

Pass Guaranteed Quiz 2026 Insurance Licensing Professional Latest NY-Life-Accident-and-Health Test Materials

NYS Life, accident, and health insurance Exam Questions with Answers 2024

Which type of life insurance policy is best suited for paying off the outstanding balance of a 30-year mortgage in the event of the insured's death?

- ✓ 30-year decreasing term.

How many days notice does the ACA require insurers to give before rescinding coverage?

- ✓ 30

A signed good health statement may be requested by a life producer at the time of

- ✓ Policy Delivery

Carol purchases a whole life policy that provides a choice of dividend options. This policy is required to include a statement that the dividends are

- ✓ Not Guaranteed

Tim is confined to a nursing home but doesn't have a terminal illness. Which life insurance rider is designed to help pay for this type of expense?

- ✓ Long-term care benefit rider

An insured is covered under a group long-term disability policy. Under this type of policy, the definition of disability based on any occupation typically applies

- ✓ After two years of disability

Sylvia purchased an annuity for \$100,000 from the proceeds of an inheritance. No further payments are permitted and the income stream begins in 15 years. This contract is a(n)

- ✓ Single premium deferred annuity

Which of these is NOT a factor that influences group health insurance underwriting?

- ✓ Physical exams of group members

What is the grace period required for an individual accident and health insurance policy with monthly premiums?

- ✓ 10 days

In regards to technology and the ACA, which of the following statements is correct?

- ✓ States which operate with an Exchange must offer an internet-based portal

Insurable interest involves what assumption?

- ✓ One person benefits from another person's continued life

The modern Insurance Licensing world is changing its dynamics at a fast pace. To stay and compete in this challenging market, you have to learn and enhance your in-demand skills. Fortunately, with the New York Life, Accident and Health Insurance Agent/Broker Examination Series 17-55 (NY-Life-Accident-and-Health) certification exam you can do this job nicely and quickly. To do this you just need to enroll in the New York Life, Accident and Health Insurance Agent/Broker Examination Series 17-55 (NY-Life-Accident-and-Health) certification exam and put all your efforts to pass the New York Life, Accident and Health Insurance Agent/Broker Examination Series 17-55 (NY-Life-Accident-and-Health) certification exam.

You can get a sense of the actual NY-Life-Accident-and-Health exam by attempting our NY-Life-Accident-and-Health practice tests. Desktop and web-based practice exams are identical to the real NY-Life-Accident-and-Health exam and simulate the NY-Life-Accident-and-Health exam environment. Practice exams (desktop and web-based) of can be customized according to your needs. One benefit of taking NY-Life-Accident-and-Health Practice Tests multiple times is that it enables you to concentrate on your weak areas.

>> Latest NY-Life-Accident-and-Health Test Materials <<

Pass Guaranteed Quiz NY-Life-Accident-and-Health - New York Life, Accident and Health Insurance Agent/Broker Examination Series 17-55 Newest Latest Test Materials

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Insurance Licensing New York Life, Accident and Health Insurance Agent/Broker Examination Series 17-55 Sample Questions (Q68-Q73):

NEW QUESTION # 68

Who would NOT be covered under an additional insured rider attached to a life insurance policy?

- A. Minor children.
- B. Dependent parents.
- C. A spouse.
- **D. Employees.**

Answer: D

Explanation:

The correct answer is Employees . An additional insured rider on a life insurance policy is generally used to extend coverage to certain family members of the primary insured, rather than to unrelated business associates or workers. In standard life insurance practice, these riders commonly apply to persons who have a close family relationship with the insured, such as a spouse , minor children , and in some cases other qualifying dependents . The purpose is to provide limited additional life insurance protection under one policy for members of the insured's household or dependent family unit.

Employees do not fall within the normal scope of an additional insured rider on an individual life insurance policy. Coverage for employees is ordinarily handled through group life insurance , employer-sponsored plans

, or separate business-related insurance arrangements, not through a family rider attached to a personal life insurance contract.

