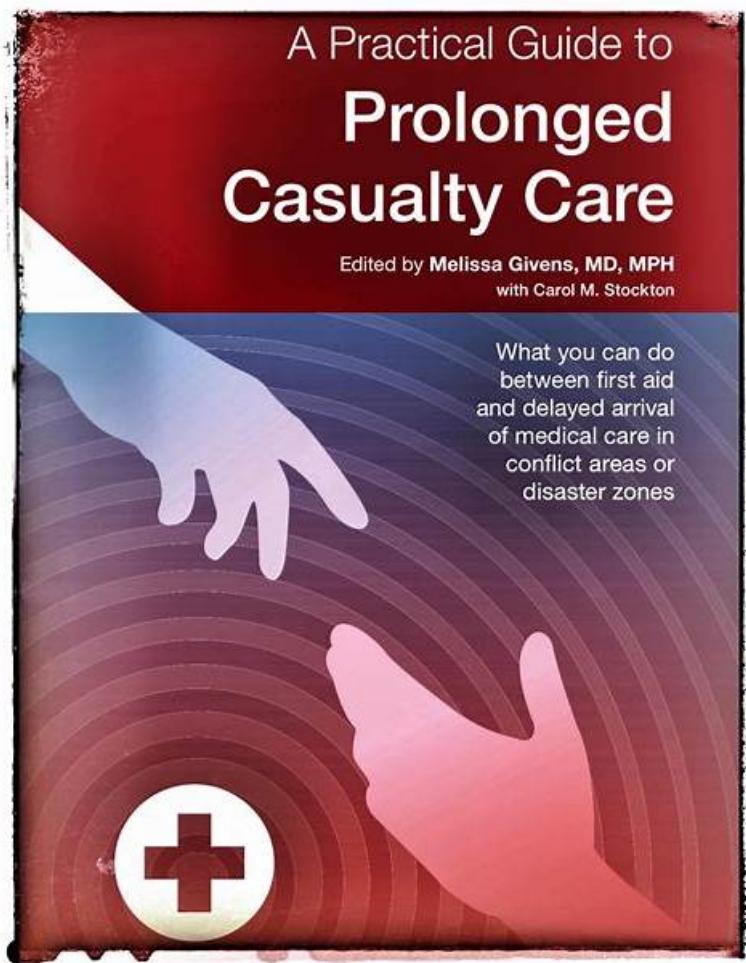


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Insurance Licensing Pennsylvania Life, Accident and Health Exam Sample Questions (Q114-Q119):

NEW QUESTION # 114

[I Intentionally withholding information that should be provided to an insurer is known as

- A. concealment.
- B. misrepresentation.
- C. estoppel
- D. twisting.

Answer: A

Explanation:

In Pennsylvania Life, Accident, and Health Insurance law, concealment is defined as the intentional withholding of material information that should be disclosed to an insurer during the application process.

Insurance contracts are based on the principle of utmost good faith, meaning both parties are expected to provide complete and accurate information.

Concealment occurs when an applicant knowingly fails to disclose facts that would affect the insurer's underwriting decision, such as medical history, hazardous occupations, or lifestyle risks. Unlike innocent mistakes, concealment involves deliberate omission and can materially affect the insurer's risk assessment.

The other options are incorrect under Pennsylvania insurance definitions. Twisting involves replacing a policy with another through misrepresentation. Estoppel prevents an insurer from denying coverage due to prior actions or statements. Misrepresentation refers to providing false statements, while concealment specifically involves withholding information.

If concealment is proven, Pennsylvania law allows the insurer to void the policy or deny claims, even after issuance. Therefore, intentionally withholding information that should be provided to an insurer is correctly identified as concealment.

NEW QUESTION # 115

The levels of coverage defined in the Affordable Care Act are

- A. HMO, EPO, POS, and PPO.
- B. Bronze, Silver, Gold, and Platinum
- C. Child Only, Limited Benefit Plan, Catastrophic, and Major Medical
- D. Individual, Parent-Child, Spousal, and Family.

