Your Exam Content Outline

The following outline describes the content of one of the Nebraska 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

Nebraska Producer's Examination for Accident and Health or Sickness Insurance Series 13-02

> 100 questions - 2-hour time limit Effective Date: January 27, 2020

1.0 Insurance Regulation 10%

1.1 Licensing

Process (44-4052, 4053)

Types of licensees (44-4054)

Producers (44-4049, 4054)

Consultants (44-2606-2635)

Resident versus nonresident (44-

2625, 4055, 4063)

Temporary (44-4058)

Maintenance and duration

Renewal (44-4054)

Name or address change (44-

4054(8))

Reporting of actions (44-4065)

Assumed names (44-4057)

Continuing education requirements

including ethics education (44-3901-

3908)

Disciplinary actions

Right to hearing (44-4059(2))

Suspension, revocation or refusal to

issue or renew (44-2633, 4059)

Fines (44-2634, 4059(4))

Cease and desist order (44-1529,

1542)

1.2 State regulation

Director's general duties and powers

(44-101.01, 2635)

Company regulation

Certificate of authority (44-303)

Capital and surplus requirements

(44-214, 305)

Unfair claims settlement practices

(44-1539, 1540)

Examination of books and records

(44-1527, 5904)

Appointment (44-4061)

Termination of appointment (44-

4062)

Unfair trade practices complaint

register (44-1525(9); Reg Ch 21)

Producer regulation

Sharing commissions (44-4060)

Controlled business (44-361.01, .02)

Prohibited fees or charges (44-354)

Records retention (44-5905)

Unfair trade practices

Misrepresentation (44-1525(1))

False advertising (44-1525(2))

Defamation of insurer (44-1525(3))

Boycott, coercion or intimidation

(44-1525(4))

Unfair discrimination (44-1525(7))

Rebating (44-361, 1525(8))

Insurance Fraud Act (44-6601-6608)

Privacy of Insurance Consumer

Information Act (44-901-925)

1.3 Federal regulation

Fair Credit Reporting Act (15 USC 1681-

1681d)

Fraud and false statements

2.0 General Insurance 10%

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

Reciprocals

Lloyd's associations

Risk retention groups Surplus lines

Private versus government insurers Admitted versus nonadmitted insurers Domestic, foreign and alien insurers

Financial status (independent rating services)

Marketing (distribution) systems

2.3 Producers and general rules of agency

Insurer as principal

Producer/insurer relationship

Authority and powers of licensees

Express

Implied

Apparent

Responsibilities to the applicant/insured

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 Sickness and Accident Insurance Basics 12%

3.1 Definitions of perils

Accidental injury

Sickness

3.2 Principal types of losses and benefits

Loss of income from disability

Medical expense

Dental expense

Long-term care expense

3.3 Classes of health insurance policies

Individual versus group

Private versus government

Limited versus comprehensive

3.4 Limited policies

Limited perils and amounts

Required notice to insured

Types of limited policies

Accident-only

Specified (dread) disease

Hospital indemnity (income)

Credit disability

Blanket insurance (teams,

passengers, other)

Prescription drugs

Vision care

3.5 Common exclusions from coverage

3.6 Producer responsibilities in individual health insurance

Marketing requirements

Advertising (Reg Ch 14 Sec 001–

020)

Life and Health Insurance Guaranty

Association (44-2719.01)

Sales presentations

Field underwriting

Nature and purpose

Disclosure of information about

individuals

Application procedures

Requirements at delivery of policy

Common situations for errors/omissions

3.7 Individual underwriting by the insurer

Underwriting criteria

Sources of underwriting information

Application procedures

Producer report

Attending physician statement

Investigative consumer (inspection)

report

Medical Information Bureau (MIB)

Medical examinations and lab tests

including HIV (RL 71-531)

Unfair discrimination (44-749)

Classification of risks

Preferred

Standard

Substandard

3.8 Considerations in replacing health insurance

Pre-existing conditions

Benefits, limitations and exclusions

Underwriting requirements

Producer liability for errors and omissions

4.0 Individual Sickness and Accident Insurance Policy General Provisions 10%

4.1 Uniform required provisions (44-710.03)

710.03)

Entire contract: changes (44-710.03(1),

.12)

Time limit on certain defenses (44-

710.03(2))

Grace period (44-710.03(3))

