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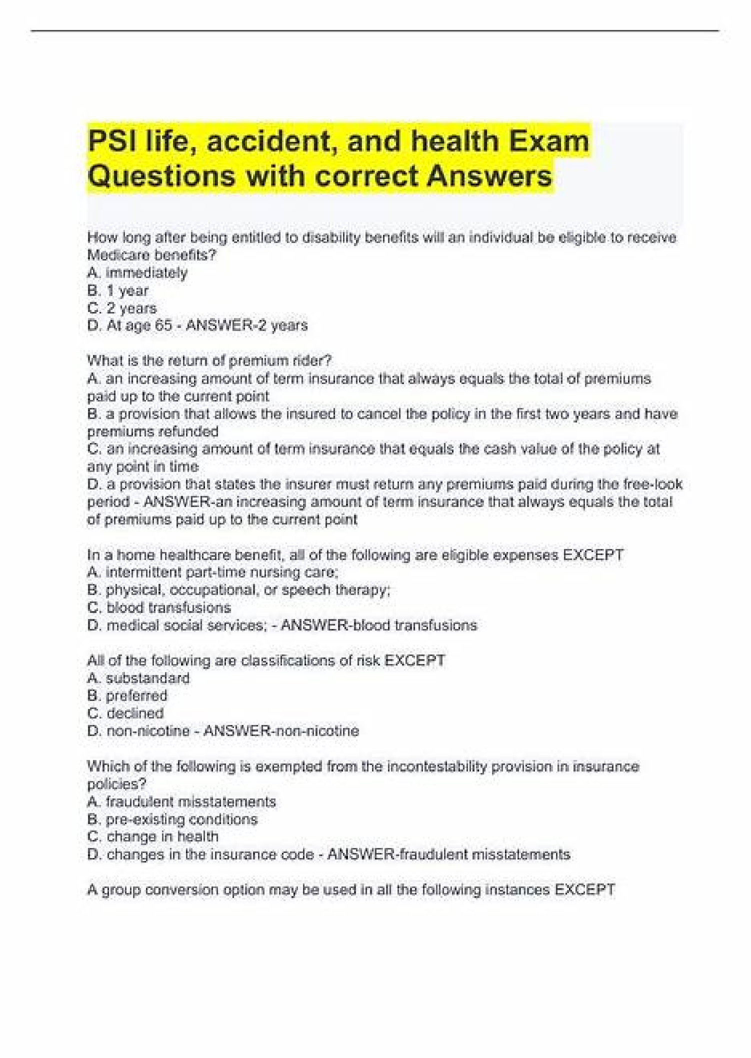

PSI life, accident, and health Exam Questions with correct Answers

How long after being entitled to disability benefits will an individual be eligible to receive Medicare benefits?
A. immediately
B. 1 year
C. 2 years
D. At age 65 - ANSWER-2 years

What is the return of premium rider?
A. an increasing amount of term insurance that always equals the total of premiums paid up to the current point
B. a provision that allows the insured to cancel the policy in the first two years and have premiums refunded
C. an increasing amount of term insurance that equals the cash value of the policy at any point in time
D. a provision that states the insurer must return any premiums paid during the free-look period - ANSWER-an increasing amount of term insurance that always equals the total of premiums paid up to the current point

In a home healthcare benefit, all of the following are eligible expenses EXCEPT
A. intermittent part-time nursing care;
B. physical, occupational, or speech therapy;
C. blood transfusions
D. medical social services; - ANSWER-blood transfusions

All of the following are classifications of risk EXCEPT
A. substandard
B. preferred
C. declined
D. non-nicotine - ANSWER-non-nicotine

Which of the following is exempted from the incontestability provision in insurance policies?
A. fraudulent misstatements
B. pre-existing conditions
C. change in health
D. changes in the insurance code - ANSWER-fraudulent misstatements

A group conversion option may be used in all the following instances EXCEPT

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Insurance Licensing Oklahoma Life, Accident, and Health or Sickness Producer Exam Sample Questions (Q49-Q54):

NEW QUESTION # 49
Benefits required under the child immunization coverage shall NOT be subject to

- A. a prior authorization.
- B. a set immunization schedule.
- C. an annual maximum number of immunizations.
- D. a deductible.

