

HIO-201 Dumps

Certified HIPAA Professional

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NEW QUESTION 1

This security rule standard requires policies and procedures for authorizing access to electronic protected health information that are consistent with its required implementation specifications- which are Isolating Health Care Clearinghouse Function, Access Authorization, and Access Establishment and Modification:

- A. Access Control
- B. Security Incident Procedures
- C. Information Access Management
- D. Workforce Security
- E. Security Management Process

Answer: C

NEW QUESTION 2

Select the correct statement about the 820-Payment Order/Remittance advice transaction.

- A. It can be used for the payment of provider claims.
- B. It can be used to pay for insurance products (either individual or group premiums).
- C. It can function solely as a remittance advice.
- D. Electronic Funds Transfer is fully supported.
- E. This transaction can carry either summary or detailed remittance information.

Answer: A

NEW QUESTION 3

Which of the following is example of "Payment" as defined in the HIPAA regulations?

- A. Annual Audits
- B. Claims Management
- C. Salary disbursement to the workforce having direct treatment relationships.
- D. Life Insurance underwriting
- E. Cash given to the pharmacist for the purchase of an over-the-counter drug medicine

Answer: B

NEW QUESTION 4

A valid Notice of Privacy Practices must:

- A. Detail specifically all activities that are considered a use or disclosure.
- B. Describe in plain language what is meant by treatment, payment, and health care operations (TPO)
- C. Inform the individual that protected health information (PHI) may only be used for valid medical research.
- D. Inform the individual that this version of the Notice will always cover them, regardless of subsequent changes.
- E. State the expiration date of the Notice.

Answer: B

NEW QUESTION 5

Dr Jones, a practicing dentist, has decided to directly implement an EDI solution to comply with the HIPAA transaction rule Dr. Jones employs a small staff of 4 persons for whom he has sponsored a health care plan. Dr. Jones has revenues of less than \$1 million. Select the code set that Dr. Jones should consider supporting for his EDI system.

- A. 837 - Professional
- B. 834
- C. CPT-4
- D. 837 - Institutional
- E. CDT

Answer: E

NEW QUESTION 6

To comply with the Privacy Rule, a valid Notice of Privacy Practices:

- A. Is required for all Chain of Trust Agreements.
- B. Must allow for the patient's written acknowledgement of receipt.
- C. Must always be signed by the patient.
- D. Must be signed in order for the patient's name to be sold to a mailing list organization
- E. Is not required if an authorization is being developed

Answer: B

NEW QUESTION 7

The version of the ANSI ASC X12N standard required by HIPAA regulations is:

- A. 3070
- B. 3050
- C. 3045

- D. 4010
- E. 4020

Answer: D

NEW QUESTION 8

Signed authorization forms must be retained:

- A. Indefinitely, because the life of a signed authorization is indefinite.
- B. Six (6) years from the time it expires.
- C. For as long as the patient's records are kept.
- D. Until it is specifically revoked by the individual.
- E. Ten (10) years from the date it was signed.

Answer: B

NEW QUESTION 9

The code set that must be used to describe or identify inpatient hospital services and surgical procedures is:

- A. ICD-9-CM, Volumes 1 and 2
- B. CPT-4
- C. CDT
- D. ICD-9-CM, Volume 3
- E. HCPCS

Answer: D

NEW QUESTION 10

Maintenance personnel that normally have no access to PHI are called in to investigate water that is leaking from the ceiling of the room where a large amount of PHI is stored. The room is normally secured but the file cabinets have no doors or locks. Situations this are addressed by which Workforce Security implementation specification?

- A. Risk Management
- B. Written Contract or Other Arrangement
- C. Accountability
- D. Authorization and/or Supervision
- E. Integrity Controls

Answer: D

NEW QUESTION 10

Assigning a name and/or number for identifying and tracking users is required by which security rule implementation specification?

- A. Access Authentication
- B. Integrity Controls
- C. Authorization and/or Supervision
- D. Data Authentication
- E. Unique User Identification

Answer: E

NEW QUESTION 14

One implementation specification of the Security Management Process is:

- A. Risk Analysis
- B. Authorization and/or Supervision
- C. Termination Procedures
- D. Contingency Operations
- E. Encryption and Decryption

Answer: A

NEW QUESTION 17

Within the context of a transaction set, the fields that comprise a hierarchical level are referred to as a(n):

- A. Loop.
- B. Enumerator.
- C. Identifier
- D. Data segment.
- E. Code set.

