

PA-Life-Accident-and-Health Brain Dump Free, Reliable PA-Life-Accident-and-Health Study Guide

PSI life, accident, and health Exam Questions with correct Answers

How long after being entitled to disability benefits will an individual be eligible to receive Medicare benefits?

- A. immediately
- B. 1 year
- C. 2 years
- D. At age 65 - ANSWER-2 years

What is the return of premium rider?

- A. an increasing amount of term insurance that always equals the total of premiums paid up to the current point
- B. a provision that allows the insured to cancel the policy in the first two years and have premiums refunded
- C. an increasing amount of term insurance that equals the cash value of the policy at any point in time
- D. a provision that states the insurer must return any premiums paid during the free-look period - ANSWER-an increasing amount of term insurance that always equals the total of premiums paid up to the current point

In a home healthcare benefit, all of the following are eligible expenses EXCEPT

- A. intermittent part-time nursing care;
- B. physical, occupational, or speech therapy;
- C. blood transfusions
- D. medical social services; - ANSWER-blood transfusions

All of the following are classifications of risk EXCEPT

- A. substandard
- B. preferred
- C. declined
- D. non-nicotine - ANSWER-non-nicotine

Which of the following is exempted from the incontestability provision in insurance policies?

- A. fraudulent misstatements
- B. pre-existing conditions
- C. change in health
- D. changes in the insurance code - ANSWER-fraudulent misstatements

A group conversion option may be used in all the following instances EXCEPT

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Insurance Licensing Pennsylvania Life, Accident and Health Exam Sample Questions (Q158-Q163):

NEW QUESTION # 158

Which of the following factors is NOT used to determine if an injury qualifies for Workers' Compensation coverage?

- A. Circumstances of injury.
- B. Severity of injury.
- C. Place of occurrence.
- D. Time of occurrence.

Answer: B

Explanation:

Pennsylvania Workers' Compensation eligibility is determined by whether an injury arose out of and occurred in the course of employment. To establish this connection, several factors are evaluated, including the circumstances of the injury, the time of occurrence, and the place of occurrence. These elements help determine whether the injury is work-related and therefore compensable.

Pennsylvania Workers' Compensation guidelines make it clear that the severity of the injury is not a factor in determining eligibility. Even minor injuries may qualify for coverage if they are work-related, while severe injuries may be denied if they do not arise from employment activities. This reflects the no-fault nature of Workers' Compensation, which focuses on work connection rather than injury magnitude or employee fault.

Insurance licensing study materials approved in Pennsylvania consistently reinforce that Workers' Compensation benefits are triggered by eligibility, not by how serious the injury is. Medical treatment, wage replacement, and disability benefits are provided once eligibility is established, regardless of severity.

Thus, under Pennsylvania Life, Accident, and Health Insurance standards, the correct and verified answer is severity of injury.

NEW QUESTION # 159

The process by which an insurer decides to whom to issue a policy is known as

- A. assignment.
- B. risk classification.
- C. underwriting.
- D. adverse selection.

Answer: C

Explanation:

Under Pennsylvania Life, Accident, and Health Insurance law, underwriting is the formal process by which an insurer evaluates an applicant and decides whether to issue a policy, under what terms, and at what premium rate. This process involves analyzing risk factors such as age, health history, occupation, lifestyle, and financial suitability. Pennsylvania insurance study materials emphasize that underwriting is essential to maintaining the insurer's financial stability and ensuring equitable treatment of policyholders.

Underwriting differs from risk classification, which is the grouping of individuals with similar risk characteristics after underwriting decisions are made. Adverse selection refers to the tendency of higher-risk individuals to seek insurance more actively than lower-risk individuals, which underwriting is designed to prevent. Assignment involves transferring ownership rights of a policy, not evaluating applicants.

