

Wisconsin Accident and Health: General and State

Series 22-03

100 questions – 2-hour time limit

1.0 Insurance Regulation 35% (35 Items)

1.1 Licensing

Purpose (*ch. 628*)

Persons required to be licensed

Ref: s. 618.41, ch. 628, s. 628.02(1),

s. 628.02(3), s. 628.02(4), s. 628.02(4g), s. 628.02(4m), s. 628.02(4p), s. 628.02(5),

s. 628.03, s. 628.04, s. 628.49,

s. 632.69(1)(b) and (c),

s. 632.69(2), s. Ins 6.58, s. Ins 42.01, s. Ins 42.03, s. Ins 47

License Requirements

Ref: ch. 26, s. 628.03, s. 628.04, s. 628.04(2), s. 628.34, s. 628.51, 632.69(1)(b) and (c), 632.69(2), s. Ins 6.59, s. Ins 6.59(4)(a),

s. Ins 6.59(4)(c)

Record keeping, maintenance, and duration

Renewal

Continuing education requirements

Reinstatement

Assumed name

Change of address or telephone number

Reporting of actions

Ref: s. 601.42, s. 628.04, s. 628.08, s. 628.09, s. 628.09(6), s. 628.11, s. Ins 6.57, s. Ins 6.61, s. Ins 6.63(3), s. Ins 28.04(1)(a),

s. Ins 28.04(1)(f), s. Ins 28.04(2)(a),

s. Ins 28.04(2)(b), s. Ins 28.06(6)

Disciplinary actions

License termination, suspension, or revocation

Monetary forfeiture (fines)

Ref: s. 601.31, s. 601.64, s. 628.10(1),

s. 628.10(2), s. 628.10(3), s. 628.345(1)(b), s. 628.345(2), s. 628.345(3)(a),

s. 628.345(3)(d), s. 628.345(3)(e),

s. 628.345(3)(f), s. Ins 6.63

1.2 State Regulation

Commissioner's general duties and powers

Duties

Ref: s. 601.41, s. 601.42

Hearings

Ref: ch. 227, s. 227.12, s. 601.41, s. 601.62, s. 601.64, s. 628.10, s. Ins 6.59

Penalties

Ref: s. 601.64, s. 601.65

Wisconsin Insurance Security Fund

Ref: ch. 227, s. 227.12, s. 601.41, s. 601.41(4), s. 601.42, s. 601.42(4), s. 601.62, s. 601.62(5), s. 601.64, s. 601.64(2), s. 601.64(3),

s. 601.64(3)(d), s. 601.64(4), s. 601.65,

s. 628.10, s. 628.10(2)(b), s. Ins 6.59, ch. 646

Company regulation
Solvency
Responsibilities of the insurer
Rates
Use of Policy forms
Readability
Producer appointments/terminations
Unfair claims, methods, and practices
Notice of right to file complaint
<i>Ref: s. 628.11, s. 628.40, s. 631.20,</i>
<i>s. 631.20(3), s. 631.22, s. 631.28, s. Ins 6.07, s. Ins 6.11, s. Ins 6.11(3), s. Ins 6.55,</i>
<i>s. Ins 6.55(4)(b), s. Ins 6.57, s. Ins 6.85</i>
Producer regulation
Fiduciary and trust account responsibilities
Place of business/records maintenance
Compensation of agents
<i>Ref: ch. 626 subch. IV</i>
Controlled business
<i>Ref: s. 628.51</i>
Shared commissions
<i>Ref: s. 628.61</i>
Proper exchange of business
<i>Ref: s. 628.32, s. 628.51, s. 628.61, s. Ins 6.66</i>
Marketing practices
Misrepresentation
<i>Ref: s. 628.34 (1)</i>
False advertising
<i>Ref: s. 628.34 (1)</i>
Rebating
<i>Ref: s. 628.34 (2)</i>
Unfair discrimination
<i>Ref: s. 628.34 (3)</i>
Boycott, coercion, or intimidation
<i>Ref: s. 628.34 (4)</i>
Illegal inducement
<i>Ref: ch. 20, s. 628.34(1) – (14),</i>
<i>s. Ins 6.54, s. Ins 6.55,</i>
<i>s. Ins 6.67, s. Ins 6.68</i>
Examination of records
<i>Ref: s. 601.43, s. 601.43(1)(b), s. 601.43(1)(c), s. 601.43(2)(a), s. 601.45, s. 601.49,</i>
<i>s. Ins 16.01, s. Ins 26.10, s. Ins 26.10(3),</i>
<i>s. Ins 28.10, s. Ins 28.10(3)</i>
General statutes, rules, and regulations affecting insurance contracts
Definitions
Specific knowledge
Misrepresentation/Warranties
<i>Ref: s. 628.34</i>

