

Your Exam Content Outline

The following outline describes the content of one of the Louisiana insurance examinations. The outlines are the basis of the examinations. The examination will contain questions on the subjects contained in the outline. The percentages indicate the relative weights assigned to each part of the examination. For example, 10 percent means that 6 questions will be drawn from the section on a 60-question exam, 10 will be drawn on a 100-question exam and 15 will be drawn on a 150-question exam.

Louisiana Examination for Life, Health and Accident Insurance Series 14-03

150 questions - 150-minute time limit

1.0 Insurance Regulation 6%

1.1 Licensing

- Types of licensees (22:1547, 1962(F))
 - Individual producer (22:1542(6), 1546(A))
 - Business entity (22:1542(2), 1546(B))
 - Resident versus nonresident (22:1546, 1548, 1560)
 - Temporary (22:1553)
- Maintenance and duration
 - Expiration (22:1547(B))
 - Renewal (22:1547(C))
 - Change of address (22:1547(G))
 - Assumed names (22:1552)
 - Reporting of actions (22:1563)
 - Continuing education requirements (22:1573; Rule 10.703, .705 & Rule 10.711)
- Disciplinary actions
 - Hearings (22:1968, 2191, 2193-2195, 2197, 2198, 2204-2208)
 - Cease and desist order (22:1969)
 - License probation, suspension, revocation, or refusal to issue or renew (22:1554)
 - Penalties with or without suspension of license (22:1969, 1970)

1.2 State regulation

- Commissioner's general duties and powers (22:2, 1967)
- Company regulation
 - Certificate of authority (22:65, 66)
 - Unfair claims settlement practices (22:1964(14))
 - Appointment (22:1558)
 - Termination of appointment (22:1559)
- Producer regulation
 - Controlled business (22:1544(C))
 - Shared commissions (22:1557)
 - Payment to unlicensed entities (22:1562)
- Unfair trade practices (22:1964)
 - Misrepresentation (22:1964(1, 18))
 - False advertising (22:1964(2))
 - Defamation (22:1964(3))

- Boycott, coercion and intimidation (22:1964(4))
- False financial statements (22:1964(5))
- Unfair discrimination (22:1964(7))
- Rebating (22:1964(8))
- Examination of books and records (22:1967, 1981, 1990)
- Insurance fraud (22:1964(13), 1921-1929)
- Privacy of Consumer Financial Information (37:XIII.9903-.9953)

1.3 Federal regulation

- Fair Credit Reporting Act (15 USC 1681-1681d)
- Fraud and false statements (18 USC 1033, 1034)

2.0 General Insurance 5%

2.1 Concepts

- Risk management key terms
 - Risk
 - Exposure
 - Hazard
 - Peril
 - Loss
- Methods of handling risk
 - Avoidance
 - Retention
 - Sharing
 - Reduction
 - Transfer
- Elements of insurable risks
 - Adverse selection
 - Law of large numbers
 - Reinsurance

2.2 Insurers

- Types of insurers
 - Stock companies
 - Mutual companies
 - Fraternal benefit societies
 - Self insurers
 - Surplus lines
- Private versus government insurers
- Authorized versus unauthorized insurers
- Domestic, foreign and alien insurers
- Financial status (independent rating service)
- Marketing (distribution) systems

2.3 Producers and general rules of agency

- Insurer as principal
- Producer/insurer relationship
- Authority and powers of producers

Express
Implied
Apparent

2.4 Contracts

Elements of a legal contract
Offer and acceptance
Consideration
Competent parties
Legal purpose
Distinct characteristics of an insurance contract
Contract of adhesion
Aleatory contract
Personal contract
Unilateral contract
Conditional contract
Legal interpretations affecting contracts
Ambiguities in a contract of adhesion
Reasonable expectations
Indemnity
Utmost good faith
Representations/misrepresentations
Warranties
Concealment
Fraud
Waiver and estoppel

