

Question 18 - #201568

An insurer may change the wording of a uniform policy provision in its health insurance policies only if the:

- A) Modified provision is not less favorable to the insurer.
- B) Modified provision is not less favorable to the insured or beneficiaries.
- C) Policy owners agree in writing to the change.
- D) Company's board of directors approves the change.

The correct answer was – B

只有在以下情况下，保险公司才可以在其健康保险单中更改统一保单条款的措辞：

- A) 修改后的条款对保险公司而言并不逊色。
- B) 修改后的条款对受保人或受益人的利益不能不利。
- C) 政策所有者以书面形式同意变更。
- D) 公司董事会批准变更。

正确答案是 - B

Explanation:

A company may change the wording of a uniform policy provision in its health insurance policies once it receives state regulators' permission only if the provision, as changed, is not less favorable to the insured or beneficiaries.

一旦公司获得州监管机构的许可，公司可以改变其健康保险政策中的统一政策条款的措辞，只有在改变的条款对受保人或受益人不利的情况下才可以。

Reference: 18.3.1 in the License Exam Manual.

Question 63 - #201572

The entire contract of an individual health insurance policy includes all the following EXCEPT:

- A) Endorsements and waivers.
- B) Endorsements and riders.
- C) The buyer's guide and any riders.
- D) The application and waivers.

The correct answer was – C

个人健康保险保单的全部合同包括以下所有内容，除了：

- A) 代言和豁免。
- B) 代言和附加险。
- C) 买方指南和任何附加险。
- D) 申请和豁免。

正确的答案是 - C.

Explanation:

The entire contract includes the application, policy riders, waivers, and any other attached papers. It does not include the buyer's guide.

整个合同包括申请，附加险，豁免和任何其他附件。它不包括买方指南。

Reference: 18.3.1 in the License Exam Manual.

Question 74 - #201569

The entire contract in health insurance includes all of the following EXCEPT:

- A) Endorsements to the policy.
- B) The policy itself.
- C) Buyer's guide.
- D) Riders attached to the policy.

The correct answer was - C

健康保险的全部合同包括以下所有内容，除了：

- A) 保险的代言。
- B) 保单本身。
- C) 买方指南。
- D) 与保单相关的附加险。

正确的答案是 - C.

Explanation:

The entire contract in health insurance includes the policy itself, endorsements to the policy, and riders attached to the policy. It protects the policy owner by stating that nothing outside of the contract can be considered part of the contract. It also assures the policy owner that no changes will be made to the contract after it has been issued, even if the insurer makes policy changes that affect all policy sales in the future.

健康保险的整个合同包括保单本身，对政策的代言以及保单所附的附加险。它声明合同之外的任何内容都不能被视为合同的一部分来保护保单所有者。它还向保单所有者保证，合同发布后不会对合同进行任何变更，即使保险公司未来会对所有保单销售进行调整。

Reference: 18.3.1 in the License Exam Manual.

Question 102 - #201570

An individual accident and health insurance policy must include which of the following provisions?

- A) A provision that the policy, including any endorsements or riders, constitutes the entire contract.

- B) A change of occupation limitation.
 C) A misstatement of age provision.
 D) A provision limiting benefits if the insured has insurance with other insurers.
 The correct answer was – A

个人意外和健康保险政策必须包括以下哪项规定？

- A) 规定该政策（包括任何代言或附加险）构成整个合同。
 B) 职业限制的变化。
 C) 年龄规定的错误陈述。
 D) 如果被保险人与其他保险公司有保险，则限制福利的条款。

正确答案是 - A.

Explanation:

One of the twelve mandatory provisions for an individual accident and health insurance policy is the Entire Contract Provision. This provision states that the policy, including the endorsements and the attached papers, if any, constitutes the entire contract of insurance. This would include any riders applicable to the policy.

个人意外和健康保险政策的十二项强制性规定之一是全部合同条款。该条款规定，包括代言和附加文件在内的保单（如果有的话）构成整个保险合同。这将包括适用于该保单的任何附加险。

Reference: 18.3.1 in the License Exam Manual.

Question 5 - #201582

At the time the policy was applied for, to the best of her knowledge Mary answered all of the questions on her individual health insurance application truthfully. Two and one-half years later she is diagnosed with cancer. Is her insurer obligated to cover her expenses?

- A) No, because she must have known there was something wrong with her health when she signed the application.
 B) No, because she most likely had the cancer when she completed the application, even if she didn't know it at the time.
 C) Yes, as long as Mary did not make any fraudulent misstatements and this condition was not excluded from coverage.
 D) Yes, if she can prove she developed the cancer after she signed the application.

The correct answer was - C:

在申请该保单时，玛丽尽其所能地回答了她个人健康保险申请中的所有问题。两年半后，她被诊断出患有癌症。她的保险公司是否有义务支付她的费用？

- A) 不，因为她在签署申请时必须知道她的健康状况有问题。
- B) 不，因为当她完成申请时，她很可能患有癌症，即使她当时不知道。
- C) 是的，只要玛丽没有做出任何欺诈性的错误陈述，这种情况就不会被排除在保险范围之外。
- D) 是的，如果她能够证明她在签署申请后患上了癌症。

正确答案是 - C

Explanation:

Even though it is possible the cancer could have existed prior to the effective date of the policy, this policy has now been in force beyond the two year incontestability period. As long as Mary did not make any fraudulent statements, and cancer was not excluded at the time of issue, the insurer will be obligated to cover Mary's expenses.

尽管癌症可能在政策生效日期之前存在，但这项政策现已超过两年的不可抗辩期。只要玛丽没有做出任何欺诈性陈述，并且在发行时癌症没有被排除，保险公司将有义务承担玛丽的费用。

Reference: 18.3.2 in the License Exam Manual.

Question 42 - #201580

When it is used, the time limit on the certain defenses provision in a health insurance policy provides that the policy cannot be contested and claims cannot be denied after two (or three) years EXCEPT:

- A) for incomplete policy records.
- B) for mental incompetence of the insured.
- C) for nonpayment of premiums.
- D) for fraudulent statements in the application.

The correct answer was – D

使用时，健康保险政策中某些抗辩条款的时限规定，保单不能受到质疑，并且在两（或三）年后不能拒绝索赔，除了：

- A) 不完整的政策记录。
- B) 被保险人的精神上无能。
- C) 未支付保费。
- D) 申请中的欺诈性陈述。

正确的答案是 - D.

Explanation:

According to the time limit on certain defenses provision, the policy cannot be contested after two (or three) years for preexisting conditions unless the conditions were specifically excluded from the policy. A fraudulent statement

on a health insurance application is grounds for contest at any time, unless the policy is guaranteed renewable, in which case it cannot be contested after the 2- or 3-year period expires.

根据某些抗辩规定的时限,除非条件明确排除在保单之外,否则该保单在两年(或三年)之后不能对先前存在的条件提出异议。关于健康保险申请的欺诈性声明是任何时候竞争的理由,除非保证可以续约,在这种情况下,在2年或3年期限到期后不能提出质疑。

Reference: 18.3.2 in the License Exam Manual.

Question 49 - #201583

Which of the following provisions must be included in an individual accident and health insurance policy?

- A) Misstatement of age.
- B) Coverage of newborns.
- C) Change of occupation.
- D) 2-year time limit on certain defenses.

The correct answer was – D

个人意外和健康保险保单中必须包含以下哪些条款?

- A) 年龄错误。
- B) 新生儿的覆盖范围。
- C) 职业变化。
- D) 某些防御的2年时限。

正确的答案是 - D.

Explanation:

One of the twelve mandatory provisions that each individual accident and health insurance policy must include is a 2-year limit on certain defenses of the insurer. Misstatement of age and change in occupation are two of the eleven optional provisions that may be included. Provisions regarding new born coverage can vary by state and may be required, but this is not one of the twelve mandatory provisions adopted under the Uniform Individual Accident and Sickness Policy Provisions Law.

个人意外和健康保险保单必须包含的十二项强制性条款之一是对保险公司的某些抗辩的2年限制。年龄错误和职业变化是可能包括的11项任择条款中的两项。关于新生儿保险的规定可能因州而异,可能是必需的,但这不是“统一个人事故和疾病政策规定法”中通过的十二项强制性规定之一。

Reference: 18.3.2 in the License Exam Manual.

Question 72 - #201581

An accident and health insurance policy may not be rescinded, except for

fraud, after it has been in effect for:

A) two years. B) six months. C) four years. D) one year.

The correct answer was – A

事故和健康保险保单可能不会被撤销，欺诈除外，因为它已经生效：

A) 两年。 B) 六个月。 C) 四年。 D) 一年。

正确答案是 - A.

Explanation:

After an accident and health insurance policy has been in force for two years, an insurer may not rescind it unless the insured obtained the coverage through fraud or fails to pay the premium.

在事故和健康保险政策生效两年后，除非被保险人通过欺诈手段获得保险或未支付保险费，否则保险公司不得撤销保险

Reference: 18.3.2 in the License Exam Manual.

Question 91 - #201586

At what point after the effective date of an accident and health insurance policy does it become incontestable?

A) 2 years. B) 1 year. C) 18 months. D) 3 years.

The correct answer was – A

在事故和健康保险政策生效之后的什么时候它变得无可争辩？

A) 2年。 B) 1年。 C) 18个月。 D) 3年。

正确答案是 - A.

Explanation:

After an accident and health insurance policy has been in effect for two years, it cannot be cancelled for any reason, other than nonpayment of premiums. No claim for loss or disability beginning after two years from the date of issue can be denied because of a disease or condition that existed before the date of coverage.

事故和健康保险保单生效两年后，除了不支付保险费外，不能以任何理由取消自生效之日起两年后开始的损失或残疾索赔。在保险日期之前存在的疾病或病症，可以拒绝。

Reference: 18.3.2 in the License Exam Manual.

Question 92 - #201584

All of the following are mandatory health insurance policy provisions EXCEPT:
A) grace period. B) change of occupation. C) entire contract. D) reinstatement.

The correct answer was – B

以下所有是强制性健康保险保单规定，除了：
A) 宽限期。 B) 职业的变化。 C) 整个合同。 D) 恢复原状。

正确答案是 - B

explanation:

Change of occupation is an optional provision.

职业变更是一项可选条款。

Reference: 18.3.2 in the License Exam Manual.

Question 98 - #201585

An accident and health insurance policy must become incontestable no later than how long after its effective date?

A) One year. B) Six months. C) Three years. D) Two years.

The correct answer was – D

事故和健康保险保单必须在生效日期后的多长时间内变得无可争辩？
A) 一年。 B) 六个月。 C) 三年。 D) 两年。

正确的答案是 - D.

Explanation:

After an accident and health insurance policy has been in effect for two years, it cannot be canceled for any reason, other than nonpayment of premiums, and becomes incontestable as to the statements in the application. No claim for loss or disability beginning after two years from the date of issue can be denied because of a disease or condition that existed before the date of coverage.

在事故和健康保险保单生效两年后，除了不支付保险费之外，不能以任何理由取消自发布之日起两年后开始的损失或残疾索赔，在申请中变得无可争辩，在保险日期之前存在的疾病或病症，可以拒绝。

Reference: 18.3.2 in the License Exam Manual.

Question 104 - #201617

According to the disability insurance time limit on certain defenses provision, how long after the date of a policy's issue can innocent misstatements on an application be used to void a claim?

A) One year. B) Five years. C) For the life of the policy. D) Two years.

The correct answer was – D

根据某些抗辩规定的残疾保险期限，在保单发布之日后多久可以使用无误的申请错误陈述来使申请无效？

A) 一年。 B) 五年。 C) 对于政策的生命。 D) 两年。

正确的答案是 - D.

Explanation:

When a policy has been in effect for two years, the insurer may not void the policy or deny a claim on the basis of a misstatement on the application, in the absence of fraud.

当保单生效两年后，保险公司不得在没有欺诈的情况下，根据对申请的错误陈述使保单失效或拒绝索赔。

Reference: 18.3.2 in the License Exam Manual.