Reinstatement (44-710.03(4)) Residual disability benefit Claim procedures (44-710.03(5-9))Other provisions affecting income Physical examinations and autopsy (44benefits 710.03(10)) Cost of living adjustment (COLA) Legal actions (44-710.03(11)) Change of beneficiary (44-710.03(12)) Future increase option (FIO) rider 4.2 Uniform optional provisions (44-Relation of earnings to insurance 710.04) (44-710.04(6))Change of occupation (44-710.04(1)) Other cash benefits Misstatement of age (44-710.04(2)) Accidental death and dismemberment Other insurance in this insurer (44-Rehabilitation benefit 710.04(3)) Medical reimbursement benefit Insurance with other insurers (nondisabling injury) Refund provisions Expense-incurred basis (44-710.04(4)) Return of premium Other benefits (44-710.04(5)) Cash surrender value Unpaid premium (44-710.04(7)) Exclusions Cancellation (44-710.04(8)) 5.3 Unique aspects of individual Conformity with state statutes (44disability underwriting 710.04(9)) Occupational considerations Illegal occupation (44-710.04(10)) Benefit limits Intoxicants and narcotics (44-Policy issuance alternatives 710.04(11)) 5.4 Group disability income insurance 4.3 Other general provisions Group versus individual plans Short-term disability (STD) Right to examine (free look) (44-710.18) Long-term disability (LTD) Insuring clause 5.5 Business disability insurance Consideration clause Key person disability income Disability buy-sell policy Renewability clause (44-787) Noncancelable 5.6 Social Security disability Guaranteed renewable Qualification for disability benefits Conditionally renewable Definition of disability Renewable at option of insurer Waiting period Nonrenewable (cancelable, term) Disability income benefits **5.0** Disability Income and Related Insurance 6.0 Medical Plans 13% 10% 6.1 Medical plan concepts 5.1 Qualifying for disability benefits Fee-for-service basis versus prepaid Inability to perform duties basis Own occupation Specified coverages versus Any occupation comprehensive care Pure loss of income (income replacement Benefit schedule versus contracts) usual/reasonable/customary charges Presumptive disability Any provider versus limited choice of Requirement to be under physician care providers 5.2 Individual disability income Insureds versus subscribers/participants insurance 6.2 Types of providers and plans Basic total disability plan Major medical insurance (indemnity Income benefits (monthly indemnity) plans) Elimination and benefit periods Characteristics Waiver of premium feature Common limitations Coordination with social insurance and Exclusions from coverage workers compensation benefits Provisions affecting cost to insured Additional monthly benefit (AMB) Health maintenance organizations Social insurance supplement (SIS) (HMOs) Occupational versus nonoccupational General characteristics coverage Preventive care services

Primary care physician versus

referral (specialty) physician

At-work benefits

Partial disability benefit

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

6.3 Cost containment in health care delivery

Cost-saving services

Preventive care

Hospital outpatient benefits

Alternatives to hospital services

Utilization management (44-5416-5431)

Prospective review

Concurrent review

6.4 Nebraska requirements (individual and group)

Eligibility requirements

Newborn child coverage (44-710.19)

Dependent coverage (44-710.01)

Full-time students (44-710.01)

Benefit offers

Treatment for alcoholism (44-769–

781)

Treatment of bones or joints of the face, neck or head (44-789)

6.5 HIPAA (Health Insurance Portability and Accountability Act) requirements

Eligibility

Guaranteed issue

Pre-existing conditions

Creditable coverage

Renewability

6.6 Health savings accounts (HSAs)

Definition

Eliaibility

Contribution limits

7.0 Group Sickness and Accident Insurance

7.1 Characteristics of group insurance

Group contract

Certificate of coverage (44-761(2))

Experience rating versus community rating

7.2 Types of eligible groups

Employment-related groups

Individual employer groups

Multiple-Employer Trusts (METs) or

Welfare Arrangements (MEWAs)

Associations (alumni, professional, other)
Customer groups (depositors, creditordebtor, other)

7.3 Marketing considerations

Advertising

Regulatory jurisdiction/place of delivery

7.4 Employer group health insurance

Nebraska underwriting requirements (44-760)

Insurer underwriting criteria

Characteristics of group

Plan design factors

Persistency factors

Administrative capability

Eligibility for insurance

Annual open enrollment

Employee eligibility

Dependent eligibility

Coordination of benefits provision

Change of insurance companies or loss of coverage

Coinsurance and deductible carryover

No-loss no-gain

Events that terminate coverage

Extension of benefits

Continuation of coverage under

COBRA and Nebraska specific rules

(44-1640-1645)

Conversion privilege (44-1613; 44-

32,130)

7.5 Small employer group medical plans

Definition of small employer (44-5253)

Renewability of coverage (44-5259)

Benefit plans offered — basic and

standard (44-5260)

Marketing (44-5266)

Prohibited practices (44-5266)