Answer: A

Explanation:
Oklahoma insurance regulations mandate that health insurance policies providing child immunization coverage must not impose certain restrictions that could limit access to these benefits. Specifically, the Oklahoma Insurance Code, Title 36 O.S. § 6060.3, states that "benefits for immunizations required under child immunization coverage shall not be subject to prior authorization requirements." This ensures that children can receive necessary immunizations without delays caused by insurer approval processes. The Oklahoma Life, Accident, and Health or Sickness Producer Study Guide further clarifies, "Child immunization benefits must be provided without prior authorization to promote timely access to preventive care. However, benefits may still follow a recommended immunization schedule or be subject to other policy terms like deductibles, unless otherwise specified." Options A, B, and D are not explicitly prohibited under the law, making option C the correct answer.
References:
Oklahoma Insurance Code, Title 36 O.S. § 6060.3 (Child Immunization Coverage).
Oklahoma Life, Accident, and Health or Sickness Producer Study Guide, Section on Health Insurance Benefits and Mandates.

NEW QUESTION # 50
All of the following describe a whole life policy EXCEPT

- A. premiums are payable until death.
- B. provides coverage for the life of the policyholder.
- C. provides a death benefit only.
- D. a policy of $1,000 minimum.

Answer: D

Explanation:
A whole life insurance policy is a type of permanent life insurance that provides coverage for the insured's entire life, as long as premiums are paid. It typically includes a level premium, a guaranteed death benefit, and a cash value component that accumulates over time. There is no regulatory requirement in Oklahoma or standard insurance practice that mandates a minimum face amount of $1,000 for whole life policies, making this statement incorrect.
* Option A: Correct (as the exception). Whole life policies do not require a $1,000 minimum face amount; insurers set minimums based on their underwriting guidelines, often higher.
* Option B: Incorrect (describes whole life). Whole life provides lifelong coverage, as per its definition.
* Option C: Incorrect (describes whole life). Premiums are typically payable until death or age 100, depending on the policy.
* Option D: Incorrect (describes whole life). While whole life provides a death benefit, it also accumulates cash value, but the phrasing "death benefit only" is misleading as it implies no cash value, which is not the exception here.

This question aligns with the Prometric content outline under "Life Products," which covers the characteristics of whole life insurance.
:
Prometric Oklahoma Life, Accident, and Health or Sickness Producer Exam Content Outline (Section:
General Knowledge - Life Insurance).
Oklahoma Insurance Department, Title 36 O.S. § 4002 (definitions of life insurance products).
Standard insurance study guides (e.g., Kaplan, ExamFX) for Oklahoma producer licensing.

NEW QUESTION # 51
An insured with a major medical policy has a per cause deductible of $100. Over the course of the year, the insured visits the doctor's office three times for injuries. Excluding the premium, what is the MINIMUM amount the insured MUST pay for the year if each visit costs $200?

- A. $200
- B. $500
- C. $100
- D. $300

Answer: D

Explanation:
Aper cause deductiblemeans the insured pays a $100 deductible for each separate medical condition or cause of treatment. The insured visits the doctor three times for injuries, each costing $200. Assuming each visit is for adifferent injury(to calculate the minimum amount, we consider the maximum number of deductibles), the insured pays a $100 deductible per visit (3 visits × $100 = $300). If the policy includes coinsurance (not specified but common in major medical policies), additional costs may apply, but the question asks for the minimum amount, which is the total deductibles for three separate causes.
Calculation:
* Visit 1: $100 deductible (first injury).
* Visit 2: $100 deductible (second injury).
* Visit 3: $100 deductible (third injury).
* Total: $100 × 3 = $300.
If all visits were for the same injury, only one $100 deductible would apply, but the question implies separate causes to reach the minimum of $300.
* Option A: Incorrect. $100 assumes one deductible for a single cause, not three visits.
* Option B: Incorrect. $200 does not account for three separate deductibles.
* Option C: Correct. $300 reflects a $100 deductible for each of three separate injuries.
* Option D: Incorrect. $500 exceeds the minimum, possibly including coinsurance not specified.
:
Prometric Oklahoma Life, Accident, and Health or Sickness Producer Exam Content Outline (Section:
General Knowledge - Accident and Health Insurance).
Oklahoma Insurance Department, Title 36 O.S. § 6060.3 (health insurance policy provisions).
Standard insurance study guides (e.g., Kaplan, ExamFX) for Oklahoma producer licensing.