Question 1 - #201593

What is the minimum grace period that an individual accident and health insurance policy must include, if the premiums are due weekly?

A) 2 days. B) 90 days. C) 7 days. D) 20 days.

The correct answer was – C

如果保费每周到期，个人意外和健康保险必须包括的最低宽限期是多少？

A) 2天。 B) 90天。 C) 7天。 D) 20天。

正确的答案是 - C.

Explanation:

All individual accident and health insurance policies must contain a grace period for the payment of overdue premiums, except for the first premium. The grace period is 7 days for weekly premium policies, 10 days for monthly premium policies, 31 days for annual premium policies.

所有个人意外和健康保险单必须包含支付逾期保费的宽限期，第一次保费除外。每周保费保单的宽限期为7天，每月保费政策为10天，年度保费政策为31天。

Reference: 18.3.3 in the License Exam Manual.

Question 8 - #201595

Patricia has a health insurance policy for which she pays a semiannual premium. If the premium is due on July 1, her grace period will end in:

A) 31 days. B) 60 days. C) 7 days. D) 20 days.

The correct answer was – A

帕特里夏有一项健康保险，她支付半年保费。如果保费在7月1日到期，她的宽限期将以：

A) 31天。 B) 60天。 C) 7天。 D) 20天。

正确答案是 - A.

Explanation:

A semiannual premium policy usually has a 31-day grace period in which the policy owner can pay the premium due. For policies with weekly premium payments, the grace period is seven days, and policies with monthly premiums have 10-day grace periods.

半年保费政策通常有31天的宽限期，保单持有人可以支付到期的保费。对于每周保费支付的保单，宽限期为七天，每月保费的保单有10天宽限期。

Reference: 18.3.3 in the License Exam Manual.

Question 25 - #201589

Disability insurance policies must include a provision entitling policyholders to a grace period for premium payment. At least how long must the grace period be for monthly premium policies?

A) 10 days. B) 90 days. C) 1 year. D) 31 days.

The correct answer was – A

残疾保险单必须包括一项规定，使保单持有人有权享受保费缴付的宽限期。每月保费政策的宽限期至少需要多长时间？

A) 10天。 B) 90天。 C) 1年。 D) 31天。

正确答案是 - A.

Explanation: 支付保费的宽限期必须允许每周支付保费的政策至少7天，每月支付保险10天，所有其他保单支付31天。

A grace period for payment of the premium must allow at least 7 days for policies in which premiums are paid weekly, 10 days for those paid monthly, and 31 days for all other policies.

支付保费的宽限期必须允许每周支付保费的政策至少7天，每月支付保险10天，所有其他保单支付31天。

Reference: 18.3.3 in the License Exam Manual.

Question 32 - #201591

An individual accident and health insurance policy must contain all of the following EXCEPT:

- A) a reinstatement provision.
- B) a change of beneficiary provision.
- C) a 21-day grace period.
- D) the amount of policy premiums.

The correct answer was – C

个人意外和健康保险保单必须包含以下所有内容，除了

- A) 恢复条款。
- B) 受益人条款的变更。
- C) 为期21天的宽限期。
- D) 保单金额。

正确的答案是 - C.

Explanation:

Individual accident and health policies must grant at least a 7-day grace period for weekly premium policies, 10 days for monthly premium policies, and 31 days for all other policies.

个人意外和健康保单必须为每周保费保单提供至少7天的宽限期，为每月保费政策提供至少10天的宽限期，对所有其他保单提供31天的宽限期。

Reference: 18.3.3 in the License Exam Manual.

Question 53 - #201587

Which of the following statements pertaining to the grace period and reinstatement provisions in health insurance policies is NOT correct?

- A) Under a health policy's reinstatement terms, insured losses from accidental injuries and sicknesses are covered immediately after reinstatement.
- B) Warren's medical expense policy was reinstated on September 30 and he became ill and entered the hospital on October 5. His hospital expense will not be paid by the insurer.
- C) Craig's health policy has a grace period of 31 days. He had a premium come due June 15 while he was on vacation. He returned home July 7 and mailed his premium the next day. His policy would have remained in force.
- D) States may require grace periods of 7, 10, or 31 days, depending on the mode of premium payment or term of insurance.

The correct answer was – A

以下哪些与健康保险政策中的宽限期和恢复规定有关的陈述不正确？

- A) 根据健康保单的恢复条款，恢复后立即承保意外伤害和疾病造成的保险损失。
- B) Warren的医疗费用政策于9月30日恢复，他于10月5日生病并进入医院。医院的费用不会由保险公司支付。
- C) 克雷格的健康保险有31天的宽限期。他在6月15日休假期间应该付款。他于7月7日回到家中，第二天邮寄了他的保险费。他的保单将一直有效。
- D) 各州可能要求7天，10天或31天的宽限期，具体取决于保费支付方式或保险期限。

正确答案是 - A.

Explanation:

Under a health insurance policy's reinstatement terms, insured losses from sickness will not be covered occur at least ten days after reinstatement. This is to prevent adverse selection against the insurer. Accidental injuries, however, are covered immediately.

根据健康保险保单的恢复条款，在恢复后至少十天内不会承保疾病造成的保险损失。这是为了防止对保险公司的逆向选择。然而，意外伤害立即被涵盖。

Reference: 18.3.3 in the License Exam Manual.

Question 79 - #201588

An accident and health policy whose premiums are paid on a quarterly basis must contain a grace period of at least:

- A) 45 days. B) 15 days. C) 31 days. D) 60 days.

The correct answer was - C: 31 days.

保险费按季度支付的事和健康政策必须至少包含以下宽限期:

- A) 45天。 B) 15天。 C) 31天。 D) 60天。

正确答案是 - C: 31天。

Explanation:

Accident and health insurance policies must provide a grace period of seven days for premiums paid weekly, ten days for premiums paid monthly, and 31 days for all other premiums, such as those paid quarterly.

事故和健康保险政策必须提供7天的宽限期，每周支付保费，每月支付保费10天，所有其他保费，如每季度支付31天。

Reference: 18.3.3 in the License Exam Manual.

Question 87 - #201590

The required grace period for weekly premium health insurance policies is:

- A) 10 days. B) 7 days. C) 31 days. D) 14 days.

The correct answer was - B:

每周付费的健康保险保单所需的宽限期为:

A) 10天。 B) 7天。 C) 31天。 D) 14天。

正确的答案是 - B

Explanation:

The grace period for weekly premium policies is 7 days, 10 days for monthly premium policies, and 31 days for all other premium policies.

每周保费政策的宽限期为7天，每月保费政策为10天，所有其他保费政策为31天。

Reference: 18.3.3 in the License Exam Manual.

Question 24 - #201597

All of the following statements are correct regarding reinstatement of a sickness and accident insurance policy EXCEPT:

- A) a reinstated policy only covers loss due to sickness for the first ten days.
- B) the insurer's acceptance of a late premium without requiring a reinstatement application constitutes automatic reinstatement.
- C) the reinstatement provision must be included in every sickness and accident insurance policy.
- D) if an application is required, the policy is automatically reinstated 45 days after the application is submitted so long as the application is not approved or disapproved before that time.

The correct answer was - A

关于恢复疾病和意外保险政策，以下所有陈述都是正确的，除了:

- A) 恢复的保单仅涵盖前十天因疾病造成的损失。
- B) 保险公司接受延迟保险而不需要恢复申请构成自动恢复。
- C) 恢复条款必须包含在每项疾病和意外保险政策中。
- D) 如果需要申请，不管申请在此之前未获批准或不批准，该政策将在申请提交45天后自动恢复。

正确答案是 - A.

Explanation:

A reinstated policy covers only loss due to accidental injury for the first ten days after reinstatement, after which it covers loss from sickness as well.

恢复后的保单仅涵盖恢复后前十天因意外受伤而造成的损失，此后还包括疾病损失。

Reference: 18.3.4 in the License Exam Manual.

Question 29 - #201599

Which of the following statements about reinstated health insurance policies is CORRECT?

- A) They only cover sicknesses that begin more than 10 days after the policy is reinstated.
- B) Coverage for accidents and sickness begins immediately.
- C) They only cover accidents that occur more than one month after reinstatement.
- D) Health insurance policies cannot be reinstated.

The correct answer was – A

关于恢复健康保险的以下哪项陈述是正确的？

- A) 他们只承保在保单恢复后10天以上开始的疾病。
- B) 事故和疾病的覆盖率立即开始。
- C) 它们仅涵盖恢复后超过一个月发生的事故。
- D) 健康保险政策无法恢复。

正确答案是 - A.

Explanation:

All individual accident and health insurance policies must contain a reinstatement provision stating that any lapsed policy can be put back in force if payment is accepted by the insurer. The reinstated policy will only cover accidents that happen after the policy is reinstated and loss caused by sickness beginning more than 10 days after the reinstated policy is accepted.

所有个人意外和健康保险单必须包含恢复条款，规定如果保险公司接受付款，任何失效保单都可以重新生效。恢复的保单将仅涵盖恢复保单后发生的事故以及在恢复保单被接受后超过10天开始的疾病造成的损失。

Reference: 18.3.4 in the License Exam Manual.

Question 40 - #218570

Insured losses are covered immediately after a health policy is reinstated when:

- A) claim forms are submitted with proof of loss.
- B) all back premiums have been paid.
- C) hospitalization is required.
- D) the losses result from accidental injuries.

The correct answer was – D

在以下情况恢复健康保单后立即承保保险损失：

- A) 索赔表随损失证明一并提交。

- B) 已支付所有需交的保费。
- C) 需要住院治疗。
- D) 因意外伤害造成的损失。

正确的答案是 - D.

Explanation:

Insured losses are covered immediately after a health policy is reinstated when the losses result from accidental injuries. Insured losses from sickness will not be covered unless they occur at least ten days after reinstatement. This is to prevent adverse selection against the insurer.

恢复的健康保单后对因意外伤害导致的损失可以立即承保保险损失。除非在恢复后至少十天内发生，否则将不承保疾病造成的保险损失。这是为了防止对保险公司的逆向选择。

Reference: 18.3.4 in the License Exam Manual.

Question 78 - #201596

With what provision of a standard health insurance policy would the following clause be associated: "The insured and the insurer shall have the same rights there under as they had under the policy immediately before the due date of the defaulted premium."

- A) Time limit on certain defenses provision.
- B) Reinstatement provision.
- C) Cancellation provision.
- D) Grace period provision.

The correct answer was – B

根据标准健康保险政策的规定，以下条款应当与之相关：“被保险人和保险人在违约保险金到期日之前应享有与保单相同的权利。”

- A) 某些抗辩规定的时限。
- B) 恢复规定。
- C) 取消条款。
- D) 宽限期规定。

正确答案是 - B

Explanation:

The reinstatement provision provides that when a policy lapses due to nonpayment of premium, but the insured subsequently pays the renewal premium (which the insurer accepts without requiring an application for a new policy), the policy will be reinstated with the same provisions and rights as before (with the exception of coverage for sickness-related losses within the

first ten days after reinstatement).

恢复条款规定，当政策由于未支付保险费而失效，但被保险人随后支付续保保险费（保险公司接受而无需申请新保单），该保单将恢复使用与之前保单相同的条款和权利。（恢复后前十天内与疾病有关的损失的保险除外）。

Reference: 18.3.4 in the License Exam Manual.

Question 85 - #201598

What kinds of risks does a health insurance policy cover during the ten day waiting period after it has been reinstated?

A) Sickness. B) Accidents. C) Accidents and sickness. D) Neither accidents nor sickness.

The correct answer was – B

健康保险政策在恢复后的十天等待期内承保哪些风险？

A) 疾病。 B) 事故。 C) 意外和疾病。 D) 既不是意外，也不是疾病。

正确答案是 - B

Explanation:

For the first ten days after reinstatement, the reinstated policy covers only loss resulting from accidental injury. After ten days, it must cover loss resulting from sickness as well.

