

**Maryland Life and Health Producer
State and General Sections
Series 20-15 & 20-16
130 scored questions (plus 10 unscored)**

**Life and Health Producer State Section
Series 20-16
25 questions- 30-minute time limit**

1.0 Insurance Regulation

1.1 Licensing

20% (4 items)

General Provisions and Definitions

Purpose

Process (*Insurance Article Annotated Code- Sec. 10-118(b)(2); Sec. 10.109;
Sec. 10-103(c)(1)*)

Initial Licensure Qualifications

Examination

License fee & application

Types of licensees (*Insurance Article Annotated Code- Sec. 1-101(u)(1)*)

Producers

Advisers

Nonresidents

Business entities

Exceptions

Maintenance (*Insurance Article Annotated Code- Sec. 10- 211(e)(2)(i); Sec. 10-115;
Sec. 10-1-05; Sect. 10- 116(a)(2)(i);*)

Duration and termination

Address and/or name changes

Assumed names

Requirement to report felony convictions

Requirement to report other states actions

Continuing education

Appointment procedures (*Insurance Article Annotated Code- Sec. 1-101; Sec. 10- 118;
Sec. 27-209*)

Producer's contract with insurer versus producer's appointment with insurer

Poducer's appointment versus agency's appointment

Solicitation prior to appointment

Appointment requirement after becoming licensed

Acknowledgment of appointment/notice to producer

Requirement to cease solicitation

Termination of appointment/notice to producer

Termination of license without active appointment

Disciplinary actions (*Insurance Article Annotated Code- Sec. 1-301; Sec.
10- 126(e); Sec. 27-202*)

Probation, suspension, revocation or refusal to issue or renew

Cease and desist order

Penalties

Hearings/Notice of Hearings

Fraud (*Insurance Article Annotated Code- Sec. 27- 216(a)(1)(i); Sec. 2-401*)

1.2 State regulation

30% (6 items)

State Corporation Commission's general duties and powers (*Insurance Article
Annotated Code- Sec. 2-102(a); Sec. 2-103(a)(4); Sec. 2-204(b)(1); 16-601;*

Sec. 1-301; Sec. 2- 101; Sec. 10-126)
 Insurer Regulation (*Insurance Article Annotated Code- Sec. 15-204(B); Sec. 15-208(A)(1); Sec. 15-211(A); Sec. 18-105(1); Sec. 18- 106(b)(1); Sec. 27-501(a)(1)*)
 Forms
 Unfair Claims Settlement Practices
 Certificate of Authority
 Producer regulation (*Insurance Article Annotated Code- Sec. 27-209; Sec. 10-105; COMAR- Sec. 31.03.03*)
 Acting for an unlicensed insurer
 Record retention
 Activities of unlicensed individuals
 Payment and sharing of commissions
 Charging of fees
 Illegal compensation; exceptions
 Fiduciary capacity
 Responsibility of trust accounts
 Unfair trade practices (*Insurance Article Annotated Code- Sec. 27-304; Sec. 27-213; Sec. 27-305(a); Sec. 27-504(b)(1); COMAR- Sec. 31.15.02.12; Sec.31.15.02.18(A); Sec. 31.15.02.02; Sec.31.15.02.03(B)*)
 Misrepresentation
 False advertising
 Defamation
 Notice of Adverse Underwriting Decisions
 False statements and entries
 Rebating
 Twisting
 Referrals
 Insurance information and privacy protection

1.3 State Insurance Requirements (Specific to Life Insurance) 15% (3 items)

Policy Replacement (*COMAR- Sec. 31.09.05.10*)
 Definitions
 Provisions and Disclosure
 Group Life (*Insurance Article Annotated Code- Sec. 17-201(a); Sec. 17-202(b); Sec. 17-209(a)(2)(i)(ii)*)
 Eligibility
 Dependent Coverage
 Standard Provisions
 Conversion
 Assignment of Proceeds
 Life and Health Insurance Guaranty Corporation (*Insurance Article Annotated Code- Sec. 9-405(a)(2); Sec. 9-409(b); Sec. 9-402*)

1.4 Providers (Specific to Accident and Health Insurance) 10% (2 items)

Types of Providers
 Insurers (Annotated Code- Sec. 1-101)
 Non Profits Health Service Plans (*Insurance Article Annotated Code- Sec. 14-101 and 14- 102*)
 Health Maintenance Organizations (HMOs) (*COMAR Sec. 31.12.07.02(B)(3); Health General Article Annotated Code-Title 19 Subtitle 7- Sec. 19-701; Sec. 19-705*)
 Maryland Health Insurance Plan (*Insurance Article Annotated Code-Sec. 14- 501(h), 14- 502; Sec. 14-505*)

