

# Valid and Reliable Ok-Life-Accident-and-Health-or-Sickness-Producer Exam Questions [2026]

## PSI: LIFE, ACCIDENT, AND HEALTH PRACTICE EXAM / Exam / Actual Questions & Certified Solutions 2025/2026.

Under the misstatement of age or gender provision, what happens if it is determined a death that the insured's age or gender was misstated on a life insurance policy application? - CORRECT ANSWER- Benefits are adjusted to an amount that the premium would have purchased at the correct age or gender.

Which of the following must be given to the insurer within 20 days after occurrence or commencement of any loss covered by the policy, or as thereafter as is reasonably possible? - CORRECT ANSWER- Notice of claim.

When will a policy pay on a UCR basis? - CORRECT ANSWER- When particular benefits are not listed on a payment schedule.

All of the following are non-forfeiture options EXCEPT - CORRECT ANSWER- Cash dividend option.

What happens when the lifetime maximum benefit limit has been reached? - CORRECT ANSWER- The insured will pay all of the remaining medical costs for as long as the policy is in force.

Whose responsibility is it to make sure that the company is notified of a death claim at the earliest possible opportunity (in most cases)? - CORRECT ANSWER- The producer.

What is the waiver of premium provision? - CORRECT ANSWER- In a long term care contract, the premium is waived after the insured has been confined for a specific period of time.

All of the following are common exclusions from loss found in disability income policies EXCEPT for that incurred while? - CORRECT ANSWER- Committing a misdemeanor

Which is a disadvantage to a flexible premium annuity? - CORRECT ANSWER- The actual amount of the annuity benefit cannot be determined in advance.

What does coinsurance mean? - CORRECT ANSWER- The insurer and the insured share expenses over the deductible.

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## Insurance Licensing Oklahoma Life, Accident, and Health or Sickness Producer Exam Sample Questions (Q51-Q56):

### NEW QUESTION # 51

Which one of the following types of benefits is often excluded from coverage under an HMO plan?

- A. Out-of-area emergency services.
- **B. Adult routine eye examinations.**
- C. Physical examinations.
- D. In-patient surgeries.

**Answer: B**

Explanation:

Health Maintenance Organizations (HMOs) focus on preventive and essential medical care within a network.

Adult routine eye examinations are often excluded from HMO coverage, as they are considered non-essential or covered under separate vision plans. Other services like emergency care, physical exams, and surgeries are typically covered, as per Oklahoma's managed care regulations (Title 36 O.S. § 652 et seq.).

\* Option A: Incorrect. Out-of-area emergency services are generally covered by HMOs.

\* Option B: Correct. Adult routine eye examinations are often excluded or require separate coverage.

\* Option C: Incorrect. Physical examinations are typically covered as preventive care.

\* Option D: Incorrect. In-patient surgeries are covered as essential medical services.

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Prometric Oklahoma Life, Accident, and Health or Sickness Producer Exam Content Outline (Section: General Knowledge - Health Providers and Products).

Oklahoma Insurance Department, Title 36 O.S. § 652 et seq. (managed care plans).

Standard insurance study guides (e.g., Kaplan, ExamFX) for Oklahoma producer licensing.

### NEW QUESTION # 52

An individual who is NOT acceptable by an insurer at standard rates because of health, habits, or occupation is called a

- A. rating risk.
- **B. substandard risk.**
- C. standard risk.
- D. preferred risk.

**Answer: B**

Explanation:

In insurance underwriting, individuals are classified based on their risk profile. A substandard risk is an applicant who, due to health issues, hazardous habits (e.g., smoking), or high-risk occupations (e.g., stunt performer), cannot be insured at standard rates. These individuals may be offered coverage at higher premiums or with exclusions, as outlined in standard underwriting practices and Oklahoma's regulations (Title 36 O.S. § 1204).

\* Option A: Incorrect. "Rating risk" is not a standard underwriting term.

\* Option B: Incorrect. A standard risk qualifies for standard rates with average risk.

\* Option C: Incorrect. A preferred risk qualifies for lower-than-standard rates due to low risk.

\* Option D: Correct. A substandard risk is not acceptable at standard rates due to higher risk factors.

This question aligns with the Prometric content outline under "Underwriting," which covers risk classification.

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Prometric Oklahoma Life, Accident, and Health or Sickness Producer Exam Content Outline (Section: General Knowledge - Underwriting).

Oklahoma Insurance Department, Title 36 O.S. § 1204 (insurance business conduct).