恢复后的前十天，恢复的政策仅涵盖意外伤害造成的损失。十天之后，它必须包括疾病造成的损失。

Reference: 18.3.4 in the License Exam Manual.

Question 115 - #201592

An accident and health insurance policy that provides for monthly payments has a grace period of:

A) 7 days. B) 31 days. C) 10 days. D) 14 days.

The correct answer was – C

提供每月付款的事故和健康保险政策的宽限期为：

A) 7天。 B) 31天。 C) 10天。 D) 14天。

正确的答案是 - C.

Explanation:

Each accident and health insurance policy must contain a grace period of at least 31 days if the premium is paid yearly, 10 days if the premium is paid

monthly and 7 days if the premium is paid weekly.

如果每年支付保费，则事故和健康保险单必须包含至少31天的宽限期，如果每月支付保费，则必须包含10天，如果每周支付保费，则必须包含7天。

Reference: 18.3.3 in the License Exam Manual.

Question 80 - #201601

A required provision of individual health insurance policies is that written notice of a claim must be given to the insurer within:

- A) 14 days after the loss occurs.
- B) 45 days after an accident or the beginning of an illness.
- C) 20 days after loss occurs or commences, or as soon as is reasonably possible.
- D) 30 days following an accident or illness.

The correct answer was – C

个人健康保险政策的必要条款是，必须在以下情况下向保险公司发出书面的索赔通知：

- A) 损失发生后14天。
- B) 事故或疾病开始后45天。
- C) 损失发生或开始后20天，或在合理可能的情况下尽快。
- D) 事故或疾病发生后30天。

正确的答案是 - C.

Explanation:

Individual health insurance policies must provide that written notice of a claim is to be given to the insurer within 20 days after a covered loss occurs, or as soon as is reasonably possible.

个人健康保险政策必须规定，在损失发生后20天内或在合理可能的情况下尽快向保险公司发出书面通知。

Reference: 18.3.5 in the License Exam Manual.

Question 96 - #201602

All individual health insurance policies must include a notice of claim provision requiring that a written notice of claim must be given to the insurer within how long after the occurrence of the loss?

- A) 5 days. B) 24 hours. C) 10 days. D) 20 days.

The correct answer was – D

所有个人健康保险单必须包括一项索赔规定通知，要求在损失发生后的多长时间内向保险公司发出书面的索赔通知？

A) 5天。 B) 24小时。 C) 10天。 D) 20天。

正确的答案是 - D.

Explanation:

All individual health insurance policies must include a notice of claim provision. According to this provision, written notice of a claim must be given to the insurer within 20 days after a covered loss starts, or as soon as possible thereafter. The insurer must provide a claims form to the insured within 15 days of receiving notice of a claim. Failure to do so means that the insured may meet the time requirement for proof of loss by giving the insurer a written statement verifying the loss.

所有个人健康保险政策必须包括索赔规定通知。根据该规定，必须在承保损失开始20天内或在此后尽快向保险公司发出书面通知。保险人必须在收到索赔通知后15天内向被保险人提供索赔表。不这样做，意味着被保险人需要通过向保险公司提供书面声明来证明损失，从而满足损失证明的时间要求。

Reference: 18.3.5 in the License Exam Manual.

Question 101 - #201600

All of the following statements pertaining to health insurance policy notice of claim and claim forms provisions are correct EXCEPT:

- A) Furnishing claim forms is the responsibility of the insurance company.
- B) Gail submits notice of claim to her insurance company after she becomes totally disabled. The company is to supply a claim form to her within 15 days.
- C) Charlotte is injured January 5. Later, she wishes to file a policy claim for expenses incurred in connection with the injury. Generally, she would be required to submit a notice of claim to the company by February 5.
- D) Rex, the insured in a disability income policy, has been totally disabled and receiving benefits for 25 months. The notice of claims provision in his policy requires that he submit proof of loss every 6 months.

The correct answer was – C

以下所有与健康保险政策声明和索赔表相关的声明都是正确的，除了：

- A) 提供索赔表是保险公司的责任。
- B) Gail在完全残疾后向其保险公司提交索赔通知。该公司将在15天内向她提供索赔表。
- C) 夏洛特于1月5日受伤。之后，她希望就与伤害有关的费用提出政策索赔。通常，她将被要求在2月5日之前向公司提交索赔通知。
- D) Rex是残疾人收入政策中的被保险人，已经完全残疾并获得了25个月的福利。他的保单中的索赔条款通知要求他每6个月提交一次损失证明。

正确的答案是 - C.

Explanation:

Generally, a claimant must notify the insurance company within 20 days of an accident under a health insurance policy. Proof of loss must be submitted within 90 days of the loss, but if it is not reasonably possible for the insured to do so, the deadline will be extended to one year. The company must supply its claim forms to the insured within 15 days of notice of a claim.

一般而言，索赔人必须在健康保险单发生事故后20天内通知保险公司。损失证明必须在损失后90天内提交，但如果被保险人无法合理地提交，则截止日期将延长至一年。公司必须在收到索赔通知后15天内向被保险人提供索赔表。

Reference: 18.3.5 in the License Exam Manual.

Question 9 - #201603

Under the required claim forms provision of a health insurance policy, an insurer must furnish the claim form to the insured within how many days after receiving a notice of claim?

A) 30 days. B) 15 days. C) 21 days. D) 10 days.

The correct answer was – B

根据所要求的索赔表提供健康保险单，保险人必须在收到索赔通知后的几天内向被保险人提供索赔表？

A) 30天。 B) 15天。 C) 21天。 D) 10天。

正确答案是 - B

Explanation:

Under the required claim forms provision of a health insurance policy, an insurer must furnish its claim form to the insured within 15 days after receiving notice of a claim. Otherwise, the claimant may submit proof of loss in any form that explains the occurrence, the character, and extent of the loss.

根据所要求的索赔表提供健康保险单，保险人必须在收到索赔通知后15天内向被保险人提供索赔表。否则，索赔人可以以任何形式提交损失证明，以解释损失的发生，特征和程度。

Reference: 18.3.6 in the License Exam Manual.

Question 97 - #201606

If an insurer receives a notice of claim, it must supply a claim form to the insured within:

A) 15 days. B) 10 days. C) 30 days. D) 20 days.

The correct answer was – A

如果保险公司收到索赔通知，则必须在以下情况下向被保险人提供索赔表：

A) 15天。 B) 10天。 C) 30天。 D) 20天。

正确答案是 - A.

Explanation:

After an insurer receives a notice of claim, it must supply a claim form to the insured within 15 days. If it fails to do so, the claimant may submit proof of loss in any form so long as it explains the occurrence, character, and extent of the loss for which the claim is submitted.

保险公司收到索赔通知后，必须在15天内向被保险人提供索赔表。如果不这样做，索赔人可以提交任何形式的损失证明，只要它能解释提出索赔的损失的发生，性质和程度。

Reference: 18.3.6 in the License Exam Manual.

Question 99 - #201604

Jane submits written notice of a health insurance claim to her insurance company. After a month has passed, the insurer still has not provided her with a claim form. Which of the following statements is CORRECT?

- A) The insurer should have furnished Jane with a claim form no later than 15 days after receiving notice of the claim.
- B) The insurer may not deny the claim since it did not timely supply a claim form.
- C) Jane should assume her claim has been denied.
- D) Jane must resubmit her notice of claim since more than 30 days have passed.

The correct answer was – A

Jane向她的保险公司提交了健康保险索赔的书面通知。一个月过去了，保险公司仍然没有向她提供索赔表。以下哪项陈述是正确的？

- A) 保险公司应在收到索赔通知后15天内向Jane提供索赔表。
- B) 保险公司不得拒绝索赔，因为它没有及时提供索赔表。
- C) Jane应该认为她的主张已被拒绝。
- D) Jane已经过了30多天，必须重新提交索赔通知。

正确答案是 - A.

Explanation:

All individual accident and health insurance policies must contain a claim forms provision. According to this section, the insurer is required to provide a claim form to Jane within 15 days of receiving her written notice of a claim.

所有个人意外和健康保险单必须包含索赔表。根据本节规定，保险公司必须在

收到其书面的索赔通知后15天内向Jane提出索赔表。

Reference: 18.3.6 in the License Exam Manual.

Question 11 - #201605

How many days from the date of loss do the insured have to submit a completed claim form to the insurer?

A) 20 days. B) 10 days. C) 90 days. D) 60 days

The correct answer was – C

自损失之日起多少天，被保险人必须向保险公司提交填写完整的索赔表？

A) 20天。 B) 10天。 C) 90天。 D) 60天

正确的答案是 - C.

Explanation:

All individual accident and health insurance policies must contain a proof of loss provision stating that the insured must furnish a completed claim form to the insurer within 90 days of the date of loss. Policies must also contain a time of payment of claims provision stating that indemnities payable under the policy for any loss will be paid immediately upon receipt of written proof of the loss.

所有个人意外和健康保险单必须包含损失证明，说明被保险人必须在损失发生之日起90天内向保险公司提交填写完整的索赔表。保单还必须包含索赔条款的支付时间，声明根据保单支付的任何损失赔偿金将在收到书面损失证明后立即支付。

Reference: 18.3.7 in the License Exam Manual.

Question 17 - #201611

Which one of the following statements regarding proof of loss is CORRECT?

- A) The insurer must file proof of loss within 90 days of the date of loss.
- B) The insurer must file proof of loss within 90 days of the receipt of claim forms.
- C) The insured must file proof of loss within 90 days of the date of loss.
- D) The insured must file proof of loss within 90 days of the receipt of claims forms.

The correct answer was – C

关于损失证明，以下哪一项陈述是正确的？

- A) 保险公司必须在损失发生之日起90天内提交损失证明。
- B) 保险公司必须在收到索赔表后90天内提交损失证明。

C) 被保险人必须在损失发生之日起90天内提交损失证明。

D) 被保险人必须在收到索赔表后90天内提交损失证明。

正确的答案是 - C.

Explanation:

Under a health insurance policy, the insured has 90 days from the date of the loss to file proof of loss with the insurer. Failure to file within 90 days does not invalidate a claim as long as the proof of loss is furnished as soon as reasonably possible. With the exception of the absence of legal capacity, proof of loss is required no later than one year from the date of loss.

根据健康保险单，被保险人自损失之日起90天内向保险人提交损失证明。只要在合理可能的情况下尽快提供损失证明，未在90天内提交申请并不会使索赔无效。除缺乏法律行为能力外，损失证明必须在损失之日起一年内提出。

Reference: 18.3.7 in the License Exam Manual.

Question 37 - #201609

Individual health insurance policies specify that the insured must furnish proof of loss to the insurer how long after the date of the loss?

- A) 10 days. B) Proof of loss is not required for most health insurance policies. C) Immediately. D) 90 days.

The correct answer was – D

个人健康保险单规定被保险人必须在损失发生后多久向保险公司提供损失证明？

- A) 10天。 B) 大多数健康保险政策不要求提供损失证明。 C) 立即。 D) 90天。

正确的答案是 - D.

Explanation:

Individual health insurance policies must contain a proof of loss provision stating that the insured must furnish proof of loss to the insurer within 90 days of the date of loss.

个人健康保险单必须包含损失证明，说明被保险人必须在损失发生之日起90天内向保险人提供损失证明。

Reference: 18.3.7 in the License Exam Manual.

Question 50 - #201610

All accident and health insurance policies must contain a proof of loss provision stating that the insured must send the insurer a completed claim form no later than how long after the date of the loss?

- A) 10 days. B) 90 days. C) 2 weeks. D) 2 years.

The correct answer was – B

所有意外和健康保险单必须包含损失证明,说明被保险人必须在损失发生后的多长时间内向保险人发送完整的索赔表?

A) 10天。 B) 90天。 C) 2周。 D) 2年。

正确答案是 - B

Explanation:

All accident and health insurance policies must contain a proof of loss provision stating that the insured must furnish a completed claim form to the insurer within 90 days of the date of loss.