3.0 Life Insurance Basics 13%

3.1 Insurable interest (22:852, 856, 901-2)

3.2 Personal uses of life insurance

Survivor protection
Estate creation
Cash accumulation
Liquidity
Estate conservation
Viatical settlements (22:1791-1805)

3.3 Determining amount of personal life insurance

Human life value approach
Needs approach
Types of information gathered
Determining lump-sum needs
Planning for income needs

3.4 Business uses of life insurance

Buy-sell funding
Key person
Executive bonuses

3.5 Classes of life insurance policies

Group versus individual
Ordinary versus industrial (home service)
Permanent versus term
Participating versus nonparticipating
Fixed versus variable life insurance and annuities

3.6 Premiums

Factors in premium determination
Mortality
Interest
Expense
Premium concepts

Net single premium
Gross annual premium
Premium payment mode

3.7 Producer responsibilities

Solicitation and sales presentations
Advertising (Reg 37:XIII.4101-.4123)
Prohibited advertising of Life and Health Insurance Guaranty Association (22:2098(A))
Illustrations (Reg 37:XIII.3301-.3323)
Policy summary
Guaranty association disclaimer (22:2098(B-D); Reg 37:XIII.901-.909)
Suitability
Life insurance policy cost comparison methods
Replacement (Reg 37:XIII.8901-.8925)
Use and disclosure of insurance information
Field underwriting
Notice of information practices
Application procedures
Delivery
Policy review
Effective date of coverage
Premium collection
Statement of good health
Delivery receipt requirements (22:931(A)(10)(b), (c))

3.8 Individual underwriting by the insurer

Information sources and regulation
Application
Producer report
Attending physician statement
Investigative consumer (inspection) report
Medical Information Bureau (MIB)
Medical examinations and lab tests including HIV (RL 40:1300.11, .13, .14)
Selection criteria and unfair discrimination (22:34, 1964(7))
Classification of risks
Preferred
Standard
Substandard

4.0 Life Insurance Policies 8%

4.1 Term life insurance

Level term
Annual renewable term
Level premium term
Decreasing term

4.2 Whole life insurance

Continuous premium (straight life)
Limited payment
Single premium

4.3 Flexible premium policies

Adjustable life
Universal life

4.4 Specialized policies

Joint life (first-to-die)

Juvenile life

4.5 Group life insurance

Characteristics of group plans
Group underwriting requirements
Group standard provisions (22:942)
Conversion to individual policy (22:942(10–12))

4.6 Credit life insurance (individual versus group)

5.0 Life Insurance Policy Provisions, Options and Riders 13%

5.1 Standard provisions (22:931)

Ownership
Assignment (22:876)
Entire contract (22:931(A)(3))
Modifications
Right to examine (free look) (22:931(A)(10))
Payment of premiums
Grace period (22:931(A)(1))
Reinstatement (22:931(A)(9))
Incontestability (22:931(A)(2))
Misstatement of age (22:931(A)(4))
Exclusions (22:931(B))
Interest on life insurance proceeds (22:908)
Settlement of death benefit (22:1811)
Backdating of policies (22:904)

5.2 Beneficiaries

Designation options
Individuals
Classes
Estates
Minors
Trusts
Succession
Revocable versus irrevocable
Common disaster clause
Spendthrift clause

5.3 Settlement options

Interest only
Fixed-period installments
Fixed-amount installments
Life income
Single life
Joint and survivor

5.4 Nonforfeiture options

Cash surrender value
Extended term
Reduced paid-up insurance

5.5 Policy loan and withdrawal options

Cash loans
Automatic premium loans
Withdrawals or partial surrenders

5.6 Dividend options

Cash payment
Reduction of premium payments
Accumulation at interest
One-year term option
Paid-up additions

Paid-up insurance

5.7 Disability riders

Waiver of premium
Waiver of cost of insurance
Disability income benefit
Payor benefit life/disability (juvenile insurance)