1.5 Plan requirements (Specific to Accident and Health Insurance) 20% (4 items)

- Eligibility requirements
 - Dependent child age limit
 - Coverage for adopted children
 - Newborn child coverage
 - Medical child support coverage
 - Intellectual disability and physical handicap dependent coverage
- Mandated or Required Offers (*Insurance Article Annotated Code- Sec. 15-407, 15- 408, 15-409; Sec. 15-801, 15-802, 15-810, 15-839*)
- Mandated or Required Benefits (*COMAR Sec. 31.10.06.08(B)(12); Insurance Article Annotated Code- Sec. 15-804(3); Sec. 15- 802, 15-838, 15- 841*)
- Other Requirements
 - Small Employer Health Insurance (*Insurance Article Annotated Code- Sec. 15-1204 (special note)(b); Sec. 15-1205; Sec. 15-1208(C); Sec. 15- 1201(e)*)
 - Medicare Supplement Insurance (*Insurance Article Annotated Code- Sec. 15-901; Sec. 15-906; Sec. 15-909; Sec. 15-910*)
 - Purpose and Definitions
 - Minimum Standards and Provisions
 - Eligibility
 - Disclosure and Marketing
 - Maryland Health Benefit Exchange
 - SHOP vs. Individual Exchange
 - Open Enrollment/Special Enrollment
 - Employer Choice Options in SHOP Exchange
 - Mandated Referrals

1.6 Insurance for Senior Citizens and Special Needs Individuals

5% (1 item)

- Maryland Long-Term Care (LTC) regulations and required provisions (*Tax General Article 10-710 - Sec. 10-718; Insurance Article Annotated Code- Sec. 18-101; Sec. 18- 104; Sec. 18-105*)
 - Standards for marketing
 - Advertising
 - Consumer guide
 - Outline of coverage
 - Suitability including personal worksheet
 - Right to return (free look)
 - Replacement
 - Renewal considerations
 - Continuation of benefits
 - Required disclosure provisions
 - Incontestability
 - Inflation protection
 - Unintentional lapse
 - Pre-existing conditions
 - Nonforfeiture benefit
 - Benefit triggers
- Long-Term Care (LTC) Insurance
 - Deductibility of Premiums for LTC Insurance for State Income Tax Purposes
- Maryland Medicare Supplement regulations and required provisions
 - Standards for marketing
 - Advertising
 - Appropriateness of recommended purchase and excessive insurance
 - Buyer's guide
 - Outline of coverage
 - Right to return (free look)
 - Replacement
 - Prohibited policy provisions

Minimum benefit standards
Required disclosure provisions
Pre-existing conditions
Permitted compensation
Guaranteed issue for eligible persons
Continuation and conversion requirements
Medicare SELECT

**Life and Health Producer General Section
Series 20-15**

115 questions- 120-minute time limit

2.0 General Insurance

8% (9 items)

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 assessment insurers
- Fraternal benefit societies

Private versus government insurers

Admitted versus nonadmitted insurers

Purchasing Groups

Government Plans

Domestic, foreign and alien insurers

Financial status (independent rating services) and operating results

Marketing (distribution) systems

Life and Health Insurance Guaranty Corporation

2.3 Producers and general rules of agency

Types

- Captive
- Independent

Insurer as principal

Producer of insurer

Authority and powers of producers

- 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

2.5 Federal regulation

- Fair Credit Reporting Act (15 USC 1681–1681d)
- Fraud and false statements (18 USC 1033, 1034)
- Variable Products
- Employee Retirement Income Security Act (ERISA)
 - Applicability
 - Fiduciary responsibilities
 - Reporting and disclosure
- COBRA
- Continuation
- ACA-Related Federal Market Reforms
 - Definitions
 - Individual health insurance coverage
 - Dependent coverage
 - Lifetime and annual limits
 - Restrictions relating to premium rates
 - Essential health benefits
 - Waiting periods

2.6 Industry Associations

- National Association of Insurance Commissioners (NAIC)
- NCOIL (National Conference of Insurance Legislators)
- Industry and Producer

3.0 Life Insurance Basics

14% (15 items)

3.1 Insurable interest

3.2 Personal uses of life insurance

- Survivor protection
- Estate creation
- Cash accumulation
- Liquidity
- Estate conservation
- Debt Protection on Personal Mortgages (only)