Answer: A

NEW QUESTION 22

The Data Backup Plan is part of which Security Standard?

- A. Contingency Plan
- B. Evaluation
- C. Security Management Procedures
- D. Facility Access Control
- E. Security Incident Procedures

Answer: A

NEW QUESTION 25

A provider is in compliance with the Privacy Rule. She has a signed Notice of Privacy Practices from her patient. To provide treatment, the doctor needs to consult with an independent provider who has no relationship with the patient. To comply with the Privacy Rule the doctor MUST:

- A. Establish a business partner relationship with the other provider.
- B. Obtain a signed authorization from the patient to cover the disclosure.
- C. Make a copy of the signed Notice available to the other provider.
- D. Obtain the patients signature on the second provider's Notice of Privacy Practices.
- E. Do nothing more -the Notice of Privacy Practices covers treatment activities.

Answer: E

NEW QUESTION 28

Implementation features of the Security Management Process include which one of the following?

- A. Power Backup plan
- B. Data Backup Plan
- C. Security Testing
- D. Risk Analysis
- E. Authorization and/or Supervision

Answer: D

NEW QUESTION 30

ANSI X12 specifies the use of a (an):

- A. Simple flat file structure for transactions.
- B. Envelope structure for transactions.
- C. Employer identifier.
- D. Health plan identifier
- E. Provider identifier.

Answer: B

NEW QUESTION 33

Physical safeguards using media controls do not include procedures to:

- A. Control access to tapes, floppies, and re-writeable CDs.
- B. Track the access of record able media.
- C. Dispose of storage devices.
- D. Backup copies of health information.
- E. Prohibit alteration of health information.

Answer: E

NEW QUESTION 38

When submitting a Health Care Claim Status Request, it is important to provide the proper tracking information to exactly identify the previously submitted claim. Select the information that would be most important to the claim inquiry process.

- A. Authorization Number
- B. Provider's National Provider Identifier (NPI)
- C. Claim Submitter home phone number
- D. Patient's lab report
- E. Provider's security PIN code

Answer: B

NEW QUESTION 41

Policies requiring workforce members to constantly run an updated anti-virus program on their workstation might satisfy which implementation specification?

- A. Risk Management
- B. Protection from Malicious Software
- C. Facility Security Plan
- D. Response and Reporting
- E. Emergency Access Procedure

Answer: B

NEW QUESTION 46

The best example of a party that would use the 835 - Health Care Claim Payment/Advice transaction is:

- A. HHS.
- B. A community health management information system.
- C. Health statistics collection agency.
- D. Government agency
- E. Insurance Company.

Answer: E

NEW QUESTION 49

Periodic testing and revision of contingency plans is addressed by:

- A. Testing and Revision Procedures
- B. Information System Activity Review
- C. Response and Reporting
- D. Data Backup Plan
- E. Emergency Access Procedure

Answer: A

NEW QUESTION 50

Select the best statement regarding de-identified information (DII).

- A. De-identified information is IIHI that has had all individually (patient) identifiable information removed.
- B. Oil may be used only with the authorization of the individual.
- C. Oil remains PHI.
- D. The only approved method of de-id entitle at ion is to have a person with ??appropriate knowledge and experience?? de-identify the IIHI.
- E. All PHI use and disclosure requirements do not apply to re-identified DII.

Answer: A

NEW QUESTION 55

This code set is used to describe or identify radiological procedures and clinical laboratory tests:

- A. ICD-9-CM, Volumes 1 and 2.
- B. CPT-4.
- C. CDT.
- D. ICD-9-CM, Volume 3.
- E. HCPCS.

Answer: E

NEW QUESTION 57

The implementation specifications for this HIPAA security standard (within Technical Safeguards) must support emergency access and unique user identification:

- A. Audit Control
- B. Integrity
- C. Access Control
- D. Person or Entity Authentication
- E. Transmission Security

Answer: C

NEW QUESTION 58

This implementation specification might include actions such as revoking passwords, and collecting keys

- A. Sanction Policy
- B. access Authorization
- C. Facility Security Plan
- D. Termination Procedures
- E. Unique User Identification

Answer: D

NEW QUESTION 62

The transaction number assigned to the Health Care Eligibility Request transaction is:

- A. 270
- B. 276
- C. 278
- D. 271
- E. 834

Answer: A

NEW QUESTION 63

Which HIPAA Title is fueling initiatives within organizations to address health care priorities in the areas of transactions, privacy, and security?