Standard insurance study guides (e.g., Kaplan, ExamFX) for Oklahoma producer licensing.

### NEW QUESTION # 53

An example of a false financial statement is which one of the following?

- A. An insurance producer mails out hateful postcards about a local insurer.
- **B. An insurance producer posts information about a profitable insurer going bankrupt.**
- C. An insurance producer hands out flyers about another producer's criminal past.
- D. An insurance producer published an untrue newspaper advertisement about another producer.

**Answer: B**

Explanation:

A false financial statement in the context of insurance refers to a misrepresentation of an insurer's financial condition, such as falsely claiming insolvency or bankruptcy, which is prohibited under Oklahoma's Unfair Trade Practices Act (Title 36 O.S. § 1204). This can mislead consumers and harm the insurer's reputation.

Option B directly involves a false claim about an insurer's financial status.

\* Option A: Incorrect. An untrue advertisement about another producer is defamation or misrepresentation, not a financial statement.

\* Option B: Correct. Posting false information about an insurer's bankruptcy is a false financial statement, violating Oklahoma law.

\* Option C: Incorrect. Flyers about a criminal past are defamatory but not related to financial statements.

\* Option D: Incorrect. Hateful postcards are unprofessional but do not constitute a false financial statement.

This question is part of the Prometric content outline under "State Insurance Statutes, Rules, and Regulations," which covers unfair trade practices.

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Prometric Oklahoma Life, Accident, and Health or Sickness Producer Exam Content Outline (Section: State- Specific Knowledge - Oklahoma Insurance Statutes).

Oklahoma Insurance Department, Title 36 O.S. § 1204 (unfair trade practices).

Standard insurance study guides (e.g., Kaplan, ExamFX) for Oklahoma producer licensing.

### NEW QUESTION # 54

In Oklahoma, a foreign insurer is one formed under the laws of

- A. a country other than the United States.
- **B. another state or government of the United States.**
- C. Oklahoma.
- D. Oklahoma or under the laws of a state geographically bordering Oklahoma.

**Answer: B**

Explanation:

In Oklahoma's Insurance Code (Title 36 O.S. § 105), a foreign insurer is defined as an insurance company formed under the laws of another U.S. state or territory. This distinguishes it from a domestic insurer (formed in Oklahoma) and an alien insurer (formed in a foreign country).

\* Option A: Incorrect. An insurer formed in Oklahoma is a domestic insurer.

\* Option B: Incorrect. An insurer from a foreign country is an alien insurer.

\* Option C: Correct. A foreign insurer is formed under the laws of another U.S. state or government.

\* Option D: Incorrect. Geographic proximity is irrelevant; the definition is based on legal formation.

This question aligns with the Prometric content outline under "State Insurance Statutes, Rules, and Regulations," which covers insurer classifications.

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Prometric Oklahoma Life, Accident, and Health or Sickness Producer Exam Content Outline (Section: State- Specific Knowledge - Oklahoma Insurance Statutes).

Oklahoma Insurance Department, Title 36 O.S. § 105 (definitions of insurers).

Standard insurance study guides (e.g., Kaplan, ExamFX) for Oklahoma producer licensing.

### NEW QUESTION # 55

Modified whole life policies are distinguished by premiums that are

- A. higher than typical whole life premiums during the initial years and then lower thereafter.

- B. lower than typical whole life premiums during the last few years.
- **C. lower than typical whole life premiums during the initial years and then higher thereafter.**
- D. higher than typical whole life premiums during the last few years.

**Answer: C**

Explanation:

A modified whole life policy features premiums that are lower than typical whole life premiums during the initial years (e.g., first 3-5 years) to make the policy more affordable early on, then higher thereafter to compensate for the initial discount while maintaining lifelong coverage. This is a variation of whole life insurance, as defined in Oklahoma's regulations (Title 36 O.S. § 4002).

\* Option A: Incorrect. Premiums do not decrease in the last few years; they increase after the initial period.

\* Option B: Incorrect. Premiums are not higher in the last few years compared to typical whole life; they adjust after the initial period.

\* Option C: Correct. Premiums are lower initially and higher thereafter.

\* Option D: Incorrect. Premiums are not higher initially and lower later; the opposite is true.

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Prometric Oklahoma Life, Accident, and Health or Sickness Producer Exam Content Outline (Section: General Knowledge - Life Insurance).

Oklahoma Insurance Department, Title 36 O.S. § 4002 (life insurance products).

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## NEW QUESTION # 56

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