所有意外和健康保险单必须包含损失证明,说明被保险人必须在损失发生之日起90天内向保险公司提交填写完整的索赔表。

Reference: 18.3.7 in the License Exam Manual.

Question 106 - #201607

Claimants must give written proofs of loss to the insurer within how many days of the loss?

A) 60 days. B) 120 days. C) 90 days. D) 180 days.

The correct answer was – C

索赔人必须在损失的几天内向保险公司提供书面的损失证明?

A) 60天。 B) 120天。 C) 90天。 D) 180天。

正确的答案是 - C.

Explanation:

Claimants must give written proofs of loss to the insurer within 90 days of the loss. If the claim is for continuing loss, proofs must be filed within 90 days after the end of the period for which the insurer is liable. If it is not reasonably possible to give proof within such time, proof must be given no later than one year from the time it was required, except in the absence of legal capacity.

索赔人必须在损失后90天内向保险人提供书面损失证明。如果索赔是持续损失,则必须在保险公司承担责任的期限结束后的90天内提交证明。如果在这段时间内无法合理地提供证据,则必须在不迟于要求的一年内提供证据,除非没有法律行为能力。

Reference: 18.3.7 in the License Exam Manual.

Question 123 - #201608

All of the following provisions in an individual health insurance policy are optional EXCEPT:

A) Proof of loss. B) Unpaid premium. C) Misstatement of age. D) Change of occupation.

The correct answer was – A

所有以下条款均为个人健康保险政策中的可选项，除了：

A) 损失证明。 B) 未付保费。 C) 年龄错误。 D) 职业的变化。

正确答案是 - A.

Explanation:

All health insurance policies must include a proof of loss provision. According to this provision, the insured must furnish a completed claim form to the insurer within 90 days of the date of loss.

所有健康保险单必须包括损失证明。根据该规定，被保险人必须在损失发生之日起90天内向保险人提供填写完整的索赔表。

Reference: 18.3.7 in the License Exam Manual.

Question 7 - #201616

The time of payment of claims provision in an accident and health insurance policy requires that:

A) The insured must submit proof of loss within a specified time, or the claim may be denied.

B) The insured must periodically submit proof of loss in order to receive the claim.

C) Claims will be paid immediately after the insurer receives written proof of the loss.

D) The insurer must furnish the insured with the forms required for filing proof of loss.

The correct answer was – C

在事故和健康保险政策中支付索赔条款的时间要求：

A) 被保险人必须在指定时间内提交损失证明，否则索赔可能会被拒绝。

B) 被保险人必须定期提交损失证明才能收到索赔。

C) 在保险公司收到损失的书面证明后，将立即支付索赔。

D) 保险人必须向被保险人提供提交损失证明所需的表格。

正确的答案是 - C.

Explanation:

In an accident and health insurance policy, the time of payment of claims provision provides for immediate payment of the claim after the insurer receives written proof of the loss. The claim forms provision states that the insurer, no later than 15 days after receiving notice of the claim, must furnish the claimant with the forms required for filing proof of loss. The notice of claim provision requires that written notice be given to the insurer within 20 days after any loss.

在事故和健康保险政策中，索赔条款的支付时间规定在保险公司收到损失的书面证明后立即支付索赔。索赔表规定，保险人在收到索赔通知后15天内必须向索赔人提供提交损失证明所需的表格。索赔条款通知要求在任何损失发生后20天

内向保险公司发出书面通知。

Reference: 18.3.8 in the License Exam Manual.

Question 47 - #201612

Thomas, an insured, submits a claim and proof of loss for medical expenses covered by his major medical policy. According to the time of payment of claims provision, how soon must the company pay the claim?

A) Within 150 days. B) Immediately. C) Within 90 days. D) Within 30 days.

The correct answer was – B

被保险人托马斯提交了他的主要医疗政策所涵盖的医疗费用索赔和损失证明。根据索赔条款的支付时间，公司必须多久支付索赔？

A) 150天内。 B) 立即。 C) 90天内。 D) 30天内。

正确答案是 – B

Explanation:

According to the time payment of claims provision of a major medical policy, the company must pay the claim immediately.

根据主要医疗保单索赔规定的时间，公司必须立即支付索赔。

Reference: 18.3.8 in the License Exam Manual.

Question 52 - #201614

The time of payment of claims provision requires that:

- A) The insured must submit proof of loss within a specified time, or the claim may be denied.
- B) Claims must be paid after the insurer is notified and receives proof of loss.
- C) The insured must periodically submit proof of loss in order to receive the claim.
- D) Claims must be paid after the insurer is notified of a loss.

The correct answer was – B

索赔条款的支付时间要求：

- A) 被保险人必须在指定时间内提交损失证明，否则索赔可能会被拒绝。
- B) 必须在通知保险公司并收到损失证明后支付索赔。
- C) 被保险人必须定期提交损失证明才能收到索赔。
- D) 必须在保险公司收到损失通知后支付索赔。

正确答案是 – B

Explanation:

The time of payment of claims provision provides for immediate payment of the claim after the insurer receives notification and proof of loss.

索赔条款的支付时间规定在保险公司收到通知和损失证明后立即支付索赔。

Reference: 18.3.8 in the License Exam Manual.

Question 59 - #201615

The time of payment of claims provision in an accident and health insurance policy requires that:

- A) The insurer must furnish the insured with the forms required for filing proof of loss.
- B) The insured must submit proof of loss within a specified time, or the claim may be denied.
- C) Claims will be paid immediately after the insurer receives written proof of the loss.
- D) The insured must periodically submit proof of loss in order to receive payment of the claim.

The correct answer was – C

在事故和健康保险政策中支付索赔条款的时间要求：

- A) 保险人必须向被保险人提供提交损失证明所需的表格。
- B) 被保险人必须在指定时间内提交损失证明，否则索赔可能会被拒绝。
- C) 在保险公司收到损失的书面证明后，将立即支付索赔。
- D) 被保险人必须定期提交损失证明，以便收到索赔的付款。

正确的答案是 - C.

Explanation:

In an accident and health insurance policy, the time of payment of claims provision provides for immediate payment of the claim after the insurer receives written proof of the loss. The claim forms provision states that the insurer, no later than 15 days after receiving notice of the claim, must furnish the claimant with the forms required for filing proof of loss. The notice of claim provision requires that written notice be given to the insurer within 20 days after any loss.

在事故和健康保险政策中，索赔条款的支付时间规定在保险公司收到损失的书面证明后立即支付索赔。索赔表规定，保险人在收到索赔通知后15天内必须向索赔人提供提交损失证明所需的表格。索赔条款通知要求在任何损失发生后20天内向保险公司发出书面通知。

Reference: 18.3.8 in the License Exam Manual.

Question 67 - #201613

Under the time of payment of claims provision, policies that provide for periodic payment of benefits (such as disability income policies) must pay such benefits at least:

A) quarterly. B) Bimonthly. C) Semiannually. D) Monthly.

The correct answer was – D

在支付索赔条款时，规定定期支付福利的政策（如残疾收入政策）必须至少支付以下福利：

A) 每季度。 B) 双月刊。 C) 半年。 D) 每月。

正确的答案是 - D.

Explanation:

The time of payment of claims provision allows for immediate payment of the claim after the insurer receives notification and proof of loss. If the policy provides for periodic payment of benefits (such as disability income policies), they must be paid at least monthly, if not more frequently as the policy may specify.

索赔条款的支付时间允许在保险公司收到通知和损失证明后立即支付索赔。如果政策规定定期支付福利金（如残疾收入政策），则必须至少每月支付一次，如果不是更频繁，则政策可能指定。

Reference: 18.3.8 in the License Exam Manual.

Question 15 - #201573

Which of the following statements pertaining to provisions in health insurance policies is CORRECT?

- A) The misstatement of age provision allows the insurer to adjust the benefits payable under the policy if the age of the insured was misstated when the policy was applied for.
- B) The physical exam and autopsy provision entitles an insurance company, at the insured's expense, to conduct physical exams of the insured during a claim period.
- C) The legal action provision prohibits the insurer from taking legal action against the insured in a claim dispute until after 60 days from the time the claim was filed.
- D) The change of occupation provision describes the changes the insured must make at his or her job to remain in compliance with the terms of a health or accident policy.

The correct answer was - A

以下哪些与健康保险政策有关的陈述是正确的？

- A) 如果在申请保单时被保险人的年龄有误，则年龄规定的错误陈述允许保险公司调整保险单下的应付福利。
- B) 体检和尸检条款使保险公司有权在被保险人的费用下，在索赔期内对被保险人进行体检。
- C) 法律诉讼条款禁止保险公司在索赔提起之日起60天之后对索赔纠纷中的被保险人采取法律行动。
- D) 职业规定的变更描述了被保险人在其工作中必须做出的改变，以保持遵守健康或事故政策的条款。

正确答案是 - A.

Explanation:

Physical exams are conducted at the insurer's expense. The change of occupation provision describes changes that may be made to premium rates or benefits if the insured changes jobs. The legal action provision prevents the insured from taking legal action against the insurer any sooner than 60 days from the date the claim was filed.

体检是由保险公司承担的费用。职业规定的变更描述了如果被保险人改变工作岗位，可能对保险费率或福利进行的变更。法律诉讼条款禁止被保险人在提出索赔之日起60天内对保险人采取法律行动。

Reference: 18.3.10 in the License Exam Manual.

Question 12 - #201574

After proof of loss is submitted, legal action may be taken to recover on an individual health insurance policy only during what time period?

- A) Between 30 days and 1 year.
- B) Between 30 and 60 days.
- C) Between 60 days and 3 years.
- D) Between 30 days and 10 years.

The correct answer was – C

在提交损失证明后，仅在适当的时间段内可以采取法律行动以恢复个人健康保险单？

- A) 30天到1年之间。
- B) 30至60天。
- C) 60天到3年之间。
- D) 30天到10年之间。

正确的答案是 - C.

Explanation:

The statute of limitations stipulates that lawsuits may not be initiated to recover on the policy for 60 days after written proof of loss has been submitted to the

insurer and that lawsuits may not be initiated beyond three years after the time written proof of loss was required.

诉讼时效规定，在向保险人提交书面损失证明之后60天内，可能不会启动诉讼以恢复保险，并且在要求提供书面损失证明之后三年内可能不会提起诉讼。

Reference: 18.3.11 in the License Exam Manual.

Question 23 - #201575

After proof of loss is submitted, legal actions may be brought to recover on an individual health insurance policy only during what time period?

- A) Between 30 days and 1 year.
- B) Between 60 days and 10 years.
- C) Between 60 days and 3 years.
- D) Between 30 and 60 days.

The correct answer was – C

在提交损失证明后，只有在什么时间段内，可以采取法律行动以恢复个人健康保险单？

- A) 30天到1年之间。
- B) 60天到10年之间。
- C) 60天到3年之间。
- D) 30至60天。

正确的答案是 - C.

Explanation:

After a proof of loss is submitted, a claimant cannot sue to recover on the policy until at least 60 days have passed. A claimant is barred from instituting an action, however, after three years have passed from the date of the incident that gave rise to the claim.

提交损失证明后，索赔人在至少60天过后才能提起诉讼。但是，在引起索赔的事件发生之日起三年后，索赔人被禁止提起诉讼。

Reference: 18.3.11 in the License Exam Manual.

Question 54 - #201577

An individual health insurance policyholder can change the beneficiary of the policy under what circumstances?

- A) The policyholder must pay a \$500 transfer fee.
- B) The change must be submitted to the insurance company's approval board.
- C) The change can be made without the beneficiary's consent, unless the original designation is irrevocable.
- D) Beneficiaries can never be changed.

The correct answer was – C

个人健康保险投保人可以在什么情况下改变保单的受益人？

- A) 保单持有人必须支付500美元的转会费。
- B) 变更必须提交给保险公司的审批委员会。
- C) 除非原始名称不可撤销，否则可以在未经受益人同意的情况下进行更改。
- D) 受益人永远不会改变。

正确的答案是 - C.