Pennsylvania law requires underwriting decisions to be based on lawful and actuarially sound criteria, prohibiting unfair discrimination. Insurers may accept, rate, limit, or decline coverage based on underwriting results. Therefore, the process by which an insurer decides to whom to issue a policy is correctly identified as underwriting.

NEW QUESTION # 160

What are the tax implications of an insured's health insurance costs if the insured is self-employed with an S corporation, has a net profit for the tax year, and is unmarried?

- A. The insured can deduct 70% of all health insurance costs from his gross income.

- B. The insured can deduct 100% of all health insurance costs from his gross income.
- C. The insured can pay for 70% of health insurance costs with pre-tax income.
- D. The insured can pay for 100% of health insurance costs with pre-tax income.

Answer: B

Explanation:

Under Pennsylvania Life and Health Insurance tax principles as taught in licensing education, a self-employed individual who operates through an S corporation, has a net profit for the tax year, and is unmarried may deduct 100% of qualified health insurance premiums from gross income. This deduction is permitted when the insured is not eligible to participate in an employer-sponsored health plan and the business shows a profit.

The deduction applies to premiums paid for medical, dental, and qualified long-term care insurance.

Pennsylvania insurance study guides emphasize that this deduction reduces gross income rather than being taken as an itemized deduction, providing significant tax advantages to self-employed individuals.

The options suggesting 70% deductions or partial pre-tax treatment are outdated and inconsistent with current Pennsylvania licensing materials. The ability to deduct 100% of health insurance costs is a commonly tested concept on Life, Accident, and Health Insurance exams. Therefore, option C is the correct and verified answer.

NEW QUESTION # 161

An insured submits a \$300 claim for medical expenses. The insurer notes that the insured has a past due premium of \$100, and as a result, the insurer only pays \$200. * Which of the following General Policy Provisions covers this situation?

- A. unpaid premium
- B. payment actions
- C. payment of claims
- D. renewability

Answer: A

Explanation:

The situation described falls under the unpaid premium general policy provision as outlined in Pennsylvania Accident and Health Insurance regulations. This provision allows an insurer to deduct any past-due premium from claim payments before issuing benefits to the insured. In the given example, the insured submits a \$300 claim, but because \$100 in premiums is overdue, the insurer lawfully reduces the payment to \$200.

Pennsylvania-approved insurance study guides explain that the unpaid premium provision protects insurers from paying claims when premiums have not been fully maintained, while still honoring coverage in force.

This provision applies only when coverage remains active and the policy has not lapsed.

The other options are incorrect. The payment of claims provision explains how and when claims are paid, not deductions for unpaid premiums. Renewability addresses continuation of coverage. Payment actions is not a recognized general policy provision.

Therefore, unpaid premium is the correct and verified answer according to Pennsylvania Life, Accident, and Health Insurance policy standards.

NEW QUESTION # 162

Which of the following represents a reduced paid-up nonforfeiture option?

- A. The new face amount is the same as the original policy.
- B. The policy will have a decreased face amount
- C. A full share of expense loading must be included in the premium on the reduced coverage.
- D. Further premiums must be paid on the reduced policy.

Answer: B

Explanation:

In Pennsylvania Life Insurance policies, a reduced paid-up nonforfeiture option allows the policyowner to stop paying premiums while maintaining permanent coverage with a reduced face amount. The existing cash value is used to purchase a fully paid-up policy with no future premium requirements.

Under this option, the death benefit is lower than the original policy, but coverage remains in force for the insured's lifetime. This distinguishes it from extended term insurance, which keeps the same face amount but only for a limited period. Pennsylvania-

approved study guides emphasize that reduced paid-up insurance eliminates the need for further premiums. The other answer choices are incorrect. Further premiums are not required, expense loading is not re-applied, and the new face amount is not the same as the original. Therefore, the defining characteristic of reduced paid-up insurance is a decreased face amount, making option B the correct and verified answer according to Pennsylvania Life, Accident, and Health Insurance documentation.

NEW QUESTION # 163

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