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## **Virginia Insurance Virginia Life, Annuities, and Health Insurance Examination Series 11-01 Sample Questions (Q32-Q37):**

### NEW QUESTION # 32

For an AD&D policy with an irrevocable beneficiary designation, a change in the beneficiary can ONLY be made:

- A. At the time of policy renewal
- B. When an absolute assignment is attached to the policy
- C. Upon the death of the current beneficiary
- D. With the consent of both the policyowner and the beneficiary

**Answer: C**

Explanation:

Detailed Answer in Step-by-Step Solution:

\* An irrevocable beneficiary has a vested interest, and the policyowner cannot change the designation without their consent unless the beneficiary dies (C), at which point the owner regains control.

\* Option A (renewal) and B (assignment) don't override irrevocability. Option D (consent) is true for living beneficiaries, but "ONLY" restricts it to death in this context.

The Virginia study guide notes that an irrevocable beneficiary's rights persist until death, after which the policyowner can freely change the designation. Reference: Virginia Life, Annuities, and Health Insurance study guide, section on "Beneficiary Designations."

### NEW QUESTION # 33

When the employer pays the premium, covered individuals normally receive tax-free benefits under all of the following group health plans EXCEPT:

- A. Major medical
- B. Disability income
- C. Dental
- D. Health maintenance organization

**Answer: B**

Explanation:

Detailed Answer in Step-by-Step Solution:

\* Employer-paid premiums for group health plans like major medical (B), dental (C), and HMOs (D) result in tax-free benefits under IRC Section 106.

\* Disability income (A) benefits are taxable if the employer pays the premium, per IRS rules, unlike medical benefits.

The Virginia study guide, aligned with IRS regulations, notes that employer-funded disability income benefits are taxable to the recipient, while medical, dental, and HMO benefits remain tax-free. Reference: Virginia Life, Annuities, and Health Insurance study guide, section on "Taxation of Insurance Benefits."

### NEW QUESTION # 34

The entire contract clause in a life insurance policy states that the complete contract between the insurer and the policyowner usually consists of the policy and the:

- A. Attached application
- B. Waiver of premium rider
- C. Declaration page
- D. Conditional premium receipt

**Answer: A**

Explanation:

Detailed Answer in Step-by-Step Solution:

\* The entire contract clause includes the policy and the attached application (B), ensuring all terms and representations are part of the agreement.

\* The premium receipt (A) is temporary, the waiver rider (C) is optional, and the declaration page (D) is part of the policy, not separate.

The Virginia study guide states that the entire contract provision encompasses the policy and attached application, defining the full legal agreement. Reference: Virginia Life, Annuities, and Health Insurance study guide, section on "Life Insurance Policy Provisions."

### NEW QUESTION # 35

An individual or business entity conducting business under an assumed or fictitious name must notify the Bureau of Insurance either at the time the license application is filed or:

- A. Within 30 calendar days from the date the name is adopted
- B. 30 days before the assumed name is no longer being used
- C. At the time of license renewal
- D. Within 60 calendar days from when the first policy is sold under the assumed name

**Answer: A**

Explanation:

Virginia Code § 38.2-1820 requires licensees (agents, agencies, or other entities) operating under an assumed or fictitious name to register that name with the Bureau of Insurance. This ensures transparency and consumer protection by linking all business names to the licensed entity. The statute specifies notification either at the time of license application or within 30 calendar days after adopting the assumed name, making option A correct. This timeline allows the Bureau to update records promptly without undue delay. Option B (60 days from first policy sale) introduces an unrelated trigger-policy sales-and extends the period beyond Virginia's requirement, making it incorrect. Option C (license renewal) delays notification unnecessarily, as renewals occur biennially (Virginia Code § 38.2-1822), conflicting with the need for timely registration. Option D (30 days before discontinuing the name) is illogical; notification is required when adopting, not abandoning, a name. The study guide likely stresses this 30-day rule to ensure compliance with Virginia's licensing oversight, reinforcing A as the precise answer based on regulatory intent and practice.

### NEW QUESTION # 36

Which of the following is required to hold an appointment with the insurance company it represents?

- A. An employee of the insurer
- B. An agent
- C. An insured
- D. A consultant

**Answer: B**

Explanation:

Virginia Code § 38.2-1833 defines an "appointment" as a formal authorization by an insurer for a licensed agent to act on its behalf in transacting insurance. An insured (option A) is the policyholder or beneficiary and has no role in representing the insurer. An employee of the insurer (option B) may work internally but isn't automatically appointed to sell insurance unless they hold an agent's license and an appointment, which isn't implied here. A consultant (option C), under Virginia Code § 38.2-1837, advises on insurance but doesn't transact it unless also licensed and appointed as an agent, making this a less direct fit. Only an agent (option D), licensed under Virginia Code § 38.2-1819 and appointed per § 38.2-1833, is required to hold an appointment to represent an insurer. The study guide emphasizes that appointments link licensed agents to specific insurers, solidifying D as the correct choice.

### NEW QUESTION # 37

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