

ARKANSAS HEALTH PRODUCER CONTENT OUTLINE

100 scoreable questions plus 10 pretest questions

150 minutes - 70% Minimum Passing

HEALTH ARKANSAS SPECIFIC CONTENT OUTLINE

30 scoreable questions plus 5 pretest questions

60 minutes - 70% Minimum Passing

ARKANSAS STATUTES, RULES, AND REGULATIONS COMMON TO LIFE AND HEALTH INSURANCE

The Insurance Commissioner (Ref: 23-60-108; 23-61-102, 103, 108, 110, 201, 202, 301-307)

Appointment

General duties and powers

Examination of records

Hearings/notice of hearings/orders

Penalties

Definitions (Ref: 23-60-102; 23-63-201, 202; 23-69-102; 23-74-105)

Authorized and unauthorized companies

Domestic, foreign, and alien companies

Fraternal

Stock and mutual companies

Certificate of authority

Insurance transaction

Licensing (Ref: 23-64-102, 202, 203, 210, 214-218, 220, 223, 301, 302-305; 23-66-209)

Persons required to be licensed

Producer

Consultant

Resident/nonresident

Temporary license

Producer appointment/termination of contract

Exemptions/exceptions

Maintaining a license

Continuing education

Change of address

Administrative fees

Renewal, suspension, or revocation of license

Producer Responsibilities (Ref: 23-64-223, 224, 23-65-101)

Fiduciary capacity

Commissions

Fraud reporting

Life and Health Insurance Guaranty Association Act (Ref: 23-96-101, 102, 104, 106, 111, 112)

Marketing Practices (Ref: 23-66-206, 210, 211, 306; Rule and Reg. 43: 7-9)

Unfair claims practices
Unfair methods of competition
Rebating
Misrepresentation
False advertising
Defamation
False financial statements
Boycott, coercion, intimidation
Unfair discrimination
Twisting
Churning of business
Advertising: producer responsibilities
ARKANSAS LAWS, RULES, AND REGULATIONS PERTINENT TO HEALTH INSURANCE ONLY
Policy Provisions (Ref: 23-62-103; 23-79-119, 129, 139; 23-85-104-120, 123, 126, 131, 133; 23-99-203; Rule and Reg. 18: 5, 7 Rule and Reg. 19: 7)
Policy requirements
Coverages
Coverage for newborns
Coverage for mental health services
Coverage for maternity benefits
Coverage for chiropractic services
Coverage for substance abuse
Medicare Supplement (Ref: 23-79-402-407; Rule and Reg. 18: 5; Rule and Regs. 27: 1, 6, 8, 9, 16, 17)
Minimum standards
Provisions
Health Advertising (Ref: Rule and Regs. 11: 1, 4-8, 17)
Long Term Insurance Care Act (Ref: Rule and Reg. 18: 5)
Minimum standards
Provisions
Group/Blanket Health (Ref: 23-86-101-104, 106-109, 112-116)
Standards
Provisions
Small Group Coverage (Ref: 23-86-202-204, 208)
Small employer
Eligible employee
Provisions
Health Maintenance Organizations (HMOs) (Ref: 23-76-101, 102, 109, 112, 114, 115; 23-99-203)
COBRA Health - State Continuation

HEALTH GENERAL KNOWLEDGE CONTENT OUTLINE

70 scoreable questions plus 5 pretest questions

90 minutes - 70% Minimum Passing

Federal Laws and Regulations (3 Items)

Fair Credit Reporting Act - Purpose

Privacy [Gramm Leach Bliley]

Prohibited Persons in Insurance (18 United States Code (USC) Sections 1033 and 1034) waiver

Affordable Care Act (ACA)

National Do Not Call List

CAN-SPAM Act

General Insurance Concepts (7 Items)

Risk

Methods of Handling Risk (Avoidance, Retention, Sharing, Reduction, Transfer)

Elements of Insurable Risks

Definitions (Risk, Hazard, Peril, Loss)

Elements of a Contract

Consideration

Competent Parties

Legal Purpose

Offer

Acceptance

Authority and Powers of Producers

Express

Implied

Apparent

The Law of Agency

Legal Interpretations Affecting Contracts

Reasonable Expectations

Indemnity

Good Faith

Fraud

Warranties, Representations, Misrepresentations, and Concealment

Accident and Health Insurance Basics (13 Items)

Field Underwriting

Application Procedures

Disclosures and Privacy

Underwriting Requirements (Varies by Insurer)

