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## Virginia Insurance Virginia-Life-Annuities-and-Health-Insurance Exam Certification | Virginia-Life-Annuities-and-Health-Insurance Test Braindumps

Virginia Life, Annuities, and Health Insurance Examination Series 11-01 (Virginia-Life-Annuities-and-Health-Insurance) exam dumps offers are categorized into several categories, so you can find the one that's right for you. Virginia-Life-Annuities-and-Health-Insurance practice exam software uses the same testing method as the real Virginia-Life-Annuities-and-Health-Insurance exam. With Virginia-Life-Annuities-and-Health-Insurance exam questions, you can prepare for your Virginia Life, Annuities, and Health Insurance Examination Series 11-01 (Virginia-Life-Annuities-and-Health-Insurance) certification exam. Job proficiency can be evaluated through Virginia-Life-Annuities-and-Health-Insurance Exam Dumps that include questions that relate to a company's ideal personnel. These Virginia Insurance Virginia-Life-Annuities-and-Health-Insurance practice test feature questions similar to conventional scenarios, making scoring questions especially applicable for entry-level recruits and mid-level executives.

## Virginia Insurance Virginia Life, Annuities, and Health Insurance Examination Series 11-01 Sample Questions (Q104-Q109):

### NEW QUESTION # 104

Under Virginia standards for marketing long-term care coverage, all of these are prohibited sales practices EXCEPT:

- A. High pressure tactics
- B. Replacing existing coverage
- C. Cold lead advertising
- D. Twisting

**Answer: C**

Explanation:

Virginia Code § 38.2-5207 and 14VAC5-200-185 outline marketing standards for long-term care (LTC) insurance to protect consumers. Option A (twisting)-misrepresenting a policy to induce replacement-is prohibited as an unfair practice (Virginia Code § 38.2-502). Option C (high pressure tactics)-aggressive sales forcing quick decisions-violates ethical standards and is banned (14VAC5-200-40). Option B (replacing existing coverage) is incorrect as stated; replacement itself isn't prohibited but requires disclosure via a replacement notice (14VAC5-200-75), making it regulated, not banned outright-however, the question implies unauthorized or deceptive replacement, which is prohibited. Option D (cold lead advertising)- soliciting via broad, unsolicited leads (e.g., mailers)-is permitted if it complies with disclosure rules and isn't deceptive (14VAC5-200-50). The study guide likely lists twisting and high pressure as unethical, with examples like misstating benefits, while allowing cold lead ads with proper labeling (e.g., "advertisement"), making D the exception.

### NEW QUESTION # 105

In long-term care insurance, the guarantee of insurability option provides the insured with the ability to:

- A. Replace the policy at any time with one from a different insurer
- B. Extend coverage under the policy for the insured's lifetime
- C. Keep the same premium for the entire contract period
- D. Purchase additional insurance at a later date

**Answer: D**

Explanation:

Virginia Code § 38.2-5202 allows a guaranteed insurability option in LTC insurance, letting the insured buy additional coverage later (option A) without proving insurability, typically at set intervals or life events (e.g., inflation adjustment). Option B (replace with another insurer) isn't a policy feature; it's a market action.

Option C (lifetime extension) confuses with benefit periods, not insurability. Option D (fixed premium) relates to non-cancelable policies, not this rider. The study guide likely describes this with examples-e.g., adding \$1,000 monthly benefit at age 70-emphasizing future flexibility, making A the correct ability.

### NEW QUESTION # 106

On an application for individual health insurance, all of the following are typically included on the agent's report EXCEPT:

- A. Applicant's signature
- B. Agent's relationship to the applicant
- C. Applicant's financial status
- D. Applicant's general character

**Answer: A**

Explanation:

Detailed Answer in Step-by-Step Solution:

\* The agent's report includes the agent's observations, such as relationship to the applicant (A), financial status (B), and general character (C), to aid underwriting.

\* The applicant's signature (D) is on the application itself, not the agent's separate report.

The Virginia study guide specifies that the agent's report supplements the application with the agent's insights, while the applicant signs the main application, not the report. Reference: Virginia Life, Annuities, and Health Insurance study guide, section on "Application Process."

### NEW QUESTION # 107

A licensee must report an administrative action taken by another state or governmental agency to the Bureau of Insurance within how many calendar days after final disposition?

- A. 10 days
- **B. 30 days**
- C. 45 days
- D. 20 days

**Answer: B**

Explanation:

Virginia Code § 38.2-1826(C) mandates that licensees (agents, brokers, etc.) report administrative actions- such as license revocation or fines by another state or agency- to the Bureau of Insurance within 30 calendar days of the final disposition. "Final disposition" means the conclusion of the action (e.g., final order or settlement). This requirement ensures Virginia regulators can assess the licensee's fitness to hold a license and protect consumers. Option C (30 days) matches this statutory timeline precisely. Option A (10 days) is too short and not supported by Virginia law. Option B (20 days) lacks a basis in the Code or study materials. Option D (45 days) exceeds the mandated period, risking delayed oversight. The study guide likely emphasizes this 30-day rule as a critical compliance deadline, reinforced by Virginia's alignment with NAIC standards for licensee reporting, making C the definitive answer.

### NEW QUESTION # 108

Preferred provider organizations (PPOs) encourage patients to use specified hospitals by:

- A. Making public service announcements
- **B. Offering greater coinsurance percentages**
- C. Extending days of hospitalization coverage
- D. Offering outpatient diagnostic coverage

**Answer: B**

Explanation:

Detailed Answer in Step-by-Step Solution:

\* PPOs incentivize use of in-network providers (e.g., specified hospitals) by offering higher coinsurance percentages (D), meaning the insurer pays a larger share of costs (e.g., 80% vs. 60% out-of-network).

\* Option A (announcements) is not a direct incentive.

\* Option B (diagnostic coverage) applies broadly, not specifically to in-network use.

\* Option C (extending hospital days) is not a typical PPO feature.

The Virginia study guide notes that PPOs encourage in-network use through financial incentives like higher coinsurance or lower out-of-pocket costs, distinguishing them from HMOs. Reference: Virginia Life, Annuities, and Health Insurance study guide, section on "Managed Care Plans."

### NEW QUESTION # 109

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