Explanation:

The choice of beneficiary is a policyholder right. Therefore, the policyholder can change the beneficiary without the consent of the beneficiary or insurer unless the original designation is irrevocable.

受益人的选择是保单持有人权利。因此，保单持有人可以在未经受益人或保险人同意的情况下更改受益人，除非原始指定是不可撤销的。

Reference: 18.3.12 in the License Exam Manual.

Question 75 - #201579

Joanie was injured in an automobile accident. She is now in a coma and expected to die. Under the terms of her individual accidental death and dismemberment (AD&D) policy, which of the following is CORRECT?

- A) Her daughter, who is the revocable beneficiary, can change the beneficiary to her father.
- B) As next of kin, her husband would automatically receive the principal sum.
- C) The beneficiary cannot be changed.
- D) As next of kin, her husband can change the beneficiary from himself to their daughter.

The correct answer was – C

Joanie在车祸中受伤。她现在处于昏迷状态，预计会死亡。根据她个人意外死亡和肢解（AD&D）政策的条款，以下哪项是正确的？

- A) 她的女儿是可撤销的受益人，可以将受益人改为她的父亲。
- B) 作为近亲，她的丈夫会自动收到本金。
- C) 受益人不能更改。
- D) 作为近亲，她的丈夫可以将受益人从自己改为女儿。

正确的答案是 - C.

Explanation:

The beneficiary designation cannot be changed without the approval of the

policy owner. It makes no difference that Joanie's husband is her next of kin, or that her daughter is the revocable beneficiary.

未经保单所有者批准，不得更改受益人名称。Joanie的丈夫是她的近亲，或者她的女儿是可撤销的受益者，这没什么区别。

Reference: 18.3.12 in the License Exam Manual.

Question 121 - #201578

An individual health insurance policyholder can change the beneficiary of the policy under what circumstances?

- A) The change can be made without the beneficiary's consent, unless the original designation is irrevocable.
- B) The policyholder must pay a \$500 transfer fee.
- C) The change must be submitted to the insurance company's approval board.
- D) Beneficiaries can never be changed.

The correct answer was – A

个人健康保险投保人可以在什么情况下改变保单的受益人？

- A) 除非原始名称不可撤销，否则可以在未经受益人同意的情况下进行更改。
- B) 保单持有人必须支付500美元的转让费。
- C) 变更必须提交给保险公司的审批委员会。
- D) 受益人永远不会改变。

正确答案是 - A.

Explanation:

All individual accident and health insurance policies must contain a change of beneficiary provision. According to this provision, the insured has the right to change the beneficiary unless an irrevocable beneficiary designation has been made. The insured is not required to pay a transfer fee or to notify the insurer's approval board before changing a beneficiary.

所有个人意外和健康保险政策都必须包含受益人条款的变更。根据该规定，被保险人有权更改受益人，除非已经指定了不可撤销的受益人。被保险人在更换受益人之前无需支付转让费或通知保险公司的审批委员会。

Reference: 18.3.12 in the License Exam Manual.

Question 2 - #201634

Which of the following is an optional provision in an individual accident and health insurance policy?

- A) Entire contract.
- B) Time limit on defenses.
- C) Reinstatement.
- D) Misstatement of age.

The correct answer was - D

以下哪项是个人意外和健康保险政策的可选条款？

- A) 整个合同。
- B) 抗辩时限。
- C) 恢复。
- D) 年龄错误。

正确的答案是 - D.

Explanation:

Individual accident and health insurance policies must contain reinstatement, time limit on defenses, and entire contract provisions. A misstatement of age provision is optional. If the insured's age has been misstated, he will receive the benefits that the premium would have purchased at the correct age.

个人意外和健康保险政策必须包含恢复，抗辩时限和整个合同条款。年龄规定的错误陈述是可选的。如果被保险人的年龄被误报，他将获得保险费在正确年龄时购买的福利。

Reference: 18.4.2 in the License Exam Manual.

Question 6 - #201631

All of the following are mandatory provisions in health insurance policies

EXCEPT:

- A) Misstatement of age. B) Proof of loss. C) Change of beneficiary. D) Entire contract.

The correct answer was – A

以下所有内容均为健康保险政策的强制性规定除外：

- A) 年龄错误。 B) 损失证明。 C) 受益人的变更。 D) 整个合同。

正确答案是 - A.

Explanation:

Misstatement of age is an optional provision of health insurance policies.

年龄错误是健康保险政策的可选条款。

Reference: 18.4.2 in the License Exam Manual.

Question 20 - #201632

All of the following health insurance provisions are mandatory EXCEPT:

- A) A misstatement of age clause.
- B) A legal actions provision.
- C) An entire contract clause.
- D) A notice of claim provision.

The correct answer was – A

以下所有健康保险条款均为强制性规定，除了：

- A) 年龄段的错误陈述。

- B) 法律诉讼条款。
- C) 整个合同条款。
- D) 索赔条款通知。

正确答案是 - A.

Explanation:

There are 12 mandatory uniform policy provisions that must be included in every accident and health contract issued. The mandatory provisions are entire contract, time limit on certain defenses, grace period, reinstatement, notice of claim, claim forms, proof of loss, time of payment of claims, payment of claims, physical examination and autopsy, legal actions, and change of beneficiary. A misstatement of age provision is optional.

每份发布的事故和健康合同都必须包含12项强制性统一政策规定。强制性规定是完整合同，某些抗辩的时限，宽限期，恢复，索赔通知，索赔表，损失证明，索赔支付时间，索赔支付，体检和尸检，法律诉讼和变更受益者。年龄规定的错误陈述是可选的。

Reference: 18.4.2 in the License Exam Manual.

Question 64 - #201629

Under the misstatement of age provision in a health insurance policy, what can an insurer do if it discovers that an insured gave a wrong age at the time of application?

- A) Assess a penalty. B) Cancel the policy. C) Increase the premium. D) Adjust the benefits.

The correct answer was – D

根据健康保险政策中对年龄规定的错误陈述，如果保险公司在申请时发现被保险人的年龄错误，保险公司可以做些什么呢？

- A) 评估罚款。 B) 取消保单。 C) 增加保费。 D) 调整好处。

正确的答案是 - D.

Explanation:

Under the misstatement of age provision in a health insurance policy, if an insurer discovers that an insured gave a wrong age at the time of application, it can adjust the benefits. Benefit amounts payable in such cases will be what the premiums paid would have purchased at the correct age.

根据健康保险政策中对年龄规定的错误陈述，如果保险公司发现被保险人在申请时给出了错误的年龄，则可以调整福利。在这种情况下应付的福利金额将是在正确年龄购买的保费。

Reference: 18.4.2 in the License Exam Manual.

Question 66 - #201633

Which of the following is an optional provision in an individual accident and health insurance policy?

- A) Time limit on defenses. B) Misstatement of age. C) Change of beneficiary.
D) Reinstatement.

The correct answer was – B

以下哪项是个人意外和健康保险政策的可选条款？

- A) 抗辩时限。 B) 年龄错误。 C) 受益人的变更。 D) 恢复。

正确答案是 - B

Explanation:

Individual accident and health insurance policies must contain provisions for reinstatement, time limit on defenses, and change of beneficiary. A misstatement of age provision is optional. However, if it is included in a policy, the Commissioner must approve the wording.

个人意外和健康保险政策必须包含恢复条款，抗辩时限和受益人变更。年龄规定的错误陈述是可选的。但是，如果将其纳入政策，则专员必须批准措辞。

Reference: 18.4.2 in the License Exam Manual.

Question 81 - #201630

According to the optional misstatement of age provision, all of the following statements are correct EXCEPT:

- A) If the insured actually was younger at the time of application than shown in the policy, benefits would be increased.
B) If the insured actually was older at the time of application than shown in the policy, benefits would be reduced.
C) If the age of the insured is misstated at the time of application, all amounts payable under the policy would be what the premiums paid would have purchased at the correct age.
D) If the insured actually was older at the time of application than shown in the policy, the excess premiums paid would be refunded.

The correct answer was – D

根据年龄规定的可选错误陈述，以下所有陈述均正确，除了：

- A) 如果被保险人在申请时实际上比政策中显示的更年轻，那么福利将会增加。
B) 如果被保险人在申请时实际上比政策中显示的年龄更大，则可以减少福利。
C) 如果被保险人的年龄在申请时被错误陈述，则根据保险单支付的所有金额将是支付的保费在正确的年龄购买的金额。
D) 如果被保险人在申请时实际上比政策中显示的年龄更大，则支付的超额保费将被退还。

正确的答案是 - D.

Explanation:

According to the optional misstatement of age provision, if the insured was actually older at the time of application than shown in the policy, benefits would be reduced accordingly.

根据年龄规定的可选错误陈述, 如果被保险人在申请时实际上比政策中显示的年龄更大, 则福利将相应减少。

Reference: 18.4.2 in the License Exam Manual.

Question 4 - #201619

All of the following provisions are optional in individual health insurance policies EXCEPT:

- A) An intoxicants and controlled substances provision.
- B) A change of occupation provision.
- C) An incontestability provision.
- D) A misstatement of age provision.

The correct answer was – C

以下所有条款在个人健康保险政策中是可选的, 除了:

- A) 麻醉品和受控物质。
- B) 改变职业规定。
- C) 不可抗辩性规定。
- D) 年龄规定的错误陈述。

正确的答案是 - C.

Explanation:

An incontestability provision is a mandatory, rather than optional, provision in individual health insurance policies. An incontestability provision states that two years after the date of issue, no misstatements on the application (unless fraudulent) may be used to void the policy or deny a claim.

不可抗辩性条款是个人健康保险政策中的强制性而非可选性条款。不可抗辩性条款规定, 在签发之日起两年后, 不得对申请作出任何错误陈述以使保单无效或拒绝索赔 (除非是欺诈性的)。

Reference: 18.4 in the License Exam Manual.

Question 43 - #201624

All of the following are optional provisions in a health insurance policy EXCEPT:

- A) Change of beneficiary. B) Unpaid premium. C) Illegal occupation. D) Misstatement of age.

The correct answer was – A

以下所有内容均为健康保险政策中的可选条款, 除了:

A) 受益人的变更。 B) 未付保费。 C) 非法职业。 D) 年龄错误。

正确答案是 - A.

Explanation:

All health insurance policies must contain a change of beneficiary provision, which gives the insured the right to change the beneficiary unless the insured makes an irrevocable beneficiary designation. Optional provisions include a misstatement of age provision, which provides that if the insured's age was misstated, the amount payable will be equal to what the premium paid would have purchased at the correct age. An unpaid premium provision is also optional, and allows the insurer to deduct the amount of any unpaid premium or any note or order written against the policy. An illegal occupation provision, which states that the insurer is not liable for losses occurring while the insured committed a felony or engaged in an illegal occupation, is also optional.

所有健康保险单必须包含受益人条款的变更，这使得被保险人有权更改受益人，除非被保险人指定不可撤销的受益人。可选条款包括年龄规定的错误陈述，规定如果被保险人的年龄有误，则应付金额将等于在正确年龄购买的保费。未付保费条款也是可选的，并允许保险公司扣除任何未支付的保费金额或根据保单书写的任何票据或订单。非法占用条款规定保险人对被保险人犯下重罪或从事非法职业时发生的损失不承担责任，也是可选的。

Reference: 18.4 in the License Exam Manual.

Question 46 - #201576

An individual may take legal action to recover on an accident and health insurance policy no sooner than how many days after written proof of loss is provided?

A) 50 days. B) 20 days. C) 30 days. D) 60 days.

The correct answer was – D

个人可以在提供书面的损失证明之后的几天内采取法律行动，以便在事故和健康保险政策中恢复？

A) 50天。 B) 20天。 C) 30天。 D) 60天。

正确的答案是 - D.

Explanation:

Accident and health insurance policies must contain a legal action provision stating that legal actions to recover on a policy can begin no sooner than 60 days or later than 3 years after written proof of loss is furnished.

