goods from Ramu	2,000
” 5	Made cash sale	8,000
” 6	Paid cash to Ramu	500
” 7	Sold goods to Shanker	5,000
” 9	Purchased goods on credit from Vaishak	7,000
” 12	Cash received from Shanker	1,000
” 20	Received cash from Vaishak	4,000
” 25	Sold goods to Vaishak on credit	7,000
” 30	Paid rent	600
	Wages	400

(15×2 = 30 marks)

✿✿✿✿✿

MANIPAL UNIVERSITY

THIRD SEMESTER M.Sc. H.H.I.A. DEGREE EXAMINATION – JUNE 2012

SUBJECT: CODING FOR HEALTH INSURANCE

Saturday, June 16, 2012

Time: 10:00 – 13:00 Hrs.   Max. Marks: 80

---

1.   **Answer the following questions:**

1A.   Which are the seven components of E/M services? Write in detail about the 'key components'.

(1+14 = 15 marks)

1B.   Explain the common types of health insurance coverage and plans.

(6+9 = 15 marks)

1C.   List the chapters of ICD-9-CM and write the diagnostic coding and reporting guidelines for outpatient services.

(10 marks)

1D.   Discuss the trend of premium rating in health insurance sector.

(10 marks)

2.   **Write short notes on:**

2A.   NCHS
2B.   Temporary national codes
2C.   TPA
2D.   Deductible
2E.   Claim
2F.   SNOMED
2G.   William Farr
2H.   London Bills of Mortality
2I.   General V code guidelines
2J.   Review of systems

(2×10 = 20 marks)

3.   **Define the following health insurance terminologies:**

3A.   Pre existing condition
3B.   Grievance
3C.   Copayment
3D.   Explanation of benefits
3E.   Ambulatory care
3F.   Medigap
3G.   Ancillary service
3H.   Code
3I.   Premium
3J.   Medical Necessity

(1×10 = 10 marks)