

Insurance Licensing InsNV_Health02權威考題和 VCESoft -保證認證成功，簡便的培訓方式



因為Insurance Licensing技術一直在快速發展，所以InsNV Health02認證考試的試題也在不斷變化。因此，VCESoft的考古題也在一直更新。並且，如果你購買了VCESoft的資料，VCESoft將為你提供一年的免費更新服務。只要試題一更新，VCESoft馬上把最新版的資料發送給你。這樣就可以保證你隨時擁有最新版的資料。VCESoft不僅可以幫助你通過考試，還可以幫助你學習最新的知識。这样实惠的资料你千万不要错过。

Insurance Licensing InsNV_Health02 Exam Syllabus Topics:

Section	Objectives
Insurance Basics	- Insurance Contracts • 1. Contract elements • 2. Policy provisions, riders, and exclusions - Risk Management and Insurance Concepts • 1. Insurance principles and contract characteristics • 2. Types of risk and methods of handling risk

Accident and Health Insurance Fundamentals	- Medical Expense Insurance • 1. Major medical plans • 2. Hospital, surgical, and physician expense coverage - Types of Health Insurance Policies • 1. Managed care plans • 2. Group health insurance • 3. Individual health insurance - Disability Income Insurance • 1. Disability definitions and benefits • 2. Elimination periods and benefit periods
Government Health Insurance Programs	- Medicare • 1. Medicare parts and eligibility • 2. Medicare supplement insurance - Medicaid and Other Programs • 1. Medicaid eligibility and coverage
General Insurance Regulation	- Nevada Insurance Department and Regulatory Authority • 1. Commissioner of Insurance powers and duties • 2. Insurance laws, rules, and regulations - Licensing Requirements and Responsibilities • 1. Producer licensing requirements • 2. Continuing education and license maintenance
Health Insurance Policy Provisions	- Claims and Benefits • 1. Claim procedures • 2. Benefit determination and payment - Mandatory and Optional Provisions • 1. Policy requirements and clauses • 2. Renewability provisions
Producer Duties and Ethics	- Sales Practices • 1. Advertising and marketing rules • 2. Unfair trade practices - Ethical Responsibilities • 1. Fiduciary responsibilities • 2. Consumer protection requirements

>> InsNV_Health02權威考題 <<

InsNV_Health02權威考題： NV Accident and Health，最快的通過考試方式是選擇我們

Insurance Licensing的InsNV_Health02考試的考生都知道，Insurance Licensing的InsNV_Health02考試是比較不容易通過

的，但是它又是通往成功的必經之路，所以不得不選擇，為了提通過高你的職業價值，你有權通過測試認證，我們VCESoft設計的考試試題及答案包含不同的針對性，覆蓋面廣，沒有任何其他書籍或者別的資料方式可以超越它，VCESoft絕對是幫助你通過測試的王牌考試試題及答案。經過眾人多人的使用結果證明，VCESoft通過率高達100%，VCESoft是唯一適合你通過考試的方式，選擇了它，等於創建將了一個美好的未來。

最新的 Nevada Insurance InsNV_Health02 免費考試真題 (Q36-Q41):

問題 #36

Which of the following statements is CORRECT about the Medicaid program?

- A. It is supplemented by Medicare for persons 62 years of age or older.
- **B. It provides medical assistance for participants who are blind.**
- C. Participants must be at least 55 years of age.
- D. The program is administered at the federal level.

答案: B

解題說明:

Medicaid is a means-tested public medical assistance program for eligible low-income individuals and families. Eligibility may include persons who are blind, disabled, aged, pregnant, children, or otherwise within an eligible category under federal and state rules. Therefore, choice A is correct. There is no universal minimum age of 55 for Medicaid eligibility; eligibility is based principally on financial and categorical requirements. Medicaid is also not simply a program supplemented by Medicare at age 62. Medicare eligibility is generally associated with age 65 or qualifying disability or disease status, while Medicaid may assist certain eligible persons with limited income and resources, including some Medicare beneficiaries.

Medicaid is jointly financed by federal and state governments but is administered by the states within federal standards. In Nevada, the state administers the program through its designated health and human-services structure. Examination questions commonly test the distinction between Medicare as social insurance and Medicaid as needs-based medical assistance. Study Guide

References/Topics: Social Insurance Programs; Medicaid; Federal-State Health Programs.