Sources of Underwriting

Application

Producer's report
Medical information bureau (MIB)
Inspection report
Medical examination
Attending physician's report
Policy Delivery
Effective Date of Coverage
Policy Review
Premium Collection Methods (e.g., Electronic, Physical, EFT, ACH)
Statement of Good Health
Definitions of Perils
Accidental Injury
Sickness
Types of Losses and Benefits
Loss of Income from Disability (Short-Term/Long-Term Disability)
Medical Expense
Long-Term Care Expense
Classification of Risks
Preferred
Standard
Substandard
Individual Accident and Health Insurance Policy Provisions (12 Items)
Uniform Required Provisions
Time Limit on Certain Defenses
Grace Period
Reinstatement
Claim Forms
Proof of Loss
Time of Payment of Claims
Physical Examinations and Autopsy
Legal Actions
Entire Contract
Payment of Claims
Change of Beneficiary
Notice of Claim
Uniform Optional Provisions
Change of Occupation
Misstatement of Age/Sex
Illegal Occupation
Intoxicants, Narcotics, or Other Controlled Substances

Other General Provisions
Right to Examine/Free Look
Insuring Clause
Consideration Clause
Coinsurance
Probationary Period
Elimination Period
Exclusions
Disability Income and Related Insurance (7 Items)
Benefits Determination for Disability
Indemnity
Loss of Income
Qualifications of Disability
Total (Own Occupation, Any Occupation)
Partial
Permanent
Presumptive
Recurrent
Residual
Inability to Perform Duties
Occupational versus Non-Occupational
Individual Disability Income Insurance
Basic Total Disability Plan
Cost of Living Rider
Future Increase Option Rider
Change of Occupation
Other Cash Benefits - (Accidental Death and Dismemberment (AD&D), Rehabilitation Benefit, Medical Reimbursement Benefit)
Refund Provisions
Exclusions
Waiver of Premium
Probationary Period
Elimination Period
Benefit Limits
Unique Aspects of Individual Disability Income Underwriting
Occupational Considerations
Benefit Limits
Policy Issuance Alternatives
Group Disability Income Insurance
Short-Term Disability

Long-Term Disability
Coordination of Benefits (Workers' Compensation Benefits and Social Insurance)
At-work benefits
Business Disability Income Insurance
Key Employee Disability Income
Disability Buy-Sell Policy
Business Overhead Expense
Social Security Disability Income
Qualification for Disability Benefits
Definition of Disability
Waiting Period
Medical Plans (15 Items)
Medical Plan Concepts
Fee-for-Service
Prepaid
Specified disease/Dread disease insurance
Comprehensive Coverage
Dependent Coverage
Provisions and Clauses
Deductibles
Stop-Loss Provision
Impairment rider
Types of Medical Plans
Major Medical Insurance
Health Maintenance Organizations (HMOs)
Preferred Provider Organizations (PPOs)
Point-of-Service (POS) Plans
Cost Containment in Health Care Delivery
Managed Care
Preventive Care
Outpatient Benefits
Utilization Management
Preauthorization
Primary Care Physician
Limited Health Insurance Policies
Accidental Death and Dismemberment
Hospital indemnity
Critical Illness/Dread Disease
Vision Care
Hearing

Dental
Health Insurance Portability and Accountability Act (HIPAA)
Eligibility Requirements
Terms
Privacy
Portability
Affordable Care Act (ACA)
Eligibility
Dependent coverage
Essential health benefits
Levels of Coverage (Metallic Plans)
Group Health Insurance (4 Items)
Characteristics of Group Health Insurance
Group Contract
Certificate of Coverage
Eligible Groups
Contributory versus Non-Contributory
Employer Group Health Insurance
Underwriting Criteria
Eligibility for Insurance
Conversion of Coverage
Open Enrollment
Probation/Waiting Period
Coordination of Benefits
COBRA
Eligibility
Duration of Coverage
Premium
Specialized Health Insurance for Qualified Individuals (6 Items)
Medicare
Eligibility
Part A
Part B
Part C
Part D
Medicare Supplement Insurance
Enrollment Periods
Standardized Plan Benefits
Medicaid
Eligibility

Long-Term Care Policies
Eligibility for Benefits (Activities of Daily Living)
Benefit/Elimination Periods
Levels of care (Skilled, Intermediate, Custodial)
Federal Tax Considerations for Health Insurance (3 Items)
Health Insurance Premiums and Benefits
Individual
Group
Disability Income (Individual and Group)
Business Disability Insurance
Consumer-Driven Health Plans
Health Savings Accounts (HSAs)
High Deductible Health Plans (HDHPs)
Health Reimbursement Accounts (HRAs)
Flexible Spending Accounts (FSAs)