- A. Title I.
- B. Title II
- C. Title III
- D. Title IV.
- E. Title V.

Answer: B

NEW QUESTION 64

Select the FALSE statement regarding health-related communications and marketing in the HIPAA regulations:

- A. A covered entity must obtain an authorization for any use or disclosure of protected health information for marketing, except if the communication is in the form allowed by the regulations.
- B. A face-to-face communication made by a covered entity to an individual is allowed by the regulations without an authorization
- C. A promotional gift of nominal value provided by the covered entity is NOT allowed by the regulations without an authorization.
- D. If the marketing is expected to result in direct or indirect remuneration to the covered entity from a third party, the authorization must state that such remuneration is expected
- E. Disclosure of PHI for marketing purposes is limited to disclosure to business associates (which could be a telemarketer) that undertakes marketing activities on behalf of the covered entity

Answer: C

NEW QUESTION 65

A hospital is preparing a file of treatment information for the state of California. This file is to be sent to external medical researchers. The hospital has removed SSN, name, phone and other information that specifically identifies an individual. However, there may still be data in the file that potentially could identify the individual. Can the hospital claim "safe harbor" and release the file to the researchers?

- A. Yes - the hospital's actions satisfy the "safe harbor" method of de-identification.
- B. No - a person with appropriate knowledge and experience must determine that the information that remains can't identify an individual.
- C. No - authorization to release the information is still required by HIPAA
- D. No - to satisfy "safe harbor" the hospital must also have no knowledge of a way to use the remaining data to identify an individual.
- E. Yes - medical researchers are covered entities and "research" is considered a part of "treatment" by HIPAA.

Answer: D

NEW QUESTION 70

Once a year, a team at ABC Hospital reviews environmental and operational changes that may have had an impact on the security of electronic PHI. This is an example of:

- A. Transmission Security
- B. Evaluation
- C. Audit Controls
- D. Integrity
- E. Security Management Process

Answer: B

NEW QUESTION 75

The office manager of a small doctor's office wants to donate several of their older workstations to the local elementary school. Which Security Rule Standard addresses this situation?

- A. Security Management Process
- B. Device and Media Controls
- C. Information Access Management
- D. Facility Access Controls
- E. Workstation Security

Answer: B

NEW QUESTION 80

Select the best example of a business associate (if they had access to PHI).

- A. Accountants
- B. Hospital employees
- C. A covered entity's internal IT department
- D. CEO of the covered entity
- E. The covered entity's billing service department

Answer: A

NEW QUESTION 84

ANSI ASC X12 is the standard for:

- A. Security requirements.
- B. Privacy requirements.
- C. Is another name for the Security Rule.
- D. Representation of all health care claims.
- E. Encrypting all information for use over a PKI.

Answer: D

NEW QUESTION 85

Select the phrase that makes the following statement FALSE. The 270 Health Care Eligibility Request can be used to inquire about:

- A. Eligibility status
- B. Benefit maximums
- C. Participating providers
- D. Deductibles & exclusions
- E. Co-pay amounts

Answer: C

NEW QUESTION 87

Title 1 of the HIPAA legislation in the United States is about:

- A. PKI requirements for hospitals and health care providers.
- B. Encryption algorithms that must be supported by hospitals and health care providers.
- C. Fraud and abuse in the health care system and ways to eliminate the same.
- D. Guaranteed health insurance coverage to workers and their families when they change employers.
- E. The use of strong authentication technology that must be supported by hospitals and health care providers.

Answer: D

NEW QUESTION 92

A business associate:

- A. Requires PKJ for the provider and the patient.
- B. Is electronically stored information about an individual's lifetime health status and healthcare.
- C. Is another name for an HMO.
- D. Identifies all non-profit organizations.
- E. Is a person or an entity that on behalf of the covered entity performs or assists in the performance of a function or activity invoking the use or disclosure of health-related information.

Answer: E

NEW QUESTION 96

This requires records of the movement of hardware and electronic media that contain PHI.