3.3 Viatical/Life Settlements

- Nature and Purpose
- Viatical Settlement, Broker Authority, and Licensing
- Disclosure to Consumers
- General Rules
- Fraudulent Acts
- Definitions
 - Chronically ill
 - Fraudulent Viatical Settlement Act
 - Terminally ill
 - Viatical Settlement broker
 - Viatical Settlement provider

Viatical settlement purchaser

Viator

3.4 Determining amount of personal life insurance

Human life value approach

Needs approach

Types of information gathered

Determining lump-sum needs

Planning for income needs

Social Security Benefits

3.5 Business uses of life insurance

Buy-sell funding

Key person

Executive bonuses

3.6 Classes of life insurance policies

Group versus individual

Ordinary

Industrial (Home Service)

Permanent versus term

Participating versus nonparticipating

Fixed versus variable life insurance and annuities

Regulation of variable products (FINRA)

Types of variable products

U.S. Government Plans

3.7 Premiums

Factors in premium determination

Mortality

Interest

Expense

Premium concepts

Net single premium

Gross annual premium

Premium payment mode

3.8 Producer responsibilities

Rules Governing Advertisement of Life Insurance and Annuities

Solicitation and sales presentations

Maryland Life, Accident and Sickness Insurance Guaranty Association

Advertising

Illustrations

Policy summary

Buyer's guide

Life Insurance Policy Cost Comparison Methods

Replacement

Use and disclosure of insurance information

Field underwriting

Notice of information practices

Adverse underwriting decisions

Application procedures

Required signatures

Changes in the application

Consequences of incomplete applications

Warranties and representations

Collecting the initial premium and issuing the receipt

Disclosures at point of sale (e.g., HIPAA, HIV consent)

USA PATRIOT Act/anti-money laundering

Delivery

Policy review

- Effective date of coverage
- Premium collection
- Statement of good health

3.9 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
- Selection criteria and unfair discrimination
- Discrimination against victims of domestic violence
- Classification of risks
 - Preferred
 - Standard
 - Substandard
 - Declined

4.0 Life Insurance Policies

8% (9 items)

4.1 Term life insurance

- Level term
 - Annual renewable term
 - Level premium term
 - Convertible Term

- Decreasing term
- Increasing term
- Return of premium

4.2 Whole life insurance

- Ordinary whole life
- Continuous premium (straight life)
- Limited payment
- Interest sensitive/current assumption
- Indexed life
- Equity indexed life
- Graded Premium
- Single premium
- Variable whole life
- Variable universal life

4.3 Flexible premium policies

- Adjustable life
- Universal life

4.4 Specialized policies

- Family (Family Protection and Family Plan)
- Joint life (first-to-die)
- Survivorship life (second-to-die)
- Juvenile/student life

4.5 Group life insurance

- Characteristics of group plans
- Types of eligible groups
 - Employer/employee
 - Debtor groups
 - Labor union groups
 - Trust
 - Associations
- Group underwriting requirements

- Benefit payments
- Covered dependents
- Lives covered
- Conversion to individual policy
- Contributory vs. noncontributory

4.6 Credit life insurance (individual versus group)

5.0 Life Insurance Policy Provisions, Options and Riders

11% (12 items)

5.1 Standard provisions

- Ownership
- Assignment
- Entire contract
- Right to examine (free look)
- Payment of premiums
- Grace period
- Reinstatement
- Incontestability
- Misstatement of age and misstatement of gender
- Exclusions
- Suicide
- War clause
- Interest on proceeds
- Prohibited provisions including backdating

5.2 Beneficiaries

- Designation options
 - Individuals
 - Classes
 - Estates
 - Minors
 - Trusts
- Succession
- Revocable versus irrevocable
- Annulment or divorce
- Common disaster clause
- Spendthrift clause
- Facility of Payment Clause

5.3 Settlement options

- Cash payment
- 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 loans

- Cash loans
- Automatic premium loans
- Withdrawals or partial surrenders
- Educational loans
- Automatic Option Required

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 benefit provision/rider

- Conditions for payment
 - Diagnosis of terminal illness
 - Diagnosis of catastrophic illness
 - Permanent confinement
 - Inability to perform ADLs
- Disclosure
 - Written disclosure required
 - Effect on death benefit
 - Cash value
 - Loans and loan interest
 - Tax consequences
 - Premium

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

6% (7 items)

6.1 Annuity principles and concepts

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

6.2 Immediate versus deferred annuities

- Single premium immediate annuities (SPIAs)
- Deferred annuities
 - Premium payment options
 - Nonforfeiture
 - Surrender charges
 - Bail-out provisions
 - 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)
 - Installments for a fixed period
 - Installments for a fixed amount