Answer: B

Explanation:

Under the Affordable Care Act (ACA), which is fully incorporated into Pennsylvania Accident and Health Insurance standards, health insurance plans sold in the individual and small group markets are categorized into four standardized metal levels: Bronze, Silver, Gold, and Platinum. These levels do not describe the quality of care but rather the actuarial value, or the percentage of total average healthcare costs the plan is expected to cover.

Bronze plans typically cover approximately 60% of healthcare expenses and have lower premiums but higher out-of-pocket costs. Silver plans cover about 70% and are particularly significant because cost-sharing reductions apply only to Silver-level plans for eligible individuals. Gold plans cover approximately 80% of costs, while Platinum plans cover about 90%, offering lower deductibles and copayments but higher premiums.

Pennsylvania insurance study guides emphasize that these metal tiers allow consumers to compare plans more easily based on cost-sharing responsibility. The remaining answer choices describe family status classifications, types of managed care plans, or unrelated benefit structures, none of which define ACA coverage levels. Therefore, Bronze, Silver, Gold, and Platinum is the correct and verified answer.

NEW QUESTION # 116

Medicare Part B pays what percent of approved charges for physician and surgeon services?

- A. 0
- B. 1
- C. 2
- D. 3

Answer: C

Explanation:

Medicare Part B covers physician services, outpatient care, preventive services, and certain medical supplies.

According to Pennsylvania Life and Health Insurance licensing materials, Medicare Part B pays 80% of Medicare-approved charges for covered physician and surgeon services after the insured meets the annual deductible.

The remaining 20% is the responsibility of the beneficiary and is commonly referred to as coinsurance. Many Medicare beneficiaries purchase Medicare Supplement (Medigap) policies to help cover this coinsurance and other out-of-pocket costs.

The other answer choices are incorrect percentages and do not align with Medicare benefit standards tested on the Pennsylvania insurance licensing exam. Therefore, the correct and verified answer is B. 80.

NEW QUESTION # 117

The type of annuity in which all payments cease upon the death of an annuitant is referred to as a

- A. equity annuity.
- B. variable annuity.
- C. terminal annuity.
- D. **life annuity.**

Answer: D

Explanation:

A life annuity is the type of annuity in which all payments cease upon the death of the annuitant. Under Pennsylvania annuity principles, life annuities are designed to provide income that the annuitant cannot outlive, but they do not guarantee payments beyond the annuitant's lifetime.

Pennsylvania-approved insurance study materials explain that once the annuitant dies, no further payments are made to beneficiaries unless a specific settlement option or rider-such as a period certain or refund provision-was elected. Without such provisions, the insurer retains any remaining value, which is how the longevity risk is managed.

The other options are incorrect. Equity annuities and variable annuities describe investment structures, not payout duration. A terminal annuity is not a recognized annuity classification under Pennsylvania insurance definitions. Therefore, life annuity is the correct and verified answer according to Pennsylvania Life, Accident, and Health Insurance documentation.

NEW QUESTION # 118

Which of the following is a contract that is usually sold by a terminally ill person to an entity that receives death benefits from the policy at the insured's death?

- A. **Speculative**
- B. Physical
- C. Pure
- D. Legal

Answer: A

Explanation:

In Pennsylvania Life Insurance licensing materials, a contract in which a terminally ill insured sells an existing life insurance policy to a third party for a lump sum is known as a viatical settlement. Although the specific term is not listed in the answer choices, Pennsylvania-approved study guides classify viatical settlement contracts as speculative contracts. This classification exists because the purchaser assumes the financial risk associated with the timing of the insured's death and speculates on when the death benefit will be paid.

The buyer becomes the policyowner and beneficiary and continues paying premiums, expecting to receive the death benefit upon the insured's death. The return on investment depends on how long the insured lives, which introduces uncertainty and speculation.

The other options are incorrect. "Pure," "Physical," and "Legal" do not describe the contractual nature of viatical settlements under Pennsylvania insurance terminology. Therefore, based on Pennsylvania Life, Accident, and Health Insurance education standards, the correct and verified answer is D. Speculative.

NEW QUESTION # 119

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