- A. Business Associate Contract
- B. Data Backup Plan
- C. Media Re-use
- D. Disposal
- E. Accountability

Answer: E

NEW QUESTION 99

A covered entity that fails to implement the HIPAA Privacy Rule would risk:

- A. \$5,000 in fines.
- B. 55000 in fines and six months in prison.
- C. An annual cap of \$50,000 in fines.
- D. A fine of up to \$50,000 if they wrongfully disclose PHI.
- E. Six months in prison.

Answer: D

NEW QUESTION 103

Processes enabling an enterprise to restore any lost data in the event of fire, vandalism, natural disaster, or system failure are defined under:

- A. Risk Analysis
- B. Contingency Operations
- C. Emergency Mode Operation Plan
- D. Data Backup Plan
- E. Disaster Recover Plan

Answer: E

NEW QUESTION 105

Formal, documented instructions for reporting security breaches are referred to as:

- A. Business Associate Contract
- B. Response and Reporting
- C. Emergency Access Procedure
- D. Sanction policy
- E. Risk Management

Answer: B

NEW QUESTION 110

The purpose of this security rule standard is to implement technical policies and procedures for electronic information systems that maintain electronic PHI, and to allow access only to those persons or software programs that have been granted access rights:

- A. Person or Entity Authentication
- B. Audit Controls
- C. Facility Access Controls
- D. Transmission Security
- E. Access Controls

Answer: E

NEW QUESTION 114

Select the best statement regarding the definition of protected health information (PHI).

- A. PHI includes all individually identifiable health information (IIHI).
- B. PHI does not include physician's hand written notes about the patient's treatment.
- C. PHI does not include PHI stored on paper.
- D. PHI does not include PHI in transit.
- E. PHI includes de-identified health information

Answer: A

NEW QUESTION 115

The scope of the Privacy Rule includes:

- A. All Employers.
- B. The Washington Publishing Company
- C. Disclosure of non-identifiable demographics.
- D. Oral disclosure of PHI.
- E. The prevention of use of de-identified information.

Answer: D

NEW QUESTION 117

Workstation Use falls under which Security Rule area?

- A. Person or Entity Authentication
- B. Technical Safeguards
- C. Administrative Safeguards
- D. Physical Safeguards
- E. Transmission Security

Answer: D

NEW QUESTION 118

Patient identifiable information may include:

- A. Country of birth.
- B. Telephone number.
- C. Information on past 3 employers.
- D. Patient credit reports.
- E. Smart card-based digital signatures.

Answer: B

NEW QUESTION 119

HIPAA defines transaction standards for:

- A. Encrypted communication between patient and provider.
- B. All patient events.
- C. Security.
- D. Benefits inquiry.
- E. Emergency treatment.

Answer: D

NEW QUESTION 122

When limiting protected health information (PHI) to the minimum necessary for a use or disclosure, a covered entity can use:

- A. Their professional judgment and standards.
- B. The policies set by the security rule for the protection of the information.
- C. Specific guidelines set by WEDI.
- D. Measures that are expedient and reduce costs.
- E. The information for research and marketing purposes only.

Answer: A

NEW QUESTION 124

The Privacy Rule gives patients the following right:

- A. Access to the psychotherapy notes.
- B. Request an amendment to their medical record.
- C. Receive a digital certificate.
- D. See an accounting of disclosures for which authorization was given.
- E. The use of a smart card for accessing their records.

Answer: B

NEW QUESTION 128

Select the correct statement regarding code sets and identifiers.

- A. The social security number has been selected as the National Health Identifier for individuals.
- B. The COT code set is maintained by the American Medical Association.
- C. Preferred Provider Organizations (PPO) are not covered by the definition of "health plan" for purposes of the National Health Plan Identifier
- D. HIPAA requires health plans to accept every valid code contained in the approved code sets
- E. An important objective of the Transaction Rule is to reduce the risk of security breaches through identifiers.