6.4 Annuity products

- Fixed annuities

- General account assets
- Interest rate guarantees (minimum versus current)
- Level benefit payment amount
- Variable Annuities
 - General Account Assets
 - Guarantees
 - Level Benefit Payment Amount
- Equity indexed annuities
- Market value adjusted annuities (modified guaranteed annuities)

6.5 Uses of annuities

- Lump-sum settlements
- Qualified retirement plans including group versus individual
- Personal uses
 - Individual retirement plans
 - Tax-deferred growth
 - Retirement income
 - Education funds
 - Charitable gift annuity
- Suitability in Annuity Transactions

7.0 Federal Tax Considerations for Life Insurance and Annuities

5% (6 items)

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 (tax issues related to withdrawals)
 - 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% (2 items)

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

9% (10 items)

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
- Vision
- Prescription
- AD&D (Accidental Death and Dismemberment)
- Specified Disease

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
 - Blanket insurance (teams, passengers, other)
 - Prescription drugs
 - Vision care
 - Critical illness (specified conditions)
 - Short-term medical

9.5 Common exclusions from coverage

- Pre-existing conditions
- Intentionally self-inflicted injuries
- War or act of war
- Elective cosmetic surgery
- Conditions covered by workers compensation
- Government plans
- Participation in a felony or illegal occupation

9.6 Producer responsibilities in individual health insurance

- Marketing requirements
 - Advertising
 - Prohibited Advertising of Life and Health Insurance
 - Maryland Life, Accident and Sickness Insurance Guaranty Association
 - Sales presentations
- Field underwriting
 - Nature and purpose

- Application procedures
- Requirements at delivery of policy
- Errors and Omissions
- Notification of Medicare eligibility

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)
- Unfair discrimination
- Discrimination against victims of domestic violence
- Genetic information privacy
- Classification of risks
 - Preferred
 - Standard
 - Substandard
 - Declined

9.8 Considerations in replacing health insurance

- Pre-existing conditions
- Pre-existing condition exclusion
- Benefits, limitations and exclusions
- Underwriting requirements

10.0 Individual Health Insurance Policy General Provisions

4% (4 items)

10.1 Uniform required provisions

- Entire contract; changes
- Time limit on certain defenses
- Grace period
- Reinstatement
- Notice of claim
- Claim forms
- Proofs of loss
- Time of payment of claims
- Payment of claims
- Physical examinations and autopsy
- Legal actions
- Change of beneficiary
- Cancellation by insured

10.2 Uniform optional provisions

- Change of occupation
- Misstatement of age
- Other insurance in this company
- Insurance with other companies
 - Expense-incurred basis
 - Other benefits
- Relation of Earnings to Insurance
- Unpaid premium
- Cancellation by company
- Conformity with state statutes
- Illegal occupation
- Intoxicants and narcotics

10.3 Other general provisions

- Right to examine (free look)
- Insuring clause
- Consideration clause
- Renewability clause
 - Noncancelable
 - Guaranteed renewable
 - Conditionally renewable
 - Renewable at option of insurer
 - Nonrenewable (cancelable, term)
- Interest on claim proceeds
- Military suspension provision

11.0 Disability Income and Related Insurance

6% (7 items)

11.1 Qualifying for disability benefits

- Inability to perform duties
 - Own occupation
 - Any occupation
- Pure loss of income (income replacement contracts)
- Presumptive disability
- Requirement to be under physician care

11.2 Individual disability income insurance

- Basic total disability plan
 - Income benefits (monthly indemnity)
 - Elimination and benefit periods
 - Waiver of premium benefit
- Partial Disability Insurance
 - Income Benefits (Monthly Indemnities)
 - Elimination and Benefit Periods
 - Waiver of Premium Benefit
- Coordination with Social Insurance
 - 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
 - Annual renewable term rider
 - Relation of earnings to insurance
 - Change of occupation
- Other cash benefits
 - Accidental death and dismemberment
 - Rehabilitation benefit
 - Medical reimbursement benefit (non disabling injury)
- Refund provisions
 - Return of premium
 - Cash value benefit
- Exclusions
- Waiver of Premium

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 employee (partner) disability income
- Business overhead expense policy
- Business Disability buyout 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

11% (12 items)

12.1 Medical plan concepts

- Fee-for-service basis versus prepaid basis
- Prepaid Basis
- Specified coverages versus comprehensive care
- Comprehensive Care
- Benefit schedule versus usual/reasonable/customary charges
- Usual - Reasonable - Customary Charges
- Any provider versus limited choice of providers
- Limited Choice of Providers
- Insureds versus subscribers/participants