NEW QUESTION # 52
Term life insurance is more appropriate than whole life insurance when the

- A. policyowner desires an accumulation of cash values.
- B. maximum protection is needed, but the insured cannot afford premium payments for permanent insurance.
- C. insured needs low cost permanent life insurance protection.
- D. policyowner wants to borrow against the life insurance policy values.

Answer: B

Explanation:
Term life insuranceprovides coverage for a specific period (e.g., 10, 20 years) at a lower premium cost than whole life insurance, making it ideal for individuals needing maximum death benefit protection but unable to afford the higher premiums of permanent insurance. Unlike whole life, term life does not accumulate cash value or allow policy loans.
* Option A: Incorrect. Borrowing against policy values requires cash value, available in whole life, not term life.
* Option B: Incorrect. Cash value accumulation is a feature of whole life, not term life.
* Option C: Correct. Term life is appropriate for maximum protection at a lower cost when permanent insurance premiums are

unaffordable.
* Option D: Incorrect. Term life is not permanent insurance; whole life provides permanent coverage.
This question falls under the Prometric content outline section on "Life Products," which covers the suitability of term versus whole life insurance.
:
Prometric Oklahoma Life, Accident, and Health or Sickness Producer Exam Content Outline (Section:
General Knowledge - Life Insurance).
Oklahoma Insurance Department, Title 36 O.S. § 4002 (definitions of life insurance products).
Standard insurance study guides (e.g., Kaplan, ExamFX) for Oklahoma producer licensing.

NEW QUESTION # 53
Oklahoma resident Joe served in the military the past 4 years. When he returned and tried to reinstate his individual health insurance policy, he was denied coverage. His producer stated that because he was covered under a government plan he would be required to be re-underwritten as a new applicant subject to more restrictive coverage and increased premiums. Which of the following is TRUE?

- A. Joe is subject to being re-underwritten in terms of his current health conditions because he cannot be penalized with more restrictive coverage.
- B. Joe cannot be denied reinstatement into his same individual health insurance policy that lapsed as a result of Joe becoming covered by a government-sponsored health plan.
- C. Joe cannot be denied reinstatement in his prior individual health insurance policy unless the federal government denies him coverage based on health conditions unrelated to his military service.
- D. Joe is not required to undergo the initial underwriting process but he cannot be reinstated under his personal plan unless he is free of pre-existing conditions.

Answer: B

Explanation:
Under the federalUniformed Services Employment and Reemployment Rights Act (USERRA)(38 U.S.C.
§ 4317) and Oklahoma's insurance regulations (Title 36 O.S. § 4405), military members whose individual health insurance lapsed due to active duty and coverage under a government-sponsored plan (e.g., TRICARE) are entitled toreinstatementof their prior policy without re-underwriting or new pre-existing condition exclusions, provided they apply within a specified period (typically 120 days) after leaving service. Joe cannot be denied reinstatement due to his military service coverage.
* Option A: Incorrect. Joe is not subject to re-underwriting for reinstatement post-military service.
* Option B: Incorrect. Joe does not need to be free of pre-existing conditions for reinstatement.
* Option C: Correct. Joe cannot be denied reinstatement of his lapsed policy due to government plan coverage.
* Option D: Incorrect. Federal government denial is irrelevant; USERRA protects reinstatement rights.
:
Prometric Oklahoma Life, Accident, and Health or Sickness Producer Exam Content Outline (Section: State- Specific Knowledge - Oklahoma Insurance Statutes).
Oklahoma Insurance Department, Title 36 O.S. § 4405 (health insurance provisions).
USERRA, 38 U.S.C. § 4317 (health plan reinstatement for military service).

NEW QUESTION # 54
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