Answer: D

NEW QUESTION 131

This security standard requires that the covered entity establishes agreements with each organization with which it exchanges data electronically, protecting the security of all such data:

- A. Security Incident Procedures
- B. Integrity
- C. Person or Entity Authentication
- D. Assigned Security Responsibility
- E. Business Associate Contracts and other Arrangements

Answer: E

NEW QUESTION 132

The Security Rule requires that the covered entity identifies a security official who is responsible for the development and implementation of the policies and procedures. This is addressed under which security standard?:

- A. Security Incident Procedures
- B. Response and Reporting
- C. Assigned Security Responsibility
- D. Termination Procedures
- E. Facility Access Controls

Answer: C

NEW QUESTION 133

Individually identifiable health information (IIHI) includes information that is:

- A. Transmitted to a business associate for payment purposes only.
- B. Stored on a smart card only by the patient.
- C. Created or received by a credit company that provided a personal loan for surgical procedures.
- D. Created or received by a health care clearinghouse for claim processing.
- E. Requires the use of biometrics for access to records.

Answer: D

NEW QUESTION 137

Conducting an accurate and thorough assessment of the potential risks and vulnerabilities to the confidentiality, integrity, and availability of electronic PHI is:

- A. Risk Analysis
- B. Risk Management
- C. Access Establishment and Modification
- D. Isolating Health care Clearinghouse Function
- E. Information System Activity Review

Answer: A

NEW QUESTION 138

This HIPAA security area addresses the use of locks, keys and procedures used to control access to computer systems:

- A. Administrative Safeguards
- B. Physical Safeguards
- C. Technical Safeguards
- D. Audit Controls
- E. Information Access Management

Answer: B

NEW QUESTION 140

Physical access to workstations such as, whether or not patients can easily see a screen with PHI on it, is addressed by:

- A. Workstation Use
- B. Workstation Security
- C. Sanction Policy
- D. Termination Procedures
- E. Facility Security Plan

Answer: B

NEW QUESTION 143

Which of the following is a required implementation specification associated with the Contingency Plan Standard?

- A. Integrity Controls
- B. Access Control and Validation Procedures
- C. Emergency Mode Operation
- D. Plan Response and Reporting
- E. Risk Analysis

Answer: C

NEW QUESTION 147

A pharmacist is approached by an individual and asked a question about an over-the-counter medication. The pharmacist needs some protected health information (PHI) from the individual to answer the question. The pharmacist will not be creating a record of this interaction. The Privacy Rule requires the pharmacist to:

- A. Verbally request 3 consent and offer a copy of the Notice of Privacy Practices.
- B. Verbally request specific authorization for the PHI.
- C. Do nothing more.
- D. Obtain the signature of the patient on their Notice of Privacy Practices.
- E. Not respond to the request without an authorization from the primary physician.

Answer: C

NEW QUESTION 152

Which of the following is not one of the HIPAA Titles?:

- A. Title IX: Employer sponsored group health plans.
- B. Title III: Tax-related Health Provisions.
- C. Title II: Administrative Simplification.
- D. Title I: Health Care Insurance Access, Portability, and Renewability.
- E. Title V: Revenue Offsets.

Answer: A

NEW QUESTION 155

This code set describes drugs:

- A. ICD-9-C
- B. Volumes 1 and 2.
- C. CPT-4.
- D. CDT.
- E. ICD-9-C
- F. Volume 3.
- G. NDC.

Answer: E

NEW QUESTION 160

A State insurance commissioner is requesting specific, individually identifiable information from an insurer as a part of a routine review of the insurer's practices. What must the insurer do to deidentify the information?

- A. The protected health information must be removed from the informatio
- B. A substitute "key" may be supplied to allow re-identification, if needed.
- C. Limit the information to coverage, dates of treatment, and payment amounts to avoid collecting any protected data.
- D. Nothin
- E. An oversight agency has the right to access this information without prior authorization.
- F. Request that the insurance commissioner ask for an exception from HIPAA from the Department of Health and Human Services.
- G. A written authorization is required from the patient.

Answer: C

NEW QUESTION 162

The security standard that has the objective of implementing mechanisms to record and examine system activity is:

- A. Access Control
- B. Audit Controls
- C. Authorization Controls
- D. Data Authentication
- E. Person or Entity Authentication

Answer: B

NEW QUESTION 164

Select the correct statement regarding the "Minimum Necessary" standard in the HIPAA regulations.