5.8 Accelerated (living) benefit provision/rider (Reg 37:XIII.1501–.1523)

Conditions for payment
Effect on death benefit

5.9 Riders covering additional insureds

Spouse/other-insured term rider
Children's term rider
Family term rider

5.10 Riders affecting the death benefit amount

Accidental death
Guaranteed insurability
Cost of living
Return of premium

6.0 Annuities 5%

6.1 Annuity principles and concepts

Accumulation period versus annuity period
Owner, annuitant and beneficiary
Insurance aspects of annuities

6.2 Immediate versus deferred annuities

Single premium immediate annuities (SPIAs)
Deferred annuities
Premium payment options
Nonforfeiture
Surrender charges
Death benefits

6.3 Annuity (benefit) payment options

Life contingency options
Pure life versus life with guaranteed minimum
Single life versus multiple life
Annuities certain (types)

6.4 Annuity products

Fixed annuities
General account assets
Interest rate guarantees (minimum versus current)
Level benefit payment amount
Equity indexed annuities
Market value adjusted annuities

6.5 Uses of annuities

Lump-sum settlements
Qualified retirement plans
Group versus individual annuities
Personal uses
Individual retirement accounts (IRAs)
Tax-deferred growth
Retirement income
Education funds
Interest only income
Using tax advantage of exclusion ratio to fund purchase of other insurance

7.0 Federal Tax Considerations for Life Insurance and Annuities 2%

7.1 Taxation of personal life insurance

- Amounts available to policyowner
 - Cash value increases
 - Dividends
 - Policy loans
 - Surrenders
- Amounts received by beneficiary
 - General rule and exceptions
 - Settlement options
- Values included in insured's estate

7.2 Modified endowment contracts (MECs)

- Modified endowment versus life insurance
- Seven-pay test
- Distributions

7.3 Taxation of non-qualified annuities

- Individually-owned
 - Accumulation phase (including taxation issues)
 - Annuity phase and the exclusion ratio
 - Distributions at death
- Corporate-owned

7.4 Taxation of individual retirement accounts (IRAs)

- Traditional IRAs
 - Contributions and deductible amounts
 - Premature distributions (including taxation issues)
 - Annuity phase benefit payments
 - Values included in the annuitant's estate
 - Amounts received by beneficiary
- Roth IRAs
 - Contributions and limits
 - Distributions

7.5 Rollovers and transfers (IRAs and qualified plans)

7.6 Section 1035 exchanges

8.0 Qualified Plans 2%

8.1 General requirements

8.2 Federal tax considerations

- Tax advantages for employers and employees
- Taxation of distributions (age-related)

8.3 Plan types, characteristics and purchasers

- Simplified employee pensions (SEPs)
- Self-employed plans (HR 10 or Keogh plans)
- Profit-sharing and 401(k) plans
- SIMPLE plans
- 403(b) tax-sheltered annuities (TSAs)

9.0 Health Insurance Basics 10%

9.1 Definitions of perils

- Accidental injury
- Sickness

9.2 Principal types of losses and benefits

- Loss of income from disability
- Medical expense
- Dental expense

Long-term care expense

9.3 Classes of health insurance policies

- Individual versus group
- Private versus government
- Limited versus comprehensive

9.4 Limited policies

- Limited perils and amounts
- Required notice to insured
- Types of limited policies
 - Accident-only
 - Specified (dread) disease
 - Hospital indemnity (income)
 - Credit disability
 - Prescription drugs
 - Vision care

9.5 Common exclusions from coverage

9.6 Producer responsibilities in individual health insurance

- Marketing requirements
 - Advertising (Rule 37:XI.1301-.1337)
 - Prohibited advertising of Life and Health Insurance Guaranty Association (22:2098(A))
 - Sales presentations
- Guaranty association disclaimer (22:2098(B-D); Reg 37:XIII.901-.909)
- Field underwriting
 - Nature and purpose
 - Disclosure of information about individuals
 - Application procedures
 - Requirements at delivery of policy (22:973(7)(b, c))
- Common situations for errors/omissions

