Virginia-Life-Annuities-and-Health-Insurance Free Updates - Reliable Virginia-Life-Annuities-and-Health-**Insurance Mock Test**

PRACTICE TEST EXAM INSURANCE 545 QUESTIONS WITH CORRECT ANSWERS 1005% VERIFIED 2023/2024

The fee paid by the insured in exchange for an insurance policy is called a: - Correct

Bobby just purchased an insurance policy for his home from XYZ Insurance. Which of the following would be a reason this policy may not be legally binding?

A. Bobby is only 19 years old.

B. Bobby paid his first premium when he and his agent agreed on a policy, but he is waiting for the policy documents to be prepared so he can sign them.
 C. Bobby has an outstanding warrant for selling marijuana.

D. Bobby has been diagnosed as mentally incompetent. - Correct Answer D. Bobby has been diagnosed as mentally incompetent.

Greg plays trombone in his school band during football games. During a rally song in the stands one day, Greg annoys one of the opposing team's fans, who grabs his \$400 trombone and hurfs it down the bleachers, completely destroying it. Greg's insurance pays him \$400 to replace the trombone, but then the opposing team's coach also offers to replace the instrument, at whatever the cost. So Greg orders a new \$3,200 trombone and has the opposing team's athletic department absorb the cost. Which principle has Greg violated?

A. The principle of indemnity

B. The principal of the opposing team
 C. The principle of consideration
 D. The principle of legal purpose - Correct Answer A. The principle of indemnity

If an adjuster needs to find clarification about what actually constitutes a collision, in which section of an insurance policy would she find that information?

D. Definitions - Correct Answer D. Definitions

Which of the following is NOT a characteristic of insurance contracts?

A. Aleatory B. Universal

C. Conditional

D. Unilateral - Correct Answer B. Universal

In an insurance policy, the summary of what the insurer will do in the event of a covered

A. the dec page B, the conditions section

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Virginia Insurance Virginia Life, Annuities, and Health Insurance Examination Series 11-01 Sample Questions (Q98-Q103):

NEW QUESTION #98

All of the following have a restricted ability to enter into a contract EXCEPT:

- · A. Individuals who are intoxicated
- B. Minors under a certain age
- C. Individuals who are retired
- D. Individuals who are mentally ill

Answer: C

Explanation:

Virginia contract law, reflected in Virginia Code § 38.2-102, requires capacity to form an insurance contract. Option A (intoxicated individuals) lacks capacity if impaired, voiding consent. Option B(mentally ill individuals) may lack comprehension, restricting ability unless adjudicated competent. Option C (minors, typically under 18 per § 38.2-3405) can't contract without guardian consent, except for necessities. Option D (retired individuals) has no legal restriction; retirement is a status, not a capacity limiter-e.g., a 65-year-old retiree can buy insurance freely. The study guide likely covers capacity in a legal basics section, with examples like a drunk person's void policy versus a retiree's valid one, making D the exception.

NEW OUESTION #99

All of the following are typical health maintenance organization (HMO) preventive care services provided by a primary care physician EXCEPT:

- A. Experimental surgery
- B. Physical examinations
- C. Well-baby checkups
- D. Immunizations for children

Answer: A

Explanation:

Virginia Code § 38.2-4306 requires HMOs to offer preventive care, coordinated by primary care physicians (PCPs), focusing on health maintenance. Option A (well-baby checkups), option B (immunizations for children), and option D (physical examinations) are standard preventiveservices-e.g., growth monitoring, vaccines, and annual exams-covered at no cost under ACA-aligned plans (Virginia Code § 38.2-3440).

Option C (experimental surgery) is not preventive; it's a treatment, often excluded or requiring special approval due to its unproven nature, not a PCP's routine role. The study guide likely lists HMO preventive benefits with examples (e.g., flu shots), contrasting them with non-preventive interventions like surgery, making C the exception.

NEW QUESTION # 100

Including a guaranteed insurability rider on a life insurance policy means that:

- A. The original policy was sold on a non-medical basis.
- B. Any extra premium charged for a health impairment will be discontinued if standard insurability is proved later.
- C. The company will require evidence of insurability for any future purchase of life insurance.

• D. The policyowner may purchase additional life insurance periodically without proving insurability.

Answer: D

Explanation:

Virginia Code § 38.2-3209 allows a guaranteed insurability rider, enabling the policyowner to buy additional coverage at specified intervals (e.g., every 3 years or life events like marriage) without proving insurability.

Option D matches this definition. Option A is unrelated; non-medical underwriting isn't implied. Option B contradicts the rider's purpose, which waives insurability proof. Option C is false; premium adjustments aren't part of this rider. The study guide describes this rider as a planning tool for future needs, confirming D.

NEW QUESTION # 101

Keogh plans are also known as:

- A. Section 457 plans
- B. 403(b) plans
- C. HR 10 plans
- D. Section 2503(c) trusts

Answer: C

Explanation:

Keogh plans, established under the Internal Revenue Code, are retirement plans for self-employed individuals and small businesses, also known as HR 10 plans (option B) after the 1962 legislation (H.R. 10) creating them. They allow tax-deferred contributions, similar to qualified plans. Option A (Section 457 plans) applies to government and nonprofit employees, not self-employed individuals. Option C (403(b) plans) is for nonprofit employees (e.g., teachers), distinct from Keogh's self-employed focus. Option D (Section 2503(c) trusts) relates to gifting for minors, not retirement. The study guide likely contrasts Keogh (HR 10) with other plans in a retirement section, noting its tax benefits and eligibility, confirming B as the correct synonym.

NEW QUESTION # 102

An individual currently owns a long-term care policy. At the time of application for similar coverage, which item must be signed by the applicant and retained by the insurer?

- A. A cancellation notice
- B. A substitution notice
- C. A replacement notice
- D. A duplication notice

Answer: C

Explanation:

Virginia Code § 38.2-5207.1 and 14VAC5-200-75 regulate replacement of long-term care (LTC) insurance, requiring a replacement notice when an applicant with existing coverage applies for a new policy that may replace it. This signed notice, provided to the applicant and retained by the insurer, ensures transparency about potential duplication or lapse of the original policy, protecting consumers from unintended coverage gaps or costs. Option C (replacement notice) fits this requirement. Option A (cancellation notice) relates to terminating a policy, not applying for a new one. Option B (substitution notice) isn't a standard term; "replacement" is the legal phrase. Option D (duplication notice) might imply overlap but lacks regulatory specificity. The study guide likely includes a sample replacement form, stressing its role in LTC sales compliance, confirming C as the correct choice.

NEW QUESTION # 103

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