Nebraska Producer's Examination for Life and Annuities, Accident and Health or Sickness Insurance Series 13-03

150 questions (plus 5 unscored items) 2.5-hour time limit

1.0 Insurance Regulation

15%

1.1 General

State specific licensing requirements

License issuance (44-4052, 4053)

Application

License maintenance

Change of name/phone number/address/email address (44-4054(8))

Assumed business name (44-4057)

Reporting of actions (44-4065)

Continuing education including exemptions (44-3901–3908)

Penalties

Appointment and termination process

License duration

Renewal/nonrenewal (44-4054)

Reinstatement

Continuation

Termination (44-4062)

Surrender

Lapse

Inactivity due to military service

Inactivity due to extenuating circumstances

Disciplinary actions related to the license

Denial

Probation

Suspension (44-2633, 4059)

Surrender

Revocation or refusal to issue or renew (44-2633, 4059)

Penalties

Civil

Criminal

Hearings (44-4059(2))

Fines (44-2634, 4059(4))

Cease and desist order (44-1529, 1542)

1.2 Licensing Types, Purposes, and Processes

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License types (44-4054)
          Producer (44-4049, 4054)
          Consultant (44-2606-2635)
          Public adjuster
          Agency
          Resident (44-2625, 4055, 4063)
          Nonresident (44-2625, 4055, 4063)
          Temporary (44-4058)
          Surplus lines
          Crop
  Licensing requirements
          Eligibility and qualification
1.3 State Regulation
  Acts constituting insurance transaction
          Negotiate
          Sell
          Solicit
  Director's general duties and powers (44-101.01, 2635)
  Producer regulatory requirements
          Policy signatures
          Application signatures
          Premium payment
          Producer representation
          Commissions/compensation and fees (44-4060)
          Controlled business (44-361.01, .02)
          Appointment (44-4061)
          Fiduciary responsibility
          Impersonation
          Records maintenance (44-5905)
          Claims reporting
  Company regulatory requirements
          Solvency
          Financial requirements
          Certificate of authority (44-303)
          State of domicile
          Records maintenance
          Policy forms/rates/exceptions
          Appointment/termination
          Capital and surplus requirements (44-214, 305)
          Unfair trade practices complaint register (44-1525(9); Reg Ch 21)
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Difference between admitted, non-admitted, foreign, and domestic insurers
Unfair trade practices
        Unfair discrimination (44-1525(7))
        Misrepresentation (44-1525(1))
        False or deceptive advertising (44-1525(2))
        Claims settlement
        Boycott (44-1525(4))
        Coercion (44-1525(4))
        Intimidation (44-1525(4))
        Defamation (44-1525(3))
        False financial statements
        Fraud
        Illegal inducements including rebating and twisting (44-361, 1525(8))
        Misappropriation of funds
        Testimonials
        Comparisons
        Nondisclosure of fees or charges (44-354)
Other prohibited practices
        Comingling of funds
        Non-transparency
        STOLI/IOLI
        Prohibited fees/premiums/extra charges
        Larceny
        Acting without a license
Unfair claims settlement practices (44-1539, 1540)
Nonpublic personal information and privacy protection
Policy replacement (Reg Ch 19)
Solicitation and sales (Reg Ch 33)
        Advertising (Reg Ch 50)
        Provisions/rules
        Policy summary
        Buyer's Guide (Reg Ch 33 Sec 005, NAIC Current Model Buyer's Guide)
        Illustrations (Reg Ch 72)
        Suitability (44-8101-8109)
        Backdating
Selection criteria and unfair discrimination (44-1525(7)(a))
Insurance Fraud Act (44-6601-6608)
Privacy of Insurance Consumer Information Act (44-901–925)
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1.4 Federal Regulation

Federal Law (18 U.S. Code § 1033)

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Fair Credit Reporting Act (15 USC 1681–1681d)
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Fraud and false statements including 1033 and 1034 waiver

"Prohibited Persons" Waiver (Consent to Work) (18 U.S. Code § 1033-1034)

Other federal regulations

Do Not Call List (Telephone Consumer Protection Act)