問題 #37

When a criminal violation of the insurance code has occurred, the Nevada Insurance Commissioner is required to report the violation to the:

- A. State Police
- B. Secretary of State
- C. Lieutenant Governor
- **D. District Attorney**

答案: D

解題說明:

When the Nevada Insurance Commissioner has reason to believe that a person has violated the Insurance Code or another law applicable to insurance operations and criminal prosecution appears appropriate, the Commissioner must provide the relevant information to the appropriate district attorney or to the Attorney General. Of the choices given, District Attorney is the correct answer.

The Commissioner administers and enforces Nevada insurance laws, investigates potential violations, conducts examinations, and may impose administrative sanctions where authorized. Criminal prosecution, however, is handled by the appropriate prosecutorial authority rather than by the Commissioner personally.

This division of responsibility preserves due process and ensures that criminal cases are evaluated and prosecuted by officials with criminal-law authority.

The Secretary of State, Lieutenant Governor, and State Police may have governmental roles that occasionally relate to business records, executive functions, or investigations, but they are not the statutory prosecutorial recipients identified in Nevada's insurance law. The examination point is that an insurance violation can produce both administrative consequences, such as a fine or license action, and criminal referral when the conduct warrants prosecution.

Study Guide references/topics: powers and duties of the Commissioner; insurance-code enforcement; criminal violations; NRS 679B.150 .

問題 #38

Which of the following information is included in the Consideration clause in an Accident and Health policy?

- A. Explanation of the Contestable periods
- B. Duration of the Grace Period
- **C. Schedule and amount of premium payments**
- D. Description of the coverage provided

答案： C

問題 #39

In a cross-purchase buy-sell agreement funded by life insurance, who typically owns the policy on each business owner?

- A. The producer owns the policy until death occurs.
- B. The business entity owns every policy.
- **C. Each owner owns policies on the other owners.**
- D. The insured owner's children own the policy.

答案： C

解題說明：

In a cross-purchase buy-sell agreement, each business owner purchases, owns, and is beneficiary of life insurance on the other owner or owners. If one owner dies, the surviving owner receives the policy proceeds and uses them to purchase the deceased owner's business interest from the estate or designated successor. The arrangement provides liquidity and a predetermined method for transferring ownership, helping the business continue without forcing a sale of assets or requiring the surviving owner to obtain financing at a difficult time.

An entity-purchase agreement differs because the business itself owns policies on each owner and uses the proceeds to redeem the deceased owner's interest. The number of policies can be an important distinction.

With two owners, a cross-purchase arrangement usually requires two policies. With several owners, each may need policies on all other owners, which can become administratively complex.

The agreement should be drafted and reviewed by qualified legal and tax professionals. The insurance policy alone does not create the buy-sell obligation; the written agreement establishes the purchase terms, valuation method, triggering events, and funding mechanism. The producer's role is to help identify appropriate funding, not to draft legal agreements.

References/topics from the Study Guide: Buy-Sell Agreements; Cross-Purchase Plans; Entity-Purchase Plans; Business Continuation; Life Insurance Funding.

問題 #40

Group coverage for a handicapped dependent child may be continued if the primary insured submits the required proof to the insurance company within what MAXIMUM period of time after the child reaches the limiting age?

- A. 30 days
- B. 15 days
- **C. 31 days**
- D. 45 days

答案： C

解題說明：

A group health policy that terminates dependent-child coverage at a stated limiting age must continue coverage for an eligible dependent child who remains incapable of self-sustaining employment because of a qualifying disability and who remains dependent on the insured group member for support and maintenance.

To preserve that continuation right, the required proof must be furnished within 31 days after the child reaches the policy's limiting age.

This is a time-sensitive protection. The purpose is to prevent automatic termination of coverage solely because a dependent reaches the normal age limit when the child remains disabled and financially dependent.

After initial proof is provided, the insurer may require continuing proof of incapacity and dependency, but it may not demand that proof more often than permitted by law.

The 31-day rule should be distinguished from notice periods for newborn coverage, conversion rights, premium grace periods, and claim notices. Each insurance provision may use a different time period, so examination questions often test the exact statutory deadline.

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