意外和健康保险保单必须包含一项法律诉讼条款，规定在提供书面的损失证明后，可以在60天或之后3年内开始对政策进行追讨的法律诉讼。

Reference: 18.3.11 in the License Exam Manual.

Question 90 - #201618

In most states, all of the following are optional provisions in an accident and health insurance contract EXCEPT:

- A) Misstatement of age provision.
- B) Change of occupation provision.
- C) Reinstatement provision.
- D) Unpaid premium provision.

The correct answer was – C

在大多数州，以下所有内容均为事故和健康保险合同中的可选条款，除了：

- A) 年龄规定的错误陈述。
- B) 职业规定的变更。
- C) 恢复规定。
- D) 未付保费。

正确的答案是 - C.

Explanation:

A reinstatement provision is not optional in an accident and health insurance contract. It is a required provision. If a policy owner sends a lapsed policy's overdue premium to the insurer and the insurer does not formally decline acceptance of the premium within 45 days after the premium is mailed, acceptance of the premium (and thus reinstatement of the policy) is automatically granted.

恢复条款在事故和健康保险合同中不是可选的。这是必需的条款。如果保单持有人向保险公司发送失效保单的逾期保险费且保险公司在保费邮寄后45天内未正式拒绝接受保险费，则自动获得保险费的接受（从而恢复保单）。

Reference: 18.4 in the License Exam Manual.

Question 94 - #201620

All of the following are optional provisions in an individual accident and health insurance policy EXCEPT:

- A) Illegal occupation. B) Change of occupation. C) Change of beneficiary. D) loss-of-time benefit adjustment.

The correct answer was – C

以下所有内容均为个人意外和健康保险政策的可选条款，但以下情况除外：

- A) 非法职业。 B) 职业的变化。 C) 受益人的变更。 D) 失去时间的利益调整。

正确的答案是 - C.

Explanation:

Change of occupation, loss-of-time benefit adjustment, and illegal occupation provisions are optional provisions in an individual accident and health insurance policy. If they are included in a policy, the Commissioner must approve the wording of the descriptions. A change of beneficiary provision is a mandatory provision. It provides that the insured has the right to change the beneficiary, unless an irrevocable beneficiary designation has been made.

职业变更, 时间损失津贴调整和非法职业条款是个人意外和健康保险政策的可选条款。如果它们包含在政策中, 则专员必须批准说明的措辞。受益人条款的变更是强制性条款。它规定被保险人有权更改受益人, 除非已经作出不可撤销的受益人指定。

Reference: 18.4 in the License Exam Manual.

Question 100 - #201626

All of the following are optional provisions in an individual health insurance policy EXCEPT:

A) Misstatement of age provision. B) Change of occupation provision. C) Legal actions provision. D) Unpaid premiums provision.

The correct answer was – C

以下所有内容均为个人健康保险政策的可选条款, 但以下情况除外:

A) 年龄规定的错误陈述。 B) 职业规定的变更。 C) 提供法律诉讼。 D) 未付保费。

正确的答案是 - C.

Explanation:

A legal actions provision stating that no legal action will be entered into to recover on the policy earlier than 60 days or later than 3 years after written proof of loss has been furnished is mandatory in an individual health insurance policy. A misstatement of age provision, which states that if an insured's age has been misstated, any benefits will be paid based on the coverage the premium would have purchased at the correct age, is optional.

Another optional provision is the change of occupation provision, which provides that if the insured is injured or becomes sick after changing to a more hazardous occupation, the insurer will pay only the portion of indemnity that the premium would have purchased at the rates for the more hazardous occupation. An unpaid premiums provision, which states that any unpaid premium or premium covered by a note or written order may be deducted from a claim payment, is also optional.

法律诉讼条款规定, 在提供书面的损失证明之后的60天或之后3年内, 不会采取任何法律行动来恢复保单, 这是个人健康保险政策的强制性要求。年龄规定的错误陈述, 其中规定如果被保险人的年龄被误报, 将根据保险金在正确年龄购买的保险金支付任何福利, 是可选的。另一项任择规定是改变职业规定, 规定如

果被保险人在更换为更危险的职业后受伤或生病，保险人将只支付保险费按照危险的职业的费率购买的部分赔偿金。未付保费条款规定，票据或书面订单所涵盖的任何未付保费或保费可从索赔付款中扣除，也是可选的。

Reference: 18.4 in the License Exam Manual.

Question 103 - #201623

All of the following provisions are optional in an individual health insurance policy EXCEPT:

- A) Misstatement of age provision.
- B) Change of beneficiary provision.
- C) Unpaid premium provision.
- D) Illegal occupation provision.

The correct answer was – B

以下所有条款在个人健康保险政策中是可选的，除了：

- A) 年龄规定的错误陈述。
- B) 受益人条款的变更。
- C) 未付保费。
- D) 非法职业条款。

正确答案是 - B

Explanation:

A change of beneficiary provision, stating that the insured has the right to change the beneficiary unless an irrevocable beneficiary designation has been made, is mandatory in individual health insurance policies. Optional provisions include an illegal occupation provision, which states that the insurer is not obligated to pay a benefit when the injury is due to the insured's involvement in a felony or illegal occupation, and a misstatement of age provision. An unpaid premium provision is also optional, and provides that if any unpaid premiums or notes exist when a claim is paid, they will be deducted from the amount due to the insured.

受益人条款的变更，表明被保险人有权更改受益人，除非已经指定了不可撤销的受益人，这在个人健康保险政策中是强制性的。可选条款包括非法职业条款，该条款规定，如果被保险人参与重罪或非法职业，保险公司没有义务支付赔偿金。年龄规定的错误陈述，未付保费条款也是可选的，并规定如果支付索赔时存在任何未付保费或票据，则将从应付保险金额中扣除。

Reference: 18.4 in the License Exam Manual.

Question 116 - #201621

All of the following provisions are optional in individual health insurance

policies EXCEPT:

- A) Change of occupation provision.
- B) Unpaid premium provision.
- C) Incontestability provision.
- D) Illegal occupation provision.

The correct answer was - C.

以下所有条款在个人健康保险政策中是可选的，除了：

- A) 职业规定的变更。
- B) 未付保费。
- C) 不可抗辩性规定。
- D) 非法职业条款。

正确的答案是 - C.

Explanation:

Every individual health insurance policy must include an incontestability provision, which states that after a policy has been in force for two years, the insurer cannot contest the statements in the application. Optional provisions include a change of occupation provision, which states that if the insured changes to a more hazardous occupation than the one listed in the policy and then suffers a loss, the insurer will provide coverage only to the extent that the premiums paid would have purchased for the less hazardous job.

An unpaid premium provision is also optional and provides that any unpaid premiums may be deducted from a claim payment when a claim is paid. An illegal occupation provision (also optional) states that the insurer is not liable for any losses suffered while the insured was committing a felony or engaged in an illegal occupation.

每项个人健康保险政策都必须包含一项不可抗辩性的条款，该条款规定，在保单生效两年后，保险公司不能对申请中的陈述提出异议。可选条款包括职业条款的变更，该条款规定，如果被保险人改变为比保险单中列出的职业更危险的职业，然后遭受损失，保险公司将仅对已经支付的保险费用来购买的危险工作的较少的赔偿。

未付的保费条款也是可选的，并规定在支付索赔时可以从索赔付款中扣除任何未付保费。非法职业条款（也是可选的）规定，保险人对被保险人重罪或从事非法职业的任何损失不承担责任。

Reference: 18.4 in the License Exam Manual.

Question 117 - #201625

All of the following are optional in an accident and health insurance policy EXCEPT:

A) Unpaid premium provision. B) Misstatement of age provision. C) Illegal occupation provision. D) Change of beneficiary provision.

The correct answer was - D

在事故和健康保险保单中，以下所有内容均为可选项，除了：
A) 未付保费。 B) 年龄规定的错误陈述。 C) 非法职业条款。 D) 受益人条款的变更。

正确的答案是 - D.

Explanation:

A change of beneficiary provision, stating that the insured has the right to change the beneficiary unless an irrevocable beneficiary designation has been made, is mandatory in all accident and health insurance policies. Optional provisions include an illegal occupation provision, an unpaid premium provision, and a misstatement of age provision.

所有意外和健康保险保单都必须更改受益人条款，声明被保险人有权更改受益人，除非已经指定了不可撤销的受益人。可选条款包括非法职业条款，未付保费条款以及年龄规定的错误陈述。

Reference: 18.4 in the License Exam Manual.

Question 84 - #201662

A broad statement that generally appears on the first page of a health insurance policy and specifies conditions under which benefits will be paid is known as the:

A) Assurance clause. B) Warranty provision. C) Insuring clause. D) Guaranty provision.

The correct answer was - C

通常出现在健康保险保单第一页并指定支付福利条件的广泛声明称为：
A) 保证条款。 B) 保修条款。 C) 保险条款。 D) 担保条款。

正确的答案是 - C.

Explanation:

The insuring clause identifies the insurer and insured, specifies benefits and includes the insurer's promise to pay benefits for specific kinds of losses.

保险条款确定了保险公司和被保险人，规定了保险金，并包括保险公司为特定种类的损失支付保险金的承诺。

Reference: 18.5.3 in the License Exam Manual.

Question 120 - #201663

All of the following statements apply to the insuring clause EXCEPT:

- A) The clause usually specifies that the benefits are subject to all provisions and terms stated in the policy.
- B) The clause represents the insurer's promise to pay benefits for specific kinds of losses.
- C) The clause defines losses not covered by the policy.
- D) The clause identifies the insured and the insurer.

The correct answer was – C

以下所有陈述均适用于保险条款，但不包括：

- A) 该条款通常规定，福利受保单中规定的所有条款和条款的约束。
- B) 该条款代表保险公司承诺为特定种类的损失支付福利。
- C) 该条款定义了保单未涵盖的损失。
- D) 该条款确定了被保险人和保险人。

正确的答案是 - C.

Explanation:

Losses not covered by the policy would be listed as exclusions.

该保单未涵盖的损失将被列为排除。

Reference: 18.5.3 in the License Exam Manual.

Question 105 - #201661

Concerning the free look provision, all of the following statements are correct EXCEPT:

- A) Most states require a free look provision in health insurance policies.
- B) Most states require a 30-day free-look provision in health insurance policies.
- C) A policy owner does not need to give any reason for returning a policy in accordance with the provision.
- D) It permits policy owners to return their policies within a specified time and receive full premium refunds.

The correct answer was – B

关于免费查看规定，以下所有陈述均正确，除了：

- A) 大多数州要求健康保险中的免费查看规定。
- B) 大多数州要求在健康保险中提供30天的免费服务。
- C) 保单持有人无需根据该条款给出任何退回保单的理由。
- D) 它允许保单持有人在指定时间内退回保单并获得全额保费退款。

正确答案是 - B

Explanation:

Most health insurance policies contain a 10- or 20-day free look provision. The common exception is Medicare supplement policies, which are required by state law to allow a 30-day free look period.

大多数健康保险保单包含10天或20天的免费查看规定。常见的例外是Medicare补贴政策，州法律规定这些政策允许30天的免费查看期限。

Reference: 18.5.2 in the License Exam Manual.

Question 21 - #201666

Generally, the consideration clause does all of the following EXCEPT:

- A) Lists the insured's beneficiaries.
- B) States the amount of premium payments.
- C) Lists the effective date of the contract.
- D) Defines the initial term of the policy.

The correct answer was – A

通常，审议条款执行以下所有操作，除了：

- A) 列出被保险人的受益人。
- B) 说明保费金额。
- C) 列出合同的生效日期。
- D) 定义保单的初始期限。

正确答案是 - A.

Explanation:

The consideration clause frequently lists the effective date of the contract, defines the initial term of the policy and states the amount of premium payments. In addition, it may specify the insured's right to renew the policy.

审议条款经常列出合同的生效日期，定义保单的初始期限并说明保费金额。此外，它还可以指定被保险人续签保单的权利。

Reference: 18.5.4 in the License Exam Manual.