Can-Spam Act

Sarbanes-Oxley Act

Terrorism Risk Insurance Act

Consumer Data Privacy and Security Act

National Flood Insurance Program

2.0 General Insurance

2.1 Risk management key terms

Risk

Exposure

Hazard

Peril

Loss

Insurance

2.2 Methods of handling risk

Avoidance

Retention

Sharing

Reduction

Transfer

2.3 Other risk concepts

Elements of insurable risks

Adverse selection

Law of large numbers

Reinsurance

2.4 Types of insurers

Stock

Mutual

Fraternal benefit society

2.5 Financial rating services

A.M. Best

Standard and Poor's

Moody's

2.6 Distribution systems

Independent

Direct

Exclusive/captive agent

Exchanges

2.7 Law of agency

Insurer as principal

Producer/agent/broker-insurer relationships

2.8 Authority and powers of producers/agents/brokers

Express

Implied

Apparent

2.9 Elements of a legal contract

Offer and acceptance

Consideration

Competent parties

Legal purpose

2.10 Legal interpretations affecting contracts

Reasonable expectations

Indemnity

Utmost good faith

Concealment

Representations

Misrepresentations

Warranties

Fraud

3.0 Life Insurance Basics

3.1 Producer Authority and Powers

Insurable interest (44-704)

Personal uses of life insurance

Survivor protection

Estate creation/conservation

Cash accumulation

Security

Exemption from creditor claims/probate

Needs approach to determining amount of personal life insurance

Types of information gathered

Determining lump-sum needs

Planning for income needs

Business uses of life insurance

Key person

Buy-sell

Factors in premium determination

Mortality

Interest

Expense

Field underwriting

Application procedures

Required signatures

Notice of information practices and premium collection

Conditional receipt

Policy delivery

Policy review

Effective date of coverage

Premium collection

Statement of Good Health

Delivery/electronic delivery requirements

Information sources and regulation

Application

Producer report

Attending physician statement

Investigative consumer report

Medical Information Bureau (MIB)

Medical examination and lab tests including HIV (RL 71-531)

Financial information

Risk classifications

Preferred

Standard

Substandard/rated

Declined

4.0 Life Insurance Policies

4.1 Characteristics of Level Term

Renewability

Level premium
Convertibility
Term-to-65

4.2 Decreasing Term

Credit/mortgage protection

4.3 Whole Life

Ordinary

Limited pay

Single premium

4.4 Characteristics of Whole Life

Cash value

Maturity

Guarantees

4.5 Universal and Indexed Life

4.6 Variable products

Regulation of variable products (44-2212, 2216; Reg Ch 15 Sec 006, 011)

Qualifications of producers for the sale of variable products

General account versus separate account

4.7 Specialized policies

Joint life/first-to-die

Survivorship life/second-to-die

4.8 Characteristics of Group Life

Individual certificates

Eligibility

Plan sponsors

Underwriting requirements

Conversion (44- 1607(8-10), 1613, 1614)

Standard provisions

5.0 Individual Health Insurance Policy General Provisions and Clauses

5.1 Required Provisions (44-502)

Ownership

Assignment

Entire contract (44-502(3))

Right to examine (free look) (44-502.05)

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Payment of premiums (44-502(1))
Grace period (44-502(2))
Reinstatement (44-502(11))
Incontestability (44-502(5))
Misstatement of age or sex (44-502(6))
Exclusions (44-502(5))
Suicide
Consideration
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5.2 Beneficiaries

Insuring clause

Designation options

Individuals

Classes

Estates

Minors

Trusts

Succession

Primary

Contingent

Revocable versus irrevocable Common Disaster Clause

5.3 Settlement Options

Types of settlement options

Cash payment

Interest only

Fixed-period installments

Fixed-amount installments

Life income,

Single life

Joint and survivor

Retained asset account

Spendthrift clause

5.4 Nonforfeiture Options

Types of nonforfeiture options

Cash surrender value

Extended term

Reduced paid-up insurance

5.5 Policy Loan and Withdrawal Options

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Types of loans and withdrawals
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Policy loans

Automatic premium loans

Withdrawals or partial surrenders

5.6 Dividend Options

Dividend options

Cash

Reduction of premium/loan

Accumulation at interest

One-year term

Paid-up additions

Paid-up insurance

5.7 Policy Riders

Disability riders

Waiver of premium

Waiver of cost of insurance (Universal Life)