Knowledge and acts of the agent
<i>Ref: s. 628.40</i>
Certificates of Insurance
<i>Ref: s. 628.34, ch. 631, s. 631.08, s. 631.09, s. 631.11, s. 631.28, ch. 632</i>
Regulation of specific clauses in insurance contracts
Cancellation
<i>Ref: s. 631.36</i>
Renewal/Nonrenewal
<i>Ref: s. 631.36</i>
Notice of proof of loss
<i>Ref: s.631.81</i>
Payment of claims
<i>Ref: s. 102.31(2)(a), s. 102.31(2)(b)(1), s. 102.315(10)(a)(4), s. 102.315(10)(a)3, s. 102.315(10)(b)3, s. 628.46, s. 631.43, s. 631.48, s. 631.81, s. 632.36(1-2), s. Ins 18.10, s. Ins 21.01(4)(a-c), s. Ins 21.01(5), s. Ins 21.01(6), s. Ins 21.01(10), s. Ins 21.01(11), s. Ins 6.11, s. Ins 6.77</i>
Privacy of Consumer Information
<i>Ref: s. 610.70, s. Ins 25</i>
1.3 Federal Regulation
Fair Credit Reporting Act (15 USC 1681–1681d)
Fraud and false statements (18 USC 1033, 1034)
HIPAA
1.4 Wisconsin statutes, rules, and regulations pertinent to disability (A&H) insurance
Policy provisions
Right to return a policy
<i>Ref: s.632.73</i>
Right of insurer to contest
Preexisting conditions
<i>Ref: s. 632.746</i>
Application responsibilities
Grace period
<i>Ref: s. 632.78</i>
Disclosure requirements
<i>Ref: s. 628.32, s. 632.797</i>
Continuation privileges
<i>Ref: s. 632.897</i>
Independent review
<i>Ref: s. 632.835, s. Ins 18.10 (1), s. Ins 18.10 (2), s. Ins 18.11</i>
Grievance
<i>Ref: s. 628.32, s. 632.73, s. 632.745(11), s. 632.746(1), s. 632.76(1), s. 632.76(2), s. 632.76(2)(ac), s. 632.78(1), s. 632.83,</i>

*s. 632.835, s. 632.897, s. 635.02(7), s. 635.11, s. Ins 18.01(4), s. Ins 18.01(6), s. Ins 18.02(1), s. Ins 18.10, s. Ins 18.105, s. Ins 18.11(2)(a)4, s. Ins 3.28, s. Ins 3.33, s. Ins 3.39(27),
s. Ins 3.43, s. Ins 3.44, s. Ins 3.46(14), s. Ins 3.60(6) – (7), s. Ins 8.48*

Coverages

Nurse practitioners

Ref: s. 632.87 (5)

Optometrists

Ref: s. 632.87(2), s. 632.87 (2m)

Chiropractic benefits

Ref: s. 632.87, s. 632.87 (3), s. 632.875

Handicapped children

Ref: s. 632.88

Alcohol, drug abuse, mental, and nervous disorders

Ref: s. 609.05(3), s. 609.655, s. 632.89, s. 632.895(12m)

Home care

Ref: s. Ins 3.54, s. 632.895 (2)

Skilled nursing facility

Ref: s. 632.895(3), s. Ins 3.39 (5t) (d) 7

Kidney disease

Ref: s. 632.895(4), s. Ins 3.39 (5t) (d) 7

Diabetes

Ref: s. 632.895(6)

Newborn children

Ref: s. 632.895(5), s. Ins 3.38

Maternity benefits for dependent children

Ref: s. 632.895(7)

Adopted children

Ref: s. 609.75, s. 631.07(3)(a)3.m, s. 632.896

Grandchildren

Ref: s. 632.895(5m)

Mammograms

Ref: s. 609.80, s. 632.895(8)