9.7 Individual underwriting by the insurer

- Underwriting criteria
- Sources of underwriting information
 - Application
 - Producer report
 - Attending physician statement
 - Investigative consumer (inspection) report
 - Medical Information Bureau (MIB)
 - Medical examinations and lab tests including HIV consent (RL 40:1300.11, .13, .14)
- Unfair discrimination (22:34, 1022, 1964(7))
- Genetic testing (22:1023; Reg 37:XIII.4511, .4513)
- Classification of risks
 - Preferred
 - Standard
 - Substandard

9.8 Considerations in replacing health insurance

- Pre-existing conditions (22:1006(E))
- Pre-existing condition exclusion regulation (22:1006(E); Reg 37:XIII.9107(K),(L))
- Benefits, limitations and exclusions
- Underwriting requirements
- Producer liability for errors and omissions

10.0 Individual Health Insurance Policy General Provisions 5%

10.1 Required provisions (22:975(A))

- Entire contract; changes (22:975(A)(1))
- Time limit on certain defenses (22:975(A)(13))
- Grace period (22:977)
- Reinstatement (22:975(A)(2))
- Claim procedures (22:975(A)(3-7, 14); 22:1821, 1832-3)
- Physical examinations and autopsy (22:975(A)(8))
- Legal action (22:975(A)(11))
- Consent of beneficiary (22:975(A)(10))
- Cancellation by insured (22:975(A)(9))
- Extension of time limits (22:975(A)(12))

10.2 Other provisions (22:975(B))

- Change of occupation (22:975(B)(1))
- Misstatement of age (22:975(B)(2))
- Other insurance in this insurer (22:975(B)(3))
- Insurance with other insurers (22:975(B)(4))
- Unpaid premium (22:975(B)(6))
- Cancellation (22:975(B)(7))
- Conformity with state statutes (22:975(B)(8))
- Illegal occupation (22:975(B)(9))
- Intoxicants and narcotics (22:975(B)(10))

10.3 Other general provisions

- Right to examine (free look) (22:975(7)(a))
- Insuring clause
- Consideration clause
- Military suspense provision (RL 29:407)

11.0 Disability Income and Related Insurance 3%

11.1 Qualifying for disability benefits

- Inability to perform duties
 - Own occupation
 - Any occupation
- Presumptive disability
- Requirement to be under physician care

11.2 Individual disability income insurance

- Louisiana minimum benefit standards (22:990)
- Basic total disability plan
 - Income benefits (monthly indemnity)
 - Elimination and benefit periods
 - Waiver of premium feature
- Coordination with social insurance and workers compensation benefits
 - Additional monthly benefit (AMB)
 - Social insurance supplement (SIS)
 - Occupational versus nonoccupational coverage
- At-work benefits
 - Partial disability benefit
 - Residual disability benefit
- Other provisions affecting income benefits
 - Cost of living adjustment (COLA) rider
 - Future increase option (FIO) rider
 - Relation of earnings to insurance (22:975(B)(5))
- Other cash benefits

- Accidental death and dismemberment
- Rehabilitation benefit
- Medical reimbursement benefit (nondisabling injury)
- Refund provisions
- Return of premium
- Exclusions

11.3 Unique aspects of individual disability underwriting

- Occupational considerations
- Benefit limits
- Policy issuance alternatives

11.4 Group disability income insurance

- Group versus individual plans
- Short-term disability (STD)
- Long-term disability (LTD)

11.5 Business disability insurance

- Key person disability income
- Disability buy-sell policy

11.6 Social Security disability

- Qualification for disability benefits
- Definition of disability
- Waiting period
- Disability income benefits

11.7 Workers compensation

- Eligibility
- Benefits

12.0 Medical Plans 9%

12.1 Medical plan concepts

- Fee-for-service basis versus prepaid basis
- Benefit schedule versus
 - usual/reasonable/customary charges
- Any provider versus limited choice of providers
- Insureds versus subscribers/participants