8.0 Dental Insurance 2%

8.1 Types of dental treatment

Diagnostic and preventive

Restorative

Oral surgery

Endodontics

Periodontics

Prosthodontics

Orthodontics

8.2 Indemnity plans

Choice of providers

Scheduled versus nonscheduled

(comprehensive) plans

Benefit categories

Diagnostic/preventive services

Basic services

Major services

Deductibles and coinsurance

Combination plans

Exclusions

Limitations

Predetermination of benefits

8.3 Employer group dental expense

Integrated deductibles versus standalone plans

Minimizing adverse selection

9.0 Insurance for Senior Citizens and **Special Needs Individuals 15%**

9.1 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

9.2 Medicare supplements

Purpose (Reg Ch 36 Sec 001)

Open enrollment (Reg Ch 36 Sec 011)

Standardized Medicare supplement plans

(Rea Ch 36 Sec 009)

Core benefits

Additional benefits

Nebraska regulations and required

provisions

Standards for marketing (Reg Ch 36

Sec 020)

Advertising (44-3608.01; Reg Ch 36

Sec 019)

Appropriateness of recommended purchase and excessive insurance

(Reg Ch 36 Sec 021)

Buyer's quide (Reg Ch 36 Sec

017(017.01F))

Outline of coverage (44-3607; Reg

Ch 36 Sec 017(017.03))

Guaranteed issue for eligible persons

(Reg Ch 36 Sec 012)

Right to return (free look) (44-3608;

Reg Ch 36 Sec 017(017.01E))

Unfair trade practices (44-3610)

Replacement (Reg Ch 36 Sec 018,

023)

Minimum benefit standards (Reg Ch

36 Sec 008)

Required disclosure provisions (Req

Ch 36 Sec 017)

Permitted compensation (Reg Ch 36

Sec 016)

Notice of change (Reg Ch 36 Sec

017(017.02))

Medicare Select (Reg Ch 36 Sec 010)

9.3 Other options for individuals with Medicare

Employer group health plans

Disabled employees

Employees with kidney failure

Individuals age 65 and older

Medicaid

Eligibility

Benefits

9.4 Long-term care (LTC) insurance

LTC, Medicare and Medicaid compared

Eligibility for benefits

Levels of care

Skilled care

Intermediate care

Custodial care

Home health care (Reg Ch 46 Sec

005(005.10), 010)

Adult day care (Reg Ch 46 Sec

005(005.02))

Respite care

Assisted living (Reg Ch 46 Sec

005(005.21))

Benefit periods

Benefit amounts

Optional benefits

Guarantee of insurability

Return of premium

Qualified LTC plans

Exclusions (Reg Ch 46 Sec 006(006.02))

LTC Partnerships

Underwriting considerations

Nebraska regulations and required

provisions

Standards for marketing (Reg Ch 46

Sec 020)

Advertising (Reg Ch 46 Sec 019)

Shopper's guide (Reg Ch 46 Sec

027)

Outline of coverage (44-4516; Reg

Ch 46 Sec 026)

Suitability (Reg Ch 46 Sec 021)

Right to return (free look) (44-4515)

Unintentional lapse (Reg Ch 46 Sec

Incontestability (44-4517.01)

Replacement (Reg Ch 46 Sec

006(006.05), 012, 022)

Benefit standards (44-4509)

Nonforfeiture (44-4517.02; Reg Ch

46 Sec 023)

Benefit triggers (Reg Ch 46 Sec 024,

Inflation protection (Reg Ch 46 Sec

Prohibited policy provisions (44-

4513)

Renewal considerations (Reg Ch 46

Sec 006(006.01))

Continuation of benefits (Reg Ch 46 Sec 006(006.04))
Required disclosure provisions (Reg Ch 46 Sec 008)
Pre-existing conditions (44-4513(2, 3))

9.5 Nebraska Comprehensive Health Insurance Pool

Eligibility (44-4221)
Coverages and limits (44-4226; Reg Ch 44 Sec 006, 007, 009, 010)
Exclusions (44-4228(1))
Deductibles and coinsurance (44-4226(3); Reg Ch 44 Sec 004, 008)

10.0 Federal Tax Considerations for Sickness and Accident Insurance 7%

10.1 Personally-owned health insurance

Disability income insurance Medical expense insurance Long-term care insurance

10.2 Employer group health insurance

Disability income (STD, LTD)
Medical and dental expense
Long-term care insurance
Accidental death and dismemberment

10.3 Medical expense coverage for sole proprietors and partners

10.4 Business disability insurance

Key person disability income Buy-sell policy

10.5 Health savings accounts (HSAs)