Question 56 - #201665

Concerning the consideration clause for a health insurance policy, all of the following statements are correct EXCEPT:

- A) A consideration clause may be included in a rider, if requested by the insured.
- B) Two principal elements of the consideration clause are the premium payment and the application.
- C) The amount and frequency of premium payment are stated in the consideration clause.
- D) The consideration clause may specify the insured's right to renew the policy.

The correct answer was – A

关于健康保险政策的考虑条款，以下所有陈述均正确，除了：

- A) 如果被保险人要求，可以在附加险中包括审议条款。
- B) 审议条款的两个主要要素是保费支付和申请。
- C) 保费支付的金额和频率在审议条款中说明。
- D) 审议条款可以指明被保险人续签保单的权利。

正确答案是 - A.

Explanation:

The consideration clause is integral to a health insurance policy. As such, it would never be included in a rider.

审议条款是健康保险保单的组成部分。因此，它永远不会被包括在附加险中。

Reference: 18.5.4 in the License Exam Manual.

Question 76 - #201664

Which of the following terms relates directly to the consideration clause?

- A) Endorsement. B) Premium. C) Exclusion. D) Beneficiary.

The correct answer was – B

以下哪个条款直接与审议条款有关？

- A) 代言协议。 B) 保费。 C) 排除。 D) 受益人。

正确答案是 - B

Explanation:

The consideration clause describes the amount and frequency of the premium payments.

审议条款描述了保费支付的金额和频率。

Reference: 18.5.4 in the License Exam Manual.

Question 8 - #201690

The probationary period in disability income policies usually lasts:

- A) six months to one year.
- B) two to five months.
- C) No more than one week.
- D) two weeks to one month.

The correct answer was – D

残疾收入政策的试用期通常持续：

- A) 六个月到一年。

- B) 两到五个月。
- C) 不超过一周。
- D) 两周到一个月。

正确的答案是 - D.

Explanation:

Most disability income policy probationary periods range from 15 to 30 days after the effective date.

大多数残疾收入政策试用期为生效日期后的15至30天。

Reference: 19.3.1 in the License Exam Manual.

Question 15 - #201689

Which of the following statements pertaining to disability income insurance is NOT correct?

- A) Wanda's disability income policy has a 2-year benefit period for total disability. She was in an auto accident and now is classified as partially disabled. She can expect to receive benefits for less than 2 years.
- B) The probationary period is an initial time specified to elapse after the policy is in force before the insured qualifies for sickness and accident benefits.
- C) Terry is disabled in a car accident that occurs 6 days after the issue date of his policy. The 15-day probationary period included in his policy would not affect the payment of benefits to him.
- D) Martin has disability income insurance that pays him \$1,500 per month for 5 years if he becomes totally disabled. If he were to lose a hand in a mowing accident, his policy would not pay benefits for total disability.

The correct answer was – B

以下哪项与残疾收入保险有关的陈述不正确？

- A) Wanda的残疾收入政策有两年的全面残疾福利期。她在车祸中，现在被归类为部分残疾人。她可以期望获得不到2年的福利。
- B) 试用期是指保单生效后，被保险人符合享受疾病和事故福利资格之前的规定的初始时间。
- C) Terry在其保单生效日期后6天发生的车祸中残废。他的保单中包含的15天试用期不会影响他获得的福利。
- D) 马丁有残疾收入保险，如果他完全残疾，他每月可以支付1,500美元，为期5年。如果他在割草事故中失去一手，他的保单就不会支付完全残疾带来的福利。

正确答案是 - B

Explanation:

The probationary period in a disability income policy is the initial period of time that must pass before the insured qualifies for benefits due to sickness. The probationary period does not apply to benefits payable due to accidents.

残疾收入保单中的试用期是在被保险人因疾病获得福利之前必须经过的初始阶段。试用期不适用于因事故而应付的福利

Reference: 19.3.1 in the License Exam Manual.

Question 57 - #201688

What is the initial period of time specified in a disability income policy that must pass, after a policy is in force, before a loss due to sickness can be covered?

A) Preexisting term. B) Probationary period. C) Temporary interval. D) Elimination period.

The correct answer was – B

残疾收入政策中规定的最初期限是什么，在政策生效后必须通过，才能涵盖因疾病造成的损失？

A) 先前的任期。 B) 试用期。 C) 临时间隔。 D) 消除期。

正确答案是 - B

Explanation:

The probationary period is the initial period of time specified in a disability income policy that must pass, after a policy is in force, before a loss due to sickness can be covered. This provision is designed to protect the insurer against adverse selection.

试用期是残疾收入政策中规定的初始时期，在保单生效后，必须通过可以承担因疾病造成的损失。该条款旨在保护保险公司免受逆向选择。

Reference: 19.3.1 in the License Exam Manual.

Question 11 - #201692

In disability income insurance, an elimination period is a:

A) period of days following the start of disability during which benefits are not payable.
 B) Period when benefits being paid are temporarily discontinued to encourage the insured to return to work.
 C) Period preceding the benefit period in cases of disabilities caused by an accident rather than illness.

D) 30-day period following the end of a disability before benefits for a recurrent disability would be payable.

The correct answer was – A

在残疾收入保险中，消除期是：

- A) 残疾开始后的几天，在此期间不支付福利。
- B) 暂时停止支付福利以鼓励被保险人重返工作岗位的期间。
- C) 由于事故而非疾病导致的残疾情况，在受益期之前的期间。
- D) 残疾结束后30天的期限，然后才能支付经常性残疾的福利金。

正确答案是 - A.

Explanation:

In disability income insurance, an elimination period is a period of days following the start of a disability during which benefits are not payable.

Elimination periods vary between one week and one year; the longer the elimination period, the smaller the premium.

在残疾收入保险中，消除期是残疾开始后的几天，在此期间不支付福利。消除期在一周到一年之间不等；消除期越长，保费越小。

Reference: 19.3.2 in the License Exam Manual.

Question 16 - #201696

Paul is hospitalized with a back injury and, upon checking his disability income policy, learns that he will not be eligible for benefits for at least 60 days. This would indicate that his policy probably has a 60-day:

- A) Blackout period. B) Probationary period. C) Elimination period. D) Disability period.

The correct answer was – C

保罗因背部受伤住院，并在检查其残疾收入保单后，得知他至少有60天没有资格获得福利。这表明他的保单可能有60天：

- A) 停电期。 B) 试用期。 C) 消除期。 D) 残疾期。

正确的答案是 - C.

Explanation:

Similar in concept to a deductible, the elimination period is the time immediately following the start of a disability when benefits are not payable.

在概念上与免赔额类似，消除期是发生残疾开始后不支付福利的时间。

Reference: 19.3.2 in the License Exam Manual.

Question 22 - #201694

Durwood is hospitalized with leukemia and, upon checking his disability income policy, learns that he will not be eligible for benefits for at least 60 days.

That would indicate his policy probably has a 60-day:

A) Probationary period. B) Benefit period. C) Elimination period. D) Disability period.

The correct answer was – C

杜尔伍德因白血病住院，并在检查其残疾收入保单后，得知他至少有60天没有资格获得福利。这表明他的政策可能有60天：试用期。 B) 福利期。 C) 消除期。 D) 残疾期。

Explanation:

An elimination period is the time following an illness or disability during which benefits are not payable.

消除期是疾病或残疾之后的时间，在此期间不支付福利。

Reference: 19.3.2 in the License Exam Manual.

Question 30 - #201695

Which of the following terms BEST describes the maximum length of time that disability income benefits will be paid to the disabled insured?

A) Disability period. B) Benefit period. C) Elimination period. D) Coverage period.

The correct answer was – B

以下哪个术语最好的描述了支付给残疾人的残疾人收入福利将的最长时间？

A) 残疾期。 B) 福利期。 C) 消除期。 D) 覆盖期。

正确答案是 - B

Explanation:

The benefit period is the maximum length of time that disability income benefits will be paid to the disabled insured. The longer the benefit period, the higher the cost of the policy.

福利期是残疾人收入福利支付给残疾人的最长时间。福利期越长，保单成本越高。

Reference: 19.3.2 in the License Exam Manual.

Question 42 - #201697

An individual disability income policy is characterized by all of the following EXCEPT:

A) A rider may be added to adjust benefits for cost-of-living increases.
B) Premiums paid are generally not deductible.

- C) Benefits begin when the insured's claim is accepted.
 D) One of the bases used to set premiums is the monthly income benefit.

The correct answer was – C

个人残疾收入保单的特点有以下所有特点，除了：

- A) 可以添加附加险者调整生活费用增加的益处。
 B) 支付的保费通常不可扣除。
 C) 当被保险人的索赔被接受时，福利就开始了。
 D) 用于设定保费的基础之一是月收入福利。

正确的答案是 - C.

Explanation:

Premiums payable on an individual disability income contract are generally not tax deductible. Premium rates are determined per \$100 of monthly income benefit; the waiting period selected; the length of the benefit period; the applicant's age, income, and occupation; and whether the applicant has any other current disability income policies in force.

Disability income policies have waiting periods to eliminate claims for very short-term disabilities that the insured can manage without financial hardship. They may vary from one week to one year, though most policies specify 30 to 90 days. Benefits are not paid during this time. Riders are available to adjust benefits for cost-of-living increases.

个人伤残收入合同的应付保费通常不能抵税。保费率根据每100美元的月收入福利来确定;等待期的选择;福利期的长短;申请人的年龄,收入和职业;以及申请人是否有任何其他现行的残疾收入保单。

残疾收入保单有等待时间来消除被保险人管理短期残疾的索赔而没有经济困难。它们可能从一周到一年不等,但大多数政策规定30至90天。在此期间不支付福利。附加险可以调整生活费用增加的收益。

Reference: 19.3.2 in the License Exam Manual.

Question 52 - #201691

Elimination (waiting) periods in disability income policies are designed to:

- A) Last generally for one year.
 B) Help keep premium rates at a profitable level.
 C) Specify a limited period of time at the start of disability when benefits are not payable.
 D) Eliminate claims for long-term disabilities.

The correct answer was – C

残疾收入保单的排除（等待）期限旨在：

- A) 最后一般为一年。
- B) 帮助将保费率保持在可盈利的水平。
- C) 在不支付福利时指定残疾开始时的有限时间段。
- D) 消除长期残疾索赔。

正确的答案是 - C.

Explanation:

Waiting periods in disability policies specify a limited period of time at the start of disability when benefits are not payable.

残疾保单的等待期限规定了在不支付福利金时残疾开始时的有限时间。

Reference: 19.3.2 in the License Exam Manual.

Question 58 - #201693

All of the following statements apply to an elimination period EXCEPT:

- A) Elimination periods reduce claims for short-term disabilities.
- B) Depending on the policy, elimination periods may apply only to disabilities caused by sickness and not to disabilities caused by accident.
- C) Elimination periods usually range from one week to one year or longer, but most are at least 30 days.
- D) The shorter the elimination period, the lower the premium for comparable disability benefits.

The correct answer was – D

以下所有陈述均适用于淘汰（等待）期限，除了：

- A) 消除期减少了对短期残疾的索赔。
- B) 根据政策，消除期可能仅适用于由疾病引起的残疾，而不适用于因意外造成的残疾。
- C) 消除期通常为一周至一年或更长，但大多数至少为30天。
- D) 消除期越短，可比残疾福利的保费越低。

正确的答案是 - D.

Explanation:

The longer the elimination period, the lower the premium for comparable disability benefits. An elimination period can be compared to a deductible because both are cost-sharing devices that can have a direct bearing on the amount of premium required of the policy owner.

淘汰期越长，可比残疾福利的保费越低。淘汰期可以与免赔额进行比较，因为两者都是成本分摊设备，可以直接影响保单持有人所需的保费金额。

Reference: 19.3.2 in the License Exam Manual.