12.2 Types of providers and plans

- Major medical insurance (indemnity plans)
 - Characteristics
 - Common limitations
 - Exclusions from coverage
 - Provisions affecting cost to insured
- Health maintenance organizations (HMOs)
 - General characteristics
 - Preventive care services
 - Primary care physician (PCP) versus referral (specialty) physician
 - Emergency care
 - Hospital services
 - Other basic services
- Preferred provider organizations (PPOs)
 - General characteristics
 - Open panel or closed panel
 - Types of parties to the provider contract
- Point-of-service (POS) plans
 - Nature and purpose
 - Out-of-network provider access (open-ended HMO)
 - PCP referral (gatekeeper PPO)

Indemnity plan features

12.3 Cost containment in health care delivery

- Cost-saving services
 - Preventive care
 - Hospital outpatient benefits
 - Alternatives to hospital services
- Utilization management
 - Prospective review
 - Concurrent review
 - Retrospective review

12.4 Louisiana requirements (individual and/or group)

- Eligibility requirements
 - Dependent child age limit (22:1000(A)(1)(a)(vi), (2)(a))
 - Coverage of adopted children (22:1004)
 - Newborn child coverage (22:1024)
 - Physically or mentally handicapped dependents (22:1000(A)(2)(a), 1001)
 - Full-time student age limit (22:1002, 1003)
 - Grandchildren coverage (22:1000(A)(1)(a)(vi), (2)(a))
- Benefit offers
 - Treatment for alcoholism and drug abuse (22:1025)
 - Speech, physical and occupational therapy services (22:1042)
 - Full coverage for mental disorders (22:1043)

12.5 HIPAA (Health Insurance Portability and Accountability Act) requirements

- Eligibility (22:1061, 1063)
- Guaranteed issue (22:1073)
- Pre-existing conditions (22:1062, 1072)
- Creditable coverage (22:1061(4), 1062(A-D), 1064)
- Renewability (22:1068, 1074)

12.6 Medical savings accounts (MSAs)

- Definition
- Eligibility
- Contribution limits

13.0 Group Health Insurance 6%

13.1 Characteristics of group insurance

- Group contract
- Certificate of coverage
- Experience rating versus community rating

13.2 Types of eligible groups

- Individual employer groups
- Multiple-Employer Trusts (METs) or Welfare Arrangements (MEWAs)
- Blanket (22:1000(A))
 - Associations (alumni, professional, other)
 - Customer groups (depositors, creditor-debtor, other)
 - Students

13.3 Marketing considerations

- Advertising
- Regulatory jurisdiction/acceptable place of delivery

13.4 Employer group health insurance

- Insurer underwriting criteria
 - Characteristics of group
 - Plan design factors
 - Administrative capability
- Eligibility for coverage
 - Employee eligibility
 - Dependent eligibility
- Coordination of benefits provision (Reg 37:XIII .301-.319)
- Change of insurance companies or loss of coverage
 - No-loss no-gain
 - Events that terminate coverage
 - Extension of benefits
 - Continuation of coverage under COBRA and Louisiana specific rules (22:1068)
 - Conversion privilege (22:988, 1074(G)(4))
 - Reinstatement of coverage for military personnel (RL 29:407(D))

13.5 Small employer medical plans (22:1091-1094)

- Definition of small employer (22:1061(5)(e)(iii))
- Availability of coverage (guaranteed issue) (22:1067)
- Renewability of coverage (guaranteed issue) (22:1068)
- Disclosure requirements (22:1063, 1093)

14.0 Dental Insurance 2%

14.1 Types of dental plans

- Dental insurance
- Dental referral plans

14.2 Indemnity plans

- Choice of providers
- Benefit categories
 - Diagnostic/preventive services
 - Basic services
 - Major services
- Deductibles and coinsurance
- Combination plans
- Exclusions
- Limitations
- Predetermination of benefits