Disability income benefit

Guaranteed insurability

Accelerated (living) and long-term care benefits/riders

Conditions for payment

Effect on death benefit

Qualifying events

Disclosure

Exclusions and restrictions

Additional insureds

Spouse/other-insured term

Children's term

Family term

Riders affecting death benefit

Accidental death and dismemberment

Cost of living

Return of premium

6.0 Annuities 6%

6.1 Annuity Basics

Annuity concepts and uses

Accumulation/annuity periods

Owner

Annuitant

Beneficiary

	Death of owner	
Types o	f annuities	
.,,,,,,	Single premium	
	Fixed premium	
	Flexible premium	
	Immediate	
	Deferred	
Feature	s/aspects of annuities	
reacare	Nonforfeiture	
	Surrender charges	
Fixed ve	ersus variable annuities	
	Interest rate guarantees	
	Separate account	
	General account	
6.2 Payou	ut Options	
Life con	tingency benefit options	
	Pure life	
	Life with guaranteed minimum	
	Single life	
	Multiple life	
Annuity	certain payment options	
	Installments for a fixed period/amount	
	Taxation of Life Insurance and Annuities	4%
7.1 Gener	ral	
Taxatio	n of amounts available to policyowner	
	Cash value increases	
	Dividends	
	Loans	
	Surrenders	
	Accelerated benefits	
	Death benefit	
Taxatio	n of amounts received by the beneficiary	
	General rules and exceptions	
	Settlement options	
	Tax implications of estate as beneficiary	
Section	1035 exchanges	
Qualifie	d versus nonqualified annuities	

General requirements

Taxation of distributions/withdrawals/contributions	
Premature distributions	
During accumulation phase	
Annuity phase, exclusion ratio	
Modified endowment contracts (MECs)	
Modified endowment versus life insurance	
Seven-pay test	
Distributions	
8.0 Customer Relations and Privacy	1%
8.1 Networking and Client Support	
Product suitability	
8.2 Recording, Reporting, and Securing Client Information	
HIPAA privacy and security (EDI) rules	
Records maintenance and security	
Required disclosures	
Buyer's/shopper's guide	
HIV consent	
9.0 Sickness and Accident Risk and	
Underwriting	8%
9.1 Risk Management	
Risk management key terms	
Risk	
Exposure	
Hazard	
Peril	
Loss	
Methods of handling risk	
Avoidance	
Retention	
Sharing	
Reduction	
Transfer	
Other concepts affecting risk	
Elements of insurable risks	
Adverse selection	
Law of large numbers	
Reinsurance	
Indemnity	
Elements of insurable risk	

Due to chance

Definite and measurable

Statistically predictable

Not catastrophic

Randomly selected

9.2 Underwriting

Risk classifications

Preferred

Standard

Substandard

Allowable sources of underwriting information

Application

Producer report

Attending physicians' statement

Investigative consumer report

Medical information bureau (MIB)

Medical examinations and lab tests including HIV consent (RL 71-531)

Purpose and process of underwriting

Unfair discrimination (44-749)

Blindness

Genetic characteristics

Field underwriting

Application process

Common errors or omissions related to underwriting

Failing to give required disclosures

Misrepresenting client information

9.3 Replacement

Limitations and exclusions

Pre-existing conditions

Waiting periods

Replacement requirements

Notifications

Proof/certificate of creditable coverage

Suitability

9.4 Policy Delivery Requirements

Statement of good health

Policy review

10.0 Individual Accident and Sickness Insurance Policy General Provisions and Clauses

10.1 Risk Management

Individual optional provisions (44-710.04)

Change of occupation (44-710.04(1))

Age/gender misstatement (44-710.04(2))

Insurance with other insurers (44-710.04(4))

Other insurance in this insurer (44-710.04(3))

Unpaid premiums (44-710.04(7))

Cancellation (44-710.04(8))

Conformity with state statutes (44-710.04(9))

Illegal occupation (44-710.04(10))

Intoxicants and narcotics (44-710.04(11))

Individual policy mandatory provisions (44-710.03)

Time limit on certain defenses (44-710.03(2))

