

Oklahoma Life Accident and Health Insurance Producer

Section: Oklahoma Insurance Exams • Total Questions: 10 • Format: Verified Q&A

1. What would happen if the insured dies during the grace period and premiums have NOT been paid?

- (A) Policy would be payable, less the premium amount.
 - (B) Policy would be viewed as lapsed.
 - (C) Claims on the policy would be denied.
 - (D) Policy would be payable if the insured's heirs pay the premium.
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2. Under the Consolidated Omnibus Budget Reconciliation Act (COBRA) guidelines, an employer with 20 or more employees must administer continuing health insurance to a former employee for at least

- (A) 12 months.
 - (B) 18 months.
 - (C) 24 months.
 - (D) 30 months.
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3. An insured's inability to perform any or all of the duties of their occupation at the time a disability begins is known as

- (A) any occupation.
 - (B) presumptive occupation.
 - (C) own occupation.
 - (D) restrictive occupation.
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4. When a life policy is replaced, the required duties of the life producer include all of the following EXCEPT

- (A) obtain a signed statement from the applicant.
 - (B) copy of sales materials.
 - (C) issue a refund on the replaced policy.
 - (D) give the applicant Notice of Replacement.
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5. An insured individual has major medical insurance with first dollar coverage. How does the first dollar coverage impact benefits paid?

- (A) A specified percentage of each expense is paid by the insurance company, and the insured must pay the remainder of the claim.
 - (B) The individual must pay a specified dollar amount toward each expense before the insurance company will pay.
 - (C) Expenses are reimbursed at a scheduled amount, and any additional payments by the insured go toward the deductible.
 - (D) No deductible payment is required before expenses are reimbursed.
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6. Which of the following is one of the MAIN tasks of a field underwriter?

- (A) Ensure the accuracy and completeness of an individual's medical information.
 - (B) Approving an individual's policy.
 - (C) Obtaining a Medical Information Bureau (MIB) report.
 - (D) Editing an applicant's report to ensure approval.
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7. An individual accident and sickness policy may NOT be contested, EXCEPT for non-payment of premiums, after it has been in force for how long?

- (A) 6 months
 - (B) 1 year
 - (C) 2 years
 - (D) 5 years
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8. How are benefits treated for tax purposes if an individual is receiving disability insurance benefits from a group policy paid for by his employer?

- (A) They are not taxable.
 - (B) They are taxable income.
 - (C) They are only subject to Social Security and FUTA taxes.
 - (D) They can be deducted from gross income.
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9. In an individual disability policy, when should the written notice of claim be given to the insurer?

- (A) within 20 days after the occurrence or commencement of any loss covered by the policy
 - (B) 21 to 30 days after the occurrence or commencement of any loss covered by the policy
 - (C) 31 to 45 days after the occurrence or commencement of any loss covered by the policy
 - (D) 60 days after the occurrence or commencement of any loss covered by the policy
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10. Which of the following is TRUE with regard to benefits and rights for a pregnant new enrollee or dependents?

- (A) Pregnancy-related conditions may be considered in hiring a new enrollee, but not in promoting or evaluating a current enrollee.
- (B) Women who take leave for pregnancy beyond 8 weeks cannot be denied accrual of seniority during the portion of the leave that exceeds 8 weeks.
- (C) Benefits cannot be denied to a new enrollee for medical costs arising from an existing pregnancy.
- (D) Temporary disability for pregnancy-related causes results in lower benefits than temporary disability for work-related causes.