This question tests the distinction between family-type dependent coverage and employment-related coverage

. Since a spouse, minor children, and dependent parents may be considered dependents for rider purposes, the choice that would not be covered under this rider is employees .

NEW QUESTION # 69

For three weeks next month a company ' s employees will choose to enroll or remain enrolled in their HMO or change health plans. What is this situation called?

- A. coverage authorization period
- B. employer sponsored health plan
- C. annual gatekeeper enrollment
- **D. annual open enrollment**

Answer: D

Explanation:

The correct answer is annual open enrollment . In accident and health insurance, open enrollment is the designated period during which eligible employees may enroll in a health plan, remain in their current plan, or switch to another available plan option , such as changing from one HMO or managed care arrangement to another health plan offered by the employer. This enrollment window is generally provided once each year, which is why it is called annual open enrollment.

This period is important because outside of open enrollment, employees are usually allowed to make changes only if they experience a qualifying life event , such as marriage, divorce, birth of a child, or loss of other coverage. During annual open enrollment, employees review benefits, costs, provider networks, and coverage features before selecting the plan that best fits their needs for the upcoming coverage period.

The other options are incorrect because "annual gatekeeper enrollment" and "coverage authorization period" are not standard insurance terms for selecting or changing plans, and "employer sponsored health plan" refers to the type of coverage arrangement itself, not the election period. Therefore, annual open enrollment is the correct term.

NEW QUESTION # 70

Under the Affordable Care Act, an insurer may place dollar limits on coverage for

- A. mental health services.
- B. maternity and newborn care.
- **C. routine adult dental services.**
- D. laboratory services.

Answer: C

Explanation:

The correct answer is D. routine adult dental services. The Affordable Care Act (ACA) prohibits health insurers from placing lifetime or annual dollar limits on coverage for Essential Health Benefits (EHBs) .

These essential health benefits include services such as laboratory services, mental health and substance use disorder services, and maternity and newborn care . Because these categories are designated as essential health benefits, insurers are not allowed to impose annual or lifetime dollar caps on them under ACA- compliant health plans.

However, routine adult dental services are not included in the ACA's list of essential health benefits . While pediatric dental services are included as an essential health benefit category, routine dental coverage for adults is generally offered as an optional or separate benefit. Because it is not classified as an essential health benefit under the ACA, insurers may legally apply dollar limits or other coverage limitations to routine adult dental services depending on the policy design.

Therefore, under ACA regulations applicable to health insurance policies and marketplace plans beginning in

2014, dollar limits are prohibited for essential health benefits but may still apply to non-essential benefits , such as routine adult dental care .

NEW QUESTION # 71

Clark will be doing business as an agent. When MUST he be appointed by the insurer?

- A. Within 15 days of submitting his license application.
- B. At the time the license application is submitted.
- **C. Within 15 days of signing the agency contract.**
- D. Within 20 days after commissions have been paid.

Answer: C

NEW QUESTION # 72

The difference between the face value of a life insurance policy and its cash value is the

- **A. net amount.**
- B. market value.
- C. term value.
- D. assumed amount.

Answer: A

Explanation:

The correct answer is C. net amount. In life insurance, the difference between a policy's face amount and its cash value is commonly referred to in licensing terminology as the net amount at risk , and exam questions often shorten that phrase to net amount . This represents the portion of the death benefit the insurer is actually risking at a given time because the cash value already belongs to the policyowner and offsets part of the insurer's exposure. As cash value increases over the life of a permanent policy, the insurer's net amount at risk generally decreases. NAIC life insurance regulatory material describes the amount subtracted from the policy's face value to determine the net amount at risk , which is consistent with this concept. (NAIC) The other options are not correct insurance terms for this relationship. Market value applies more to investments or securities. Assumed amount is not the standard term used in life insurance contract analysis.

Term value is also incorrect because term insurance generally does not build cash value. Therefore, the recognized answer is net amount , meaning the policy's net amount at risk . (NAIC)

NEW QUESTION # 73

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