Physical exam and autopsy (44-710.03(10))

Legal actions (44-710.03(11))

Change of beneficiary (44-710.03(12))

Entire contract (44-710.03(1), .12)

Grace period (44-710.03(3))

Reinstatement (44-710.03(4))

Claims forms (44-710.03(5-9))

Notice of claims (44-710.03(5-9))

Proof of loss

Time of payment of claims (44-710.03(5-9))

Payment of claims (44-710.03(5-9))

Other provisions

Free look period (44- 710.18)

Insuring clause

Consideration clause

Coordination of benefits

Renewability clause

Renewability clauses (44-787)

Noncancelable

Guaranteed renewable

Conditionally renewable at option of insurer

Nonrenewable including cancelable and short-term health

Policy exclusions

Intentionally inflicted

War

Elective procedures

11.0 Disability	3%
11.1 General	
Total disability plans	
Indemnity policy versus loss of income	
Social Security disability programs	
Coordination of benefits	
Eligibility requirements	
Characteristics of disability income insurance	
Occupational versus non occupational	
Definition of disability	
Elimination period, waiting period, probationary period, and benefit period	
11.2 Types and Classes	
Short-term versus long-term group disability income insurance	
Business disability insurance	
Key person	
Buy-sell policy	
Individual versus group policies	
Total, partial, presumptive, and residual disability	
Qualification for individual disability income insurance benefits	
Own occupation and any occupation	
Effect of preexisting conditions on disability eligibility	
12.0 Medical Plans	6%
12.1 General	0,0
Difference between insureds and subscribers/participants	
Methods by which insurers control health care costs	
Coinsurance	
Copayments	
Deductibles	
Characteristics of HMOs, PPOs, EPOs, and POS	
Provider network	
Out of network	
Primary care	
Specialist	
Utilization review	
Prepaid	
Fee for service	

Expense based

Methods of cost containment

Utilization review

Preventive care

Second opinion

Hospital outpatient benefits

Urgent care centers

Characteristics of major medical plans.

Characteristics of excepted benefit plans

Marketplace to customize suitable insurance plans for businesses and individuals.

Types of excepted (limited) benefit plans

Accident only

Accidental death and dismemberment

Critical illness

Hospital indemnity

Vision and hearing

Characteristics of Flexible savings accounts (FSAs), Health savings accounts (HSAs), Health reimbursement accounts (HRAs), High Deductible Health Plans (HDHPs)

12.2 Affordable Care Act (ACA)

Eligibility requirements

Patient protections

No lifetime limits/annual limits

Guaranteed issue

Pre-existing conditions

Preventive care without cost sharing

Dependent age

Appeal rights

Maternity coverage

Newborn coverage

No recission

Emergency care

Enrollment periods

Definition of qualified health plan

Ten Essential Benefits

- 1. Ambulatory patient services
- 2. Emergency Services
- 3. Hospitalization
- 4. Pregnancy, maternity, and newborn care (both before and after birth)
- 5. Mental health and substance use disorder services, including behavioral health treatment (this includes counseling and psychotherapy)

- 6. Prescription drugs
- 7. Rehabilitative and habilitative services and devices (services and devices to help people with injuries, disabilities, or chronic conditions gain or recover mental and physical skills)
- 8. Lab results
- 9. Preventive and wellness services and chronic disease management
- 10. Pediatric services, including oral and vision care

Rate setting factors

Geographic rating area

Family composition

Age

Tobacco use

Non-discrimination

Types of ACA plans

Metal levels

Catastrophic

Premium tax credits and subsidies.

Federal versus state exchange/marketplace

Requirements for continuation of individual coverage, special enrollment period, and loss of minimum essential coverage

Events that lead to termination of coverage

12.3 Mental Health Parity and Addiction Equity Act (MHPAEA)

Purpose of Mental Health Parity and Addiction Equity Act

13.0 Group Plans 6%

13.1 General

Blanket policy

No loss/no gain statutes

Group underwriting (44-760)

General characteristics of group plans

Group contract, certificate of coverage

Experience versus community rating

Conversion (44-1613; 44-32, 130)