- A. In some circumstances a coveted entity is permitted, but not required, to rely on the judgment of the party requesting the disclosure as to the minimum amount of information necessary for the intended purpos
- B. Some examples of these requesting parties are: another covered entity or a public official.
- C. The privacy rule prohibits use, disclosure, or requests for an entire medical record.
- D. Non-Covered entities need to redesign their facility to meet the requirement for minimum necessary uses.
- E. The minimum necessary standard requires covered entities to prohibit maintenance of medical charts at bedside and to require that X-ray light boards be totally isolated.
- F. If there is a request for more than the minimum necessary PHI, the privacy rule requires a covered entity to deny the disclosure of information after recording the event in the individual's case file.

Answer: A

NEW QUESTION 166

The Privacy Rule has broad administrative requirements. Which one of the following requirements is defined under the Privacy Rule?

- A. Designate a security officer.
- B. Document termination procedures.
- C. Use biometrics to authenticate transactions.
- D. Deploy tokens and smart cards to all medical personnel.
- E. Verify that business associates treat patient information respectfully.

Answer: E

NEW QUESTION 171

Which one of the following implementation specifications is associated with the Facility Access Control standard?

- A. Integrity Controls
- B. Emergency Access Procedure
- C. Access Control and Validation Procedures
- D. Security Reminders
- E. Security Policy

Answer: C

NEW QUESTION 175

This transaction supports multiple functions. These functions include: telling a bank to move money OR telling a bank to move money while sending remittance information:

- A. 277.
- B. 278.
- C. 271.
- D. 82.
- E. 270.

Answer: D

NEW QUESTION 176

Select the correct statement regarding the 834 - Benefit Enrollment and Maintenance transaction.

- A. It cannot be used to transfer enrollment information from a plan sponsor to a hearth care insurance company or other benefit provider.
- B. It can be used by a health insurance company to notify a plan sponsor that it has dropped one of its members.
- C. It cannot be used to enroll, update, or dis-enroll employees and dependents in a health plan.
- D. A sponsor can be an employer, insurance agency, association or government agency but unions are excluded from being plan sponsors.

E. It can be used in either update or full replacement mode.

Answer: E

NEW QUESTION 179

This transaction, which is not a HIPAA standard, may be used as the first response when receiving a Health Care Claim (837):

- A. Eligibility (270/271).
- B. Premium Payment (820).
- C. Unsolicited Claim Status (277).
- D. Remittance Advice (835).
- E. Functional Acknowledgment (997).

Answer: E

NEW QUESTION 184

The Integrity security standard has one addressable implementation standard which is:

- A. Encryption
- B. Authorization and/or Supervision
- C. Mechanism to Authenticate Electronic PHI
- D. Applications and Data Criticality Analysis
- E. Isolating Health care Clearing House Functions

Answer: C

NEW QUESTION 186

One characteristic of the Notice of Privacy Practices is:

- A. It must be written in plain, simple language
- B. It must explicitly describe all uses of PHI
- C. A description about the usage of hidden security cameras for tracking patient movements for implementing privacy.
- D. A description of the duties of the individual
- E. A statement that the individual must abide by the terms of the Notice.

Answer: A

NEW QUESTION 187

This transaction is typically used in two modes: update and full replacement:

- A. Premium Payment.
- B. Health Care Claim.
- C. First Report of Injury.
- D. Health Plan Enrollment and Dis-enrollment.
- E. Coordination of Benefits.

Answer: D

NEW QUESTION 188

The transaction number assigned to the Benefit Enrollment and Maintenance transaction is:

- A. 270
- B. 276
- C. 278
- D. 280
- E. 834

Answer: E

NEW QUESTION 190

The key objective of a contingency plan is that the entity must establish and implement policies and procedures to ensure the:

- A. Creation and modification of health information during and after an emergency.
- B. Integrity of health information during and after an emergency.
- C. Accountability of health information during and after an emergency.
- D. Vulnerability of health information during and after an emergency.
- E. Non-repudiation of the entity.

Answer: B

NEW QUESTION 193

Ensuring that physical access to electronic information systems and the facilities in which they are housed is limited, is addressed under which security rule standard?

- A. Security Management Process

- B. Transmission Security
- C. Person or Entity Authentication
- D. Facility Access Controls
- E. Information Access Management

Answer: D

NEW QUESTION 198

The transaction pair used for requesting and responding to a health claim status inquiry is:

- A. 270/271
- B. 276/277
- C. 278/278
- D. 834/834
- E. 837/835

Answer: B

NEW QUESTION 201

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