

Virginia Life, Annuities, and Health Insurance Examination Series 11-01 Exam Simulator - Virginia-Life-Annuities-and-Health-Insurance Free Demo & Virginia-Life-Annuities-and-Health-Insurance Training Pdf

life insurance exam with correct Answers

An individual applied for an insurance policy and paid the initial premium. The insurer issued a conditional receipt. Five days later the applicant and t submit a medical exam. If the policy was issued, what would be the policy's effective date?

- A. The date of policy delivery
- B. The date of the Issue
- C. The date of application
- D. The date of the medical exam** - ANS D. The date of the medical exam

The Federal Fair Credit Reporting Act

- A. Regulates consumer reports**
- B. Protects customer privacy
- C. Regulates telemarketing
- D. Prevents money laundering - ANS A. Regulates consumer reports

Which of the following is NOT the consideration in a policy?

- A. The premium amount paid at the time of application
- B. The promise to pay covered losses
- C. The application given to a prospective insured**
- D. Something of value exchanged between parties - ANS C. The application given to a prospective insured

Something of value exchanged between the insurer and the insured is considered an

- A. Acceptance
- B. Legal capacity
- C. Consideration**
- D. Offer - ANS C. Consideration

The full premium was submitted with the application for life insurance, and the policy was issued two weeks later as requested. When does the policy coverage become effective?

- A. As of the application date**
- B. As of the policy deliver date
- C. As of the first of the month after the policy issue
- D. As of the policy issue date - ANS A. As of the application date

An agent and an applicant for a life insurance policy fill out and sign the application. However, the applicant does not wish to give the agent the initial premium, and no conditional receipt is issued. When will coverage begin?

- A. On the designated effective date
- B. On the application date

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Virginia Insurance Virginia Life, Annuities, and Health Insurance Examination Series 11-01 Sample Questions (Q145-Q150):

NEW QUESTION # 145

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

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

Answer: B

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 # 146

Which benefit is usually excluded from major medical plan coverage?

- A. Surgical expense
- B. Physicians' visits
- **C. Custodial care**
- D. Hospital expense

Answer: C

Explanation:

Virginia Code § 38.2-3500 et seq. governs major medical plans, which cover catastrophic costs like hospital expenses (option A), physicians' visits (option C), and surgical expenses (option D). Option B (custodial care) -non-medical assistance with daily living (e.g., bathing)-is typically excluded, as it's not "medically necessary" under standard definitions (Virginia Code § 38.2-3407.10). The study guide likely lists inclusions (A, C, D) with examples-e.g., \$5,000 for surgery-versus exclusions like custodial care, covered by LTC policies instead, making B the usual exception.

NEW QUESTION # 147

What is the primary role of medical expense and disability insurance?

- A. Payment of death benefits
- B. Payment for rehabilitation costs following a life-threatening injury
- **C. Protection against the costs of medical care and the loss of earning power**
- D. Provision for dismemberment benefits

Answer: C

Explanation:

Detailed Answer in Step-by-Step Solution:

* Medical expense insurance covers healthcare costs, while disability insurance replaces lost income, together protecting against medical costs and earning power loss (B).

* Death benefits (A) are for life insurance. Dismemberment (C) is specific to AD&D. Rehabilitation (D) may be included but isn't primary.

The Virginia study guide defines the core purpose of medical expense and disability insurance as mitigating financial loss from healthcare and income interruption. Reference: Virginia Life, Annuities, and Health Insurance study guide, section on "Health Insurance Basics."

NEW QUESTION # 148

When the business of insurance is no longer conducted under an assumed name, an agent must notify:

- A. The Chamber of Commerce
- B. The Surety Organization of Virginia
- C. The National Association of Insurance Commissioners
- **D. The Bureau of Insurance**

Answer: D

Explanation:

Detailed Answer in Step-by-Step Solution:

* Agents must notify the Virginia Bureau of Insurance (A) of changes like discontinuing an assumed name, as it regulates licensing and business conduct.

* The NAIC (B), Chamber (C), and Surety Organization (D) have no direct authority over this requirement.

The Virginia study guide mandates that agents report significant business changes, including assumed name cessation, to the Bureau of Insurance per state law. Reference: Virginia Life, Annuities, and Health Insurance study guide, section on "Agent Responsibilities."

NEW QUESTION # 149

The designation of a beneficiary by class in a life insurance policy means that:

- A. A primary beneficiary cannot be designated in the policy
- B. The beneficiaries are unrelated to the insured
- **C. Individual beneficiaries are not specified by name**
- D. The policy must be a form of business life insurance

Answer: C

Explanation:

Detailed Answer in Step-by-Step Solution:

* Designating a beneficiary "by class" means identifying a group (e.g., "my children") rather than naming specific individuals (C).

* Option A (business life insurance) is unrelated to class designation.

* Option B (no primary beneficiary) is incorrect; a class can still be primary.

* Option D (unrelated beneficiaries) is not a requirement of class designation.

The Virginia study guide notes that a class designation identifies beneficiaries by a category (e.g., "spouse" or "heirs") rather than specific names, offering flexibility. Reference: Virginia Life, Annuities, and Health Insurance study guide, section on "Beneficiary Designations."

NEW QUESTION # 150

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