14.3 Employer group dental expense

- Integrated deductibles versus stand-alone plans
- Minimizing adverse selection

15.0 Insurance for Senior Citizens and Special Needs Individuals 10%

15.1 Medicare

- Nature, financing and administration
- Part A — Hospital Insurance
 - Individual eligibility requirements
 - Enrollment
 - Coverages and cost-sharing amounts
- Part B — Medical Insurance
 - Individual eligibility requirements
 - Enrollment
 - Coverages and cost-sharing amounts

Exclusions

Claims terminology and other key terms

Part C — Medicare Advantage

Part D — Prescription Drug Insurance

15.2 Medicare supplements (22:1111)

Purpose (Reg 37:XIII.501)

Open enrollment (Reg 37:XIII.530)

Standardized Medicare supplement plans
(Reg 37:XIII.520)

Core benefits

Additional benefits

Louisiana regulations and required provisions

Standards for marketing (Reg 37:XIII.575)

Advertising (Reg 37:XIII.570; Rule
37:XI.101-.137)

Appropriateness of recommended purchase
and excessive insurance (Reg 37:XIII.580)

Outline of coverage (Reg 37:XIII.560(C))

Right to return (free look) (Reg
37:XIII.560(A)(5))

Replacement (Reg 37:XIII.565, .590)

Minimum benefit standards (Reg 37:XIII.515)

Guaranteed issue (Reg 37:XIII.535)

Required disclosure provisions
(Reg 37:XIII.560)

Permitted compensation (Reg 37:XIII.555)

Renewability and cancellation
(Reg 37:XIII.515(A)(1)(e))

Continuation and conversion requirements
(Reg 37:XIII.515(A)(1)(e))

Notice of Medicare benefit changes
(Reg 37:XIII.560(B))

Medicare Select (Reg 37:XIII.525)

15.3 Other options for individuals with Medicare

Employer group health plans

Disabled employees

Employees with kidney failure

Individuals age 65 and older

Medicaid

Eligibility

Benefits

15.4 Long-term care (LTC) insurance (22:1181-1191; Reg 37:XIII.1901-.1961)

Eligibility for benefits

Levels of care

Skilled care

Intermediate care

Custodial care

Home health care (Reg 37:XIII.1923)

Adult day care

Respite care

Benefit periods

Benefit amounts

Optional benefits

Guarantee of insurability

Return of premium

Qualified LTC plans

Exclusions

Underwriting considerations

Louisiana regulations and required provisions

Advertising (Reg 37:XIII.1941)

Standards for marketing (Reg 37:XIII.1943)

Outline of coverage (22:1186(G); Reg
37:XIII.1955)

Suitability (Reg 37:XIII.1945)

Shoppers guide (Reg 37:XIII.1957)

Right to return (free look) (22:1186(F))

Replacement (Reg 37:XIII.1925, .1947)

Benefit standards (22:1186)

Benefit triggers (Reg 37:XIII.1951, .1953)

Required disclosure provisions (Reg
37:XIII.1913)

Nonforfeiture (Reg 37:XIII.1949)

Pre-existing conditions (22:1186(C))

Inflation protection (Reg 37:XIII.1919)

Unintentional lapse (Reg 37:XIII.1911)

15.5 Louisiana Health Insurance Association (22:1201-1215)

Eligibility (22:1207)

Coverages and limits (22:1213(A), (B))

Exclusions (22:1213(E))

Deductibles and coinsurance (22:1213(F)(4))

16.0 Federal Tax Considerations for Health Insurance 1%

16.1 Personally-owned health insurance

Disability income insurance

Medical expense insurance

Long-term care insurance

16.2 Employer group health insurance

Disability income (STD, LTD)

Benefits subject to FICA

Medical and dental expense

Long-term care insurance

Accidental death and dismemberment

16.3 Medical expense coverage for sole proprietors and partners

16.4 Business disability insurance

Key person disability income

Buy-sell policy

16.5 Medical savings accounts (MSAs)