Lead poisoning screening

Ref: s. 632.895(10)

Temporomandibular joint disorders

Ref: s. 632.895(11)

Hospital and ambulatory surgery center charges & anesthetics for dental care

Ref: s. 632.895(12)

Autism spectrum

Ref: s. 632.895(12m), s. Ins 3.36

Breast reconstruction

Ref: s. 632.895(13)

Immunizations for children

Ref: s. 632.895(14)

Student on medical leave

Ref: s. 632.895(15)

Hearing aids, cochlear implants, and related treatment for infants and children
<i>Ref: s. 632.895(16)</i>
Colorectal cancer screening
<i>Ref: s. 632.895(16m), s. Ins 3.35</i>
Contraceptives and services
<i>Ref: s. 632.895(17)</i>
Emergency medical services
<i>Ref: s. 632.85</i>
Prescription drugs and devices
<i>Ref: s. 632.853, s. Ins 3.67(2)</i>
Experimental treatment
<i>Ref: s. 632.855, s. Ins. 3.67(3)</i>
Requirements relating to HIV
<i>Ref: s. 149.12(1), s. 631.90, s. 631.93, s. 632.895(9), s. Ins 3.53</i>
Cancer clinical trials
<i>Ref: s. 609.05(3), s. 609.655, s. 609.75, s. 609.80, s. 628.34, s. 631.07(3)(a)3.m, s. 631.93, s. 632.85, s. 632.853, s. 632.855, s. 632.87, s. 632.87(1) - s. 632.87(2), s. 632.87(5) (6), s. 632.88, s. 632.89, s. 632.89(2), s. 632.895, s. 632.895(3) – (14), s. 632.896, s. 632.875, s. Ins 3.35, s. Ins 3.36, s. Ins 3.37 s. Ins 3.38, s. Ins 3.47, s. Ins 3.54, s. Ins 3.67(2) - (3)</i>
Prescription Eye Drops
<i>Ref: s.632.895 (16t)</i>
Oral and Injected Chemotherapy
<i>Ref: s. 632.867</i>
Step therapy protocols
<i>Ref: s. 632.866</i>
Marketing methods and practices
Advertising
<i>Ref: s. Ins 3.27</i>
Suitability
<i>Ref: s. Ins 3.27 (7)</i>
Outline of coverage
<i>Ref: s. Ins 3.27 (8)</i>
Policy replacement
<i>Ref: s. Ins 3.29</i>
Interstate insurance product regulation compact
<i>Ref: s. 601.58, s. 628.34, s. Ins 3.27, s. Ins 3.27(1), s. Ins 3.27(12) – (13), s. Ins 3.27(22) – (24), s. Ins 3.27(5) – (5a), s. Ins 3.27(7) – (9), s. Ins 3.29, s. Ins 3.39(15), s. Ins 3.46, s. Ins 3.46(22), s. Ins 6.90</i>
Long-term care insurance
<i>Ref: s. Ins 3.46</i>
Long-term care partnership program
<i>Ref: s. Ins 3.46 (9), s. Ins 3.46 Appendix 5</i>
Agent training requirements
<i>Ref: s. 632.825, s. Ins 3.46, s. Ins 3.465</i>
Requirements for group health policies
Special provisions
Disclosure requirements

Termination/nonrenewal regulation
Fair marketing standards
<i>Ref: s. 600.03(35)(a), s. 625.13, s. 632.746(6, 7, 9, 10), s. 632.747, s. 632.748, s. 632.749, s. 632.7495, ch. 635, s. 635.11, s. 635.18, s. 635.19, s. Ins 3.13(3), s. Ins 3.33, ch. Ins 8, s. Ins 8.48, s. Ins 8.68</i>
Medicare supplement
<i>Ref: s. 628.34, s. 632.84, s. Ins 3.27, s. Ins 3.39</i>
Short-term medical policies
<i>Ref: s. 632.7495(4)</i>
Interstate insurance product regulation compact
<i>Ref: s. 601.58</i>
2.0 General Insurance 10% (10 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 companies
Fraternal benefit societies
Reciprocals
Lloyd's associations
Risk retention groups
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 producer
Express