12.2 Types of providers and plans

- Insurers
- Nonprofits Health Service Plans
- Major medical insurance (insurers)
 - Characteristics
 - Common limitations
 - Common exclusions from coverage
 - Deductibles
 - Coinsurance feature
 - Stop-loss feature
 - Maximum benefits

- Fixed Indemnity

- Health services plans

- Definitions
- Plans offered
- Other services
- Qualified providers
- Choice of provider or pharmacy
- Provider panels
- Disclosure of benefits
- Subscribers

- Health maintenance organizations (HMOs)

- Combined health care delivery and financing
- Limited service area/out of area benefits
- Limited choice of providers
- Gatekeeper concept
- Copayments
- Prepaid basis
- Preventive care services

- Primary care physician versus referral (specialty) physician
- Emergency care
- Hospital services
- Other basic services
- Subscribers

High Risk Pool

Preferred provider organizations (PPOs)

- General characteristics

- Open panel or closed panel

Point-of-service (POS) plans

- Nature and purpose

- Out-of-network provider access (open-ended HMO)

- PCP referral

- Indemnity plan features

TRI-CARE

12.3 Cost containment in health care delivery

Cost-saving services

- Preventive care

- Outpatient ambulatory services

- Alternatives to hospital services

Utilization management

- Prospective review

- Concurrent review

Coordination of Benefits

12.4 HIPAA (Health Insurance Portability and Accountability Act) requirements

Eligibility

Guaranteed issue

Pre-existing conditions

Creditable coverage

Renewability

12.5 Health Savings Accounts (HSAs) and Health Reimbursement Accounts (HRAs)

Definition

Eligibility

Contribution limits

12.6 Patient Protection and Affordable Care Act

Coverage of Children to Age 26

Preventative Care

Pre-existing Conditions

Lifetime and Annual Limits

Grandfathered vs. Non-Grandfathered Plans

Rescissions

Essential Health Benefits

Metal Levels

SHOP Payment and Billing

Internal Appeal and External Review

Subsidies/Tax Credits

Penalties and Fines

13.0 Group Health Insurance

4% (4 items)

13.1 Characteristics of group insurance

Group contract

Certificate of coverage

Experience rating versus community rating

Community Rating

13.2 Defined groups

Employer

- Creditor
- Labor union
- Multiple Employer Trust
- Association
- Credit union

13.3 Marketing considerations

- Advertising
- Regulatory jurisdiction/place of delivery

13.4 Employer group health insurance

- Insurer underwriting criteria
 - Characteristics of the 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
 - Reinstatement of Coverage for Military Personnel
 - Notification of Medicare Eligibility
 - Reinstatement of coverage for military personnel
 - Notification of Medicare eligibility
 - Extension of benefits
 - Continuation of coverage under COBRA and Maryland specific rules
 - Conversion privilege
- Continuation of Coverage
- Special Enrollment Periods
- Minimizing Adverse Selection

13.5 Small employer medical plans

- Definition of small employer
- Availability of coverage
- Disclosure of coverage provisions
- Enrollment eligibility
- Renewability

14.0 Dental Insurance

1% (1 items)

14.1 Types of dental treatment

- Diagnostic and preventive
- Restorative
- Oral surgery
- Endodontics
- Periodontics
- Prosthodontics
- Orthodontics

14.2 Indemnity plans

- Choice of providers
- Scheduled versus nonscheduled plans
- 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

7% (8 items)

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 supplement insurance

- Purpose
- Open enrollment
- Rating of Medicare supplement plans
 - Attained age
 - Issue age
 - Community rated
- Standardized Medicare supplement plans
 - Core benefits
 - Additional benefits
 - High deductible plans

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) policies

- LTC, Medicare and Medicaid compared
- Eligibility for benefits
- Levels of care
 - Skilled care
 - Intermediate care
 - Custodial care
 - Home health care
 - Adult day care
 - Respite care
- Benefit periods
- Benefit amounts

- Optional benefits
 - Inflation Protection
 - Nonforfeiture
 - Guarantee of insurability
 - Return of premium
- Qualified and Nonqualified
- Exclusions
- Underwriting Considerations
- Partnership
- Qualified LTC plans
- Deductibility of premiums for LTC insurance for state income tax purposes
- Exclusions
- Underwriting considerations

15.5 Interaction with Other Coverage

- Medicare
- Medicaid
- Medical Insurance

16.0 Federal Tax Considerations for Health Insurance

4% (4 items)

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)
- 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
- Business overhead expense
- Business Disability Buyout

16.5 Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), and Flexible Spending Accounts (FSAs)

- Health Savings Accounts
- Health Reimbursement Accounts
- Flexible Spending Accounts
- High Deductible Health Plans