

Top Tips for Stress-Free Insurance Licensing PA-Life-Accident-and-Health Exam Preparation



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Insurance Licensing Pennsylvania Life, Accident and Health Exam Sample Questions (Q134-Q139):

NEW QUESTION # 134

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

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

Answer: A

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 # 135

The two perils in health insurance are accident and

- A. job-related injury.
- B. liability.
- C. loss.
- **D. sickness.**

Answer: D

Explanation:

In Pennsylvania Accident and Health Insurance terminology, the two fundamental perils covered by health insurance policies are accident and sickness. A peril is defined as the cause of a loss, and health insurance is designed to protect against losses resulting from unexpected injuries or illnesses.

Accident coverage addresses bodily injuries caused by accidental means, such as falls or car accidents.

Sickness coverage addresses illnesses or diseases that manifest after the policy becomes effective.

Pennsylvania insurance study guides emphasize that both perils must be present for a policy to qualify as comprehensive accident and health coverage.

The other options listed are incorrect. Loss is the result of a peril, not a peril itself. Job-related injuries are typically covered under workers' compensation, not individual health insurance. Liability is a legal responsibility exposure, not a health insurance peril.

Therefore, the correct and verified answer is sickness, making option B correct.

NEW QUESTION # 136

She has a \$200,000 whole life policy with a \$50,000 cash value. She wishes to borrow \$30,000 for the purchase of a new van. Which of the following is TRUE in this situation?

- A. This type of loan is interest free.
- B. Loans can only be taken for hardship situations.
- C. Whole life policies do not have any loan provisions.
- **D. If the loan is not repaid, the net death will be reduced**

Answer: D

Explanation:

Under Pennsylvania Life Insurance rules, whole life insurance policies allow policyowners to borrow against the cash value of the policy for any purpose, including personal purchases such as a vehicle. In this scenario, the policyowner borrows \$30,000 from a \$50,000 cash value, which is permitted under standard policy loan provisions.

Pennsylvania-approved study materials explain that policy loans are not restricted to hardship situations, are not interest-free, and are a standard feature of whole life policies. Interest accrues on outstanding loan balances, and repayment is optional during the insured's lifetime.

If the loan is not repaid, the outstanding loan balance plus interest is deducted from the death benefit, resulting in a reduced net payout to beneficiaries. Therefore, the original \$200,000 face amount would be decreased by the unpaid loan amount. For these reasons, option D is the correct and verified answer according to Pennsylvania Life, Accident, and Health Insurance documentation.

NEW QUESTION # 137

Written proof of loss must be furnished to the health insurer within how many days after the date of loss?

- A. 45 days.
- B. 30 days.
- C. 15 days.
- **D. 90 days.**

Answer: D

Explanation:

Pennsylvania Health Insurance policies are required to contain specific uniform policy provisions, including the Proof of Loss provision. According to Pennsylvania Accident and Health Insurance standards, written proof of loss must be furnished to the insurer within 90 days after the date of loss.

This provision allows the insurer sufficient time to investigate the claim while protecting the insured's right to benefits. If it is not reasonably possible to submit proof within 90 days, Pennsylvania rules permit submission as soon as reasonably possible, provided it is not later than one year from the required filing date, except in cases of legal incapacity.

The other answer choices-15, 30, and 45 days-do not align with Pennsylvania's mandated policy provisions and are therefore incorrect. This 90-day requirement is a consistent testing point on the Pennsylvania Life, Accident, and Health Insurance exam and reflects long-standing regulatory practice. Thus, 90 days is the correct and verified answer.

NEW QUESTION # 138

Which is NOT subject to exclusion from coverage under long-term care (LTC) policies?

- A. self-inflicted injuries
- B. chemical or alcohol dependency
- C. injuries from War
- **D. organically-based mental illness (e.g., senile dementia)**

Answer: D

Explanation:

Under Pennsylvania Long-Term Care (LTC) Insurance regulations, organically-based mental illnesses, such as senile dementia or Alzheimer's disease, are not subject to exclusion from coverage. Pennsylvania-approved LTC policies must provide benefits for cognitive impairments that arise from organic or physical causes, recognizing these conditions as legitimate medical illnesses requiring long-term care services.

In contrast, LTC policies may exclude coverage for injuries resulting from war, self-inflicted injuries, and chemical or alcohol dependency. These exclusions are clearly permitted under Pennsylvania insurance statutes and are consistently highlighted in LTC policy provisions and licensing study guides. Substance abuse and self-harm are considered behavioral or intentional risks and may be excluded unless required otherwise by law.

Organically-based mental illnesses differ significantly because they involve degenerative brain conditions rather than voluntary behavior. Pennsylvania regulations require LTC policies to address cognitive impairment as a qualifying trigger for benefits, including supervision needs. As a result, organically-based mental illness cannot be excluded and is the correct and verified answer.

NEW QUESTION # 139

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