

Life and Health Insurance Practice Exams

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- Which of the following is one situation that has made the possibility of a lawsuit?
 - Adverse selection
 - Risk pooling
 - Under insurance
 - Insured loss
 - All of the following circumstances must be met for loss mitigation to be an affected risk management technique
 - Loss cannot be anticipated
 - Probability of loss is unknown
 - Highly predictable losses
 - Loss must be measurable
 - Which of the following plans will cover medical costs that Medicare doesn't cover?
 - Major medical
 - Voluntary
 - Medical
 - Medicare Supplement
- Which of the following actions is NOT allowed by Health Insurance Counseling and Advocacy Program (HICAP) counselors?
- Medical record keeping assistance
 - Change a fee
 - Assist in policy evaluation
 - Assist in understanding Medicare Supplement
- What are medical disability income insurance payments based on?
 - A flat benefit amount stated in the policy
 - 50% of the full disability amount
 - The amount of the insured's income is reduced by the disability
 - The insured must be totally disabled
 - When an applicant applies for insurance, the process by which the insured determines whether to issue a policy is called
 - Insurism
 - Underwriting
 - Regulation
 - Adverse selection
 - Who acts as the gatekeeper to the Health Maintenance Organization (HMO)?
 - Polioconsultant
 - Health administrator
 - Primary care physician
 - Insurance company

PRACTICE QUESTIONS

1. A
2. D
3. A
4. C
5. A
6. D
7. B
8. B
9. B
10. A
11. C
12. D
13. C
14. A
15. B
16. D
17. A
18. C
19. A
20. A
21. D
22. C
23. A
24. A
25. C
26. C
27. A
28. A
29. A
30. C
31. C
32. C
33. B
34. C
35. C
36. B
37. B
38. B
39. A
40. B
41. D
42. C
43. B

ACCIDENT AND HEALTH FINAL EXAM

- A recent health group health plan is which of the following?
 - Employer pays part of the premium?
 - Employer pays all of the premium?
 - Employer pays part of the premium?
 - Employer pays all of the premium?
- The Federal Consolidated Omnibus Budget Reconciliation Act (COBRA) says all _____ are employees.
 - ✓
 - ✓
 - ✓
 - ✓
- An HMO policy can be replaced in all of the following situations EXCEPT
 - The insured condition has suddenly improved?
 - The new policy has greater benefits?
 - The new policy has a lower premium?
 - The new policy has a higher premium and lower benefits?
- On a "participating" health insurance policy issued by a licensed insurance company, which of the following are correct?
 - Insured?
 - Not as a third party beneficiary?
 - Insured as primary insured?
 - Not insured since the 90% benefit limit is a limit of a portion of the premium?
- Not eligible for health insurance coverage on application, both prior to and during the various medical conditions in the past. If the underwriter information regarding these past conditions, they will need to be underwritten.
 - underwriting process required?
 - not required?
 - investigation process required?
 - apriori review
- A "participating" long-term care policy must provide coverage for
 - care given in the hospital?
 - both institutional care and home care?
 - skilled care only?
 - nursing and residential facilities only
- As specified by the California Insurance Code (CIC), every person must be insured in the person insured on the time of application. Every person is insured in the life or health of all of the following persons EXCEPT
 - their own child?

5 Practice Exams with Answers
PASS ON THE FIRST TRY

Health Insurance Primer Study Guide

Michael Rajnik



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