Contributory versus non-contributory

Types of eligible groups

Individual employer groups

Multiple-Employer Trusts/Welfare Arrangements

Associations

Coverage eligibility

Open enrollment

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Waiting periods
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Part-time employees

Dependent/spousal coverage

Domestic partners/civil unions

Small group and large group eligibility and renewability

Small Business Health Options Program (SHOP)

Types of funding and administration

Self-funded versus insured

Federal regulations of employer group insurance plans

Applicability

Fiduciary responsibilities

Effects on contributions

Reporting and disclosure requirements

ERISA

Eligibility and the benefits of continuation under COBRA (44-1640-1645)

Events that lead to termination of coverage

14.0 Dental Insurance 2%

14.1 General

Indemnity plans, PPO/HMO dental plans, prepaid dental plans

Stand-alone dental plan (SADPs)

Types of dental treatment/service categories

Endodontics

Orthodontics

Periodontics

Prosthodontics

Restorative care

Oral surgery

Diagnostic and preventive

Basic and major

The role of the federal health insurance marketplace in dental insurance

Cost sharing

Deductibles

Coinsurance

Copay

14.2 Group Plans

Characteristics of employer group dental insurance

Minimizing adverse selection

Integrated deductibles

15.1 Long-Term Care

Coverage eligibility

Underwriting

Preexisting conditions

Exclusions (Reg Ch 46 Sec 006(006.02))

Free look (44-3608; Reg Ch 36 Sec 017(017.01E))

Guaranteed renewability

Elimination and benefit periods

Policy options

Inflation protection

Guarantee of insurability

Return of premium

Nonforfeiture options

Waiver of premium

Benefit triggers

Activities of daily living

Cognitive impairment

Coverages

Home healthcare (Reg Ch 46 Sec 005(005.10), 010)

Hospice

Assisted living (Reg Ch 46 Sec 005(005.21))

Adult daycare (Reg Ch 46 Sec 005(005.02))

Respite care

Purpose and levels of care

Skilled

Intermediate

Custodial

Cancellations or unintentional lapses

Required disclosures

Outline of coverage (44-3607; Reg Ch 36 Sec 017(017.03))

Shopper's guide (Reg Ch 46 Sec 027)

Trusted contacts (secondary addressee)

Potential future rate increases and cost of living adjustments

15.2 Medicaid

Medicaid benefits

Medicaid eligibility requirements

The effects of the expansion of Medicaid benefits on long-term care and prescription drugs

15.3 Medicare

Medicare eligibility requirements

Role of primary and secondary insurance

Effects of employer group health plans on employees with disabilities and employees over 65

Part A: Hospital Insurance eligibility, enrollment, coverage, and exclusions

Part B: Medical Insurance eligibility, enrollment, coverage, and exclusions

Part C: Medicare Advantage Plans eligibility, enrollment, coverage, and exclusions

Part D: Prescription Drug Plans eligibility, enrollment, coverage, and exclusions

15.4 Medicare Supplements

Eligibility and enrollment (Reg Ch 36 Sec 011)

The purpose of Medicare Supplement Insurance (Reg Ch 36 Sec 001)

Standardized Medicare supplement plans and core benefits (Reg Ch 36 Sec 009)

Policy requirements

Free-look (44-3608; Reg Ch 36 Sec 017(017.01E))

Pre-existing conditions (44-4513(2, 3))

Medicare Supplement Replacement

Re-entry following Medicare Advantage

Pre-existing conditions

Waiting periods

16.0 Federal Tax Considerations for Sickness and Accident Insurance

2%

16.1 Premiums and Benefits

Tax treatment of premiums and benefits for sole proprietors, partners, and limited liability corporations

Tax treatment of premiums and benefits for employer group insurance

Medical

Disability income

Tax treatment of premiums and benefits for individual coverages

LTC

Medical expense

Health insurance

Tax consideration for Flexible spending accounts (FSAs), Health savings accounts (HSAs), and Health reimbursement accounts (HRAs)

16.2 Small Businesses

Tax considerations for Small Business Health Options Program (SHOP)

16.3 Disability

Tax considerations for disability insurance for personally-owned and employer/group health insurance

Tax considerations for Social Security Disability and Workers Compensation

Tax considerations for business disability insurance

Key person Buy-sell policy