Implied
Apparent
The law of agency
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 Accident and Health Insurance Basics 8% (8 Items)
3.1 Definitions of perils
Accidental injury
Sickness, medical necessity and emergency
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
Self-funded vs fully insured
Limited versus comprehensive
Employer group versus association group
3.4 Limited policies
Limited coverage 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
Hearing
Dental
3.5 Common exclusions from coverage
3.6 Licensee responsibilities in individual health insurance
Marketing requirements
Advertising
<i>Ref: s. Ins 3.27</i>
Wisconsin Insurance Security Fund
<i>Ref: ch. 646</i>
Sales presentations
Outline of coverage
<i>Ref: ch. 646s. Ins 3.27, s. Ins 3.27 (5) (L)</i>
Compensation disclosure
<i>Ref: s. 628.32</i>
Underwriting
Nature and purpose
Employee waiver form
Disclosure of information about individuals
Application procedures
Warranties and Representations
Requirements at delivery of policy
Effective date of coverage
Policy review
Premium collection
Statement of good health
Individual and small employer health insurance application
Common situations for errors/omissions
3.7 Individual underwriting by the insurer
Underwriting criteria
Sources of underwriting information
Application
Licensee report
Attending physician statement
Investigative consumer (inspection) report
Medical Information Bureau (MIB)
Medical examinations and lab tests (including HIV consent)
Unfair discrimination
Genetic Information and Nondiscrimination Act of 2008 (GINA)
Classification of risks
Preferred
Standard
Substandard

3.8 Considerations in replacing accident and health insurance
Pre-existing conditions
Benefits, limitations and exclusions
Underwriting requirements
Licensee liability for errors and omissions
Required notification
3.9 Other required, uniform and general provisions
Incontestability
Grace period
<i>Ref: s. 632.78</i>
Reinstatement
Claim procedures
Claim forms
Time of payment of claims
<i>Ref: s. 628.46</i>
Notice of claim
<i>Ref: 631.81</i>
Proof of Loss
<i>Ref: 631.81</i>
Change of occupation
<i>Ref: 632.77</i>
Misstatement of age
<i>Ref: s. 632.77</i>
Coordination of benefits
<i>Ref: s. Ins 3.40</i>
Right to examine (free look)
<i>Ref: s. 632.73</i>
Rights of spouse - continuation
<i>Ref: s. 632.897 (4)</i>
Insuring clause
Consideration clause
Entire contract; changes
Physical examinations and autopsy
Legal actions
Unpaid premium
Conformity with state statutes
Illegal occupation
Coinsurance
Probationary period
Elimination period
Exclusions
Renewability clause
Noncancelable
Guaranteed renewable
<i>Ref: s. 632.7495</i>
Conditionally renewable
Renewable at option of insurer

Nonrenewable (cancelable, term)
4.0 Disability Income and Related Insurance 8% (8 Items)
4.1 Qualifying for disability benefits
Inability to perform duties
Own occupation
Any occupation
Recurrent
Residual
Loss of income (income replacement contracts)
Definition of total disability
Presumptive disability
Requirement to be under physician care
4.2 Individual disability income insurance
Basic total disability plan
Income benefits (monthly indemnity)
Elimination and benefit periods
Waiver of premium feature
Probationary period
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
Other cash benefits
Accidental death and dismemberment
Rehabilitation benefit
Medical reimbursement benefit (nondisabling injury)
Refund provisions
Return of premium
Cash surrender value
Exclusions
4.3 Unique aspects of individual disability underwriting
Occupational considerations
Benefit limits
Policy issuance alternatives
Rating system for life; Issue the policy rated up; issue policy with exclusion; decline the policy
4.4 Group disability income insurance
Group versus individual plans
Short-term disability (STD)
Long-term disability (LTD)
Coordination of benefits (Workers' compensation benefits and social insurance)

4.5 Social Security disability
Qualification for disability benefits
Definition of disability
Waiting period
Disability income benefits
5.0 Medical Plans 8% (8 Items)
5.1 Medical plan concepts
Fee-for-service basis versus prepaid basis
Specified coverages versus comprehensive care
Benefit schedule versus usual/reasonable/customary charges
Any provider versus limited choice of providers
Insureds versus subscribers/participants
Dependent coverage
<i>Ref: s. 632.885, s. 632.895 (5), s. 632.896</i>
Provisions and Clauses
Deductibles
Stop-Loss Provision in relation to out-of-pocket expenses
5.2 Types of providers and plans
Major medical insurance (indemnity plans)
Characteristics
Common limitations
Exclusions from coverage
Provisions affecting cost to insured
Defined contribution plans
Health maintenance organizations (HMOs)
General characteristics
Preventive care services
Primary care physician versus referral (specialty) physician
Emergency care
Hospital services
Other basic services
Preferred provider organizations (PPOs)
General characteristics
Limited health plans
Open panel or closed panel
Types of parties to the provider contract
5.3 Cost containment in health care delivery
Cost-saving services
Managed Care
Preventive care
Hospital outpatient benefits
Alternatives to hospital services
Maternity stay minimum limits
Preauthorization
Gatekeeper
Utilization management
Prospective review

Concurrent review
5.4 State requirements (individual and group)
Eligibility requirements
Newborn child coverage
<i>Ref: s. 632.895 (5)</i>
Dependent child age limit
<i>Ref: s. 632.885</i>
Court ordered dependency coverage
Eligibility of dependent children not based solely on residency
Policy extension for handicapped children
<i>Ref: s. 632.88</i>
Adoptions
<i>Ref: s. 632.896</i>
Federal health care reform required dependent coverage
Grandchildren
<i>Ref: s. 632.895 (5m)</i>
Benefit offers
Substance abuse coverage
<i>Ref: s. 632.89</i>
5.5 HIPAA (Health Insurance Portability and Accountability Act) requirements
Eligibility
Terms
Privacy
Guaranteed issue
Creditable coverage
Renewability
5.6 Health Savings Accounts (HSAs) and Health Reimbursement Accounts (HRAs)
Definition
Eligibility
Contribution limits
Portability
5.7 Federal Health Care Reform (Affordable Care Act)
Major Provisions
Market wide reforms
Guarantee issue
Essential Health Benefits
No annual limits for essential benefits
Coverage for pre-existing conditions
All plans have certain levels of coverage (platinum, gold, silver, bronze, catastrophic)
5.8 Health Insurance Exchange
Individual exchange
Qualified health plan certification
Premium tax credits which may be taken in advance
Reduced cost sharing if silver plan is purchased
Opportunity to purchase through the federal exchange call center, online or mail
Comparison shopping tools
Single application

6.0 Group Accident and Health Insurance 8% (8 Items)
6.1 Characteristics of group insurance
Group contract
Certificate of coverage
Experience rating versus community rating
Contributory versus noncontributory
6.2 Types of eligible groups
Employment-related groups
Individual employer groups
Multiple-Employer Trusts (METs) or Welfare Arrangements (MEWAs)
<i>Ref: s. Ins 8</i>
Associations (alumni, professional, other)
Customer groups (depositors, creditor-debtor, other)
Discretionary groups
6.3 Marketing considerations
Advertising
<i>Ref: s. Ins 3.27</i>
Unfair inducements
<i>Ref: s. 628.34 (2)</i>
Regulatory jurisdiction/place of delivery
6.4 Employer group health insurance
Insurer underwriting criteria
Characteristics of group
Plan design factors
Persistency factors
Administrative capability
Eligibility for insurance
Annual open enrollment
Probationary period
Employee eligibility
<i>Ref: s. 6.32.745(5)</i>
Dependent eligibility
<i>Ref: s. 632.746 (10)</i>
Coordination of benefits provision
<i>Ref: s. Ins 3.40</i>
Change of insurance companies or loss of coverage
Coinsurance and deductible carryover
No-loss no-gain
Events that terminate coverage
Continuation of coverage under COBRA
Eligibility
Duration of Coverage
Premium
State continuation
<i>Ref: s. 632.897</i>
Reinstatement of coverage for military personnel
<i>Ref: s. 632.885 (2) (b) 3</i>

6.5 Small employer medical plans
Definition of small employer
<i>Ref: s. 635.02 (7)</i>
Availability of coverage
Rating of small employer plans
Benefit choices
Defined contribution arrangement market
Renewability of coverage
Participation requirements
Open enrollment
6.6 Regulation of employer group insurance plans
Employee Retirement Income Security Act (ERISA)
Applicability
Fiduciary responsibilities
Reporting and disclosure
Age Discrimination in Employment Act (ADEA)
Applicability to employers and workers
Permitted reductions in insured benefits
Permitted increases in employee contributions
Requirements for medical expense coverage
Civil Rights Act/Pregnancy Discrimination Act
Applicability
Guidelines
Relationship with Medicare
Medicare secondary rules
Medicare carve-outs and supplements
Nondiscrimination rules (highly-compensated)
6.7 Types of funding and administration
Conventional fully-insured plans
Fully self-funded (self-administered) plans
Characteristics
Conditions suitable for self-funding
Benefits suitable for self-funding
7.0 Dental Insurance 4% (4 Items)
7.1 Categories of dental treatment
Diagnostic and preventive
Restorative
Oral surgery
Endodontics
Periodontics
Prosthodontics
Orthodontics
7.2 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
7.3 Employer group dental expense
Integrated deductibles versus stand-alone plans
Minimizing adverse selection
8.0 Medicare 8% (8 Items)
8.1 Medicare standard policies
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
8.2 Medicare supplement
Purpose
Open enrollment
Standardized Medicare supplement plans
Core benefits
Additional benefits
Regulations and required provisions
Standards for marketing
Advertising
<i>Ref: s. 3.27, s. 3.39 (24)</i>
Appropriateness of recommended purchase and excessive insurance
Right to return (free look)
Replacement
Pre-existing conditions
Required disclosure provisions
Outline of coverage
Guide to Health Insurance for People with Medicare
Permitted compensation
New plans effective January 1, 2020
<i>Ref: s. 3.39 (4t)</i>
8.3 Other options for individuals with Medicare
Employer group health plans

Disabled employees
Employees with kidney failure (End Stage Renal Disease) (ESRD)
Individuals age 65 and older
Medicaid
Eligibility
Benefits
8.4 Medicare Access and CHIP Reauthorization Act of 2015 (MACRA)
<i>Ref: s. Ins 3.39(3g)</i>
9.0 Long-Term Care Insurance 8% (8 Items)
9.1 Long-term care (LTC) policies
<i>Ref: s. Ins 3.46</i>
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
Guarantee of insurability
Return of premium
Tax Qualified LTC plans
<i>Ref: s. Ins 3.46 (18)</i>
Exclusions
Underwriting considerations
<i>Ref: s. Ins 3.46 (10)</i>
Regulations and required provisions
Standards for marketing
<i>Ref: s. Ins 3.46 (23)</i>
Advertising
<i>Ref: s. Ins 3.46 (7), s. Ins 3.46 (19) (a), s. Ins 3.46 (22), S. Ins 3.46 (23)</i>
Shopper's guide
<i>Ref: Guide to Long-Term Care - OCI Publication</i>
Outline of coverage
<i>Ref: s. Ins 3.46 (8)</i>
Appropriateness of recommended purchase
<i>Ref: s. Ins 3.46 (10) (a), s. Ins 3.46 (16)</i>
Right to return (free look)
Replacement
<i>Ref: s. Ins 3.46 (14)</i>
Renewal provisions
Continuation or conversion
<i>Ref: s. Ins 3.455 (7)</i>
Required disclosure provisions

<i>Ref: s. Ins 3.46 (9)</i>
Inflation protection
<i>Ref: s. Ins 3.46 (11)</i>
Pre-existing conditions
<i>Ref: s. Ins 3.46 (4) (m) 1</i>
Protection against unintentional lapse
<i>Ref: s. Ins 3.46 (15)</i>
Prohibited provisions
Rate disclosure form
<i>Ref: s. Ins 3.455 (9), s. Ins 3.455 (9m)</i>
10.0 Federal Tax Considerations for Accident and Health Insurance 3% (3 Items)
10.1 Personally-owned health insurance
Disability income insurance
Medical expense insurance
Long-term care insurance
Flexible Spending Accounts (FSAs)
High Deductible Health Plans (HDHPs)
10.2 Employer group health insurance
Disability income (STD, LTD)
Benefits subject to FICA
Medical and dental expense
Long-term care insurance
Accidental death and dismemberment
Flexible Spending Accounts (FSAs)
High Deductible Health Plans (HDHPs)
10.3 Medical expense coverage for sole proprietors and partners
10.4 Business disability insurance
Key person disability income
Buy-sell policy
Business overhead expense
10.5 Health Savings Accounts (HSAs) and Health Reimbursement Accounts (HRAs)