Question 33 - #201660

Regarding the waiver of premium provision, all of the following statements are correct EXCEPT:

- A) The waiver may apply retroactively to the original date of disability following a waiting period.
- B) It is frequently included with both individual and group policies.
- C) It is generally available with disability income policies.
- D) Such a waiver usually does not apply after the insured reaches age 60 or 65.

The correct answer was – B

关于豁免保费条款，以下所有陈述均正确，除了：

- A) 豁免可在追溯期后追溯适用于原始残疾日期。
- B) 它经常包含在个人和团体政策中。
- C) 通常有残疾收入政策。
- D) 在被保险人年满60岁或65岁之后，这种弃权通常不适用。

正确答案是 - B

Explanation:

A waiver of premium provision does not apply to group insurance.

豁免保费不适用于团体保险。

Reference: 18.5.11 in the License Exam Manual.

Question 50 - #201725

A waiver of premium provision may be included with which kind of health insurance policy?

- A) Major medical.
- B) Hospital indemnity.
- C) Basic medical.
- D) Disability income.

The correct answer was – D

哪种健康保险政策，可以包括豁免保费？

- A) 主要医疗。
- B) 医院赔偿。
- C) 基本医疗。
- D) 残疾收入。

正确的答案是 - D.

Explanation:

A waiver of premium rider generally is included with guaranteed renewable and non-cancellable individual disability income policies. It is a valuable provision because it exempts the policy owner from paying the policy's premiums during periods of total disability.

豁免保费通常包含在保证可续约和不可取消的个人伤残收入政策中。这是一项有价值的规定，因为它免除了保单持有人在完全残疾期间支付保单的保费。

Reference: 19.7.11 in the License Exam Manual.

Question 14 - #201680

Of the following situations, which one involves a loss that would typically NOT be excluded under a health insurance policy?

- A) The insured is injured in combat while serving in the military.
- B) The insured is injured in a car accident while living overseas.
- C) The insured is injured while vacationing in a state that is not her state of residence.
- D) The insured intentionally injures himself in an attempt to collect extra health benefits.

The correct answer was – C

在下列情况中，哪一种损失通常不会被健康保险保单排除？

- A) 被保险人在军队服役时受伤。
- B) 被保险人在海外生活时因车祸受伤。
- C) 被保险人在非居住州的度假时受伤。
- D) 被保险人故意伤害自己，企图收取额外的健康福利。

正确的答案是 - C.

Explanation:

Most health insurance policies typically exclude losses due to items such as war and acts of war, self-inflicted injuries, military service, and overseas residence. Being injured while vacationing in a state that is outside of the insured's state of residence is not something that would be excluded.

大多数健康保险政策通常不包括因战争和战争行为，自己造成伤害，服兵役和海外居住等物品造成的损失。在被保险人居住州以外的国家度假时受伤是不会被排除在外的。

Reference: 18.5.7 in the License Exam Manual.

Question 27 - #201681

Which of the following would most likely be reduced due to the presence of other available disability benefits?

- A) Workers' compensation payments.
- B) Disability income benefits under a group policy.
- C) Social Security benefits.

D) Accidental death and dismemberment (AD&D) benefits.

The correct answer was - B:

由于存在其他可用的残疾福利，以下哪项最有可能减少？

- A) 工人赔偿金。
- B) 集体政策下的残疾收入福利。
- C) 社会保障福利。
- D) 意外死亡和肢解 (AD&D) 福利。

正确的答案是 - B:

Explanation:

Group disability policies often coordinate, and thereby reduce, the payment of benefits if Social Security and other government benefits are paid.

如果支付社会保障和其他政府福利，集团残疾政策通常会协调并因此减少支付福利。

Reference: 18.5.7 in the License Exam Manual.

Question 89 - #201679

Which of the following is a CORRECT statement concerning individual accident and health insurance policies?

- A) They must include a provision covering pregnancy.
- B) They may limit or exclude coverage for preexisting conditions or diseases.
- C) They are now required to cover alcoholism and drug addiction.
- D) They must not have territorial limitations.

The correct answer was – B

以下哪项是关于个人意外和健康保险保单的正确声明？

- A) 他们必须包括一项涉及怀孕的规定。
- B) 他们可以限制或排除先前存在的病症或疾病的覆盖范围。
- C) 他们现在需要报道酗酒和吸毒成瘾。
- D) 他们不得有领土限制。

正确答案是 - B

Explanation:

Individual accident and health insurance policies may limit or exclude coverage for preexisting conditions or disease, alcoholism and drug addiction, and pregnancy, among other circumstances. Furthermore, they may have territorial limitations.

个别事故和健康保险政策可能会限制或排除先前存在的疾病，酗酒和吸毒成瘾以

及怀孕等疾病的保险范围。此外，它们可能具有地域限制。

Reference: 18.5.7 in the License Exam Manual.

Question 18 - #201719

All of the following statements pertaining to disability income policies are correct EXCEPT:

- A) Benefits are payable as specified, weekly, or monthly.
- B) Benefits may be payable for disabilities resulting from either accidental injury or sickness, and there are no exclusions.
- C) In some policies, the (residual) benefit payments are tied directly to the percentage of actual earnings lost.
- D) Some policies use an own occupation definition of total disability.

The correct answer was – B

以下所有与残疾收入政策有关的陈述都是正确的，除了：

- A) 福利按指定，每周或每月支付。
- B) 因意外伤害或疾病导致的残疾可以获得福利，并且没有例外情况。
- C) 在某些政策中，（剩余）福利金直接与实际收入损失的百分比挂钩。
- D) 一些政策使用自己的完全残疾职业定义。

正确答案是 - B

Explanation: Disability income policies, like all insurance policies, have coverage exclusions.

与所有保险单一样，残疾收入政策也有保险范围排除。

Reference: 19.6 in the License Exam Manual.

Question 33 - #201721

An individual was issued an alternative to a disability income policy in the form of an exclusion rider. The rider will not provide any income that results from disabilities related to his diabetes. The policy will provide benefits under all of the following conditions EXCEPT:

- A) He loses his leg after a serious car accident.
- B) He becomes blind as a result of an undiagnosed congenital condition.
- C) He is paralyzed after a skiing accident.
- D) He loses his leg as a result of the diabetes.

The correct answer was – D

一个人以排除附加险的形式获得了残疾收入政策的替代方案。附加险不会提供因与糖尿病有关的残疾而产生的任何收入。该保单将在以下所有条件下提供福利，除了：

- A) 严重车祸后他失去了腿。
- B) 由于未确诊的先天性疾病，他变得失明。
- C) 滑雪事故后他瘫痪了。
- D) 由于糖尿病，他失去了腿。

正确的答案是 - D.

Explanation: The exclusion rider eliminates coverage for any resulting disability related to the diabetes. A disability resulting from loss of a leg due to an accident or as a result of a condition that was not identified before the policy went into affect will be covered.

排除附加险消除了与糖尿病相关的任何残疾的覆盖范围。由于事故导致的腿部损失或由于在保单生效之前未发现的情况而导致的残疾将被涵盖。

Reference: 19.6 in the License Exam Manual.

Question 63 - #201718

All of the following are common exclusions under a disability contract EXCEPT:

- A) Disabilities resulting from accidents.
- B) Self-inflicted injuries.
- C) Preexisting conditions.
- D) Injuries suffered in the commission of a crime.

The correct answer was – A

以下所有内容均为残疾合同下的常见的排除情况，除了：

- A) 事故导致的残疾。
- B) 自我伤害。
- C) 预先存在的条件。
- D) 犯罪受到的伤害。

正确答案是 - A.

Explanation:

Self-inflicted injuries, preexisting conditions, and injuries suffered in the commission of a crime are common exclusions found in disability income insurance contracts.

在犯罪中受伤，自我伤害，既往疾病和是残疾收入保险合同中常见的排除。

Reference: 19.6 in the License Exam Manual.

Question 64 - #201720

A third-grade teacher with a congenital hip dislocation wishes to purchase a disability income policy, but fears she will

not be insurable. What option does she have to get coverage?

- A) She may purchase a policy with an extra premium to cover any disability that would involve her hip.
- B) She will not receive coverage under any circumstances.
- C) She may purchase a limited policy that will cover the disability resulting from accidents that happen only at school.
- D) She may purchase a policy if she changes her occupation to something less hazardous.

The correct answer was – A

先天性髋关节脱位的三年级教师希望购买残疾收入政策，但担心她会这样做不可保险。她有什么选择来获得保险？

- A) 她可能会购买额外保费的保单，以涵盖任何涉及她的臀部的残疾。
- B) 在任何情况下，她都不会获得保险。
- C) 她可能会购买有限的政策，以解决仅在学校发生的事故导致的残疾。
- D) 如果她将职业改为危险程度低的话，她可以购买保单。

正确答案是 - A.

Explanation:

Policy issuance alternatives may be employed to provide coverage to persons who ordinarily would be considered uninsurable. She may be issued a policy with an extra premium (rate-up) charge or with an exclusion rider that would eliminate coverage for any resulting disability related to her hip.

保单发行替代方案为通常被认为无法保险的人提供保险。她可能会获得一项额外保费（加价）费用的政策，或者可能会被排除在外的附加险，以排除因与她的臀部相关的任何残疾而导致的保险。

Reference: 19.6 in the License Exam Manual.

Question 6 - #201758

All of the following medical expenses generally are excluded from coverage under individual medical expense policies EXCEPT:

- A) Custodial care in a convalescent facility.
- B) Treatment for drug and alcohol abuse.
- C) Nursing care at home.
- D) nursing care in a hospital.

The correct answer was -D

以下所有医疗费用通常不包括在个人医疗费用保单范围内，但以下情况除外：

- A) 康复设施的监护。
- B) 药物和酒精滥用的治疗。
- C) 家中的护理。
- D) 医院的护理。

正确答案是-D

Explanation:

Individual medical expense policies cover nursing care in a hospital, but usually exclude treatment for drug or alcohol abuse, custodial care in a convalescent home, and nursing care at home.

个人医疗费用保单涵盖医院的护理，但通常不包括药物或酒精滥用的治疗，康复中心的监护，以及家中的护理。

Reference: 20.3.5 in the License Exam Manual.

Question 1 - #201772

Fees for all of the following items typically are covered under a medical expense policy's miscellaneous expense benefit EXCEPT:

- A) X-rays.
- B) Laboratory fees.
- C) Use of the operating room.
- D) Surgeon's fees.

The correct answer was – D

所有以下项目的费用通常都包含在医疗费用保单的杂项费用福利中，除了：

- A) X射线。
- B) 实验室费用。
- C) 使用手术室。
- D) 外科医生的费用。

正确的答案是 - D.

Explanation:

The miscellaneous expense benefit covers hospital "extras," such as x-rays, laboratory fees, and use of the operating room. It does not cover a surgeon's fees, which would be covered under a surgical expense policy.

杂项费用福利包括医院“额外费用”，如X光片，实验室费用和手术室的使用。它不包括外科医生的费用，这将由手术费用保单承担。

Reference: 20.6 in the License Exam Manual.

Question 38 - #201796

All of the following statements regarding indemnity dental plan exclusions and limitations are correct EXCEPT:

- A) Elective dental procedures such as teeth whitening are generally not covered under indemnity dental plans.
- B) Most indemnity dental plans limit the amount of services that are covered

within a year.

C) Coordination of benefit provisions are not permitted with dental insurance and a person may collect full plan benefits from every plan under which he is covered.

D) The maximum amount of coverage a plan will provide for any given form of dental care is most commonly based on the fees that are deemed usual, customary, and reasonable for the community in which the service is provided.

The correct answer was – C

以下关于赔偿牙科计划排除和限制的所有陈述都是正确的，除了：

A) 牙齿美白等选择性牙科手术通常不在赔偿牙科计划范围内。

B) 大多数赔偿牙科计划限制一年内涵盖的服务数量。

C) 牙科保险不允许协助福利条款，并且个人可以从其承保的每个计划中收取全部计划福利。

D) 计划为任何特定形式的牙科护理提供的最大保险金额通常基于提供服务的社区认为平常，习惯和合理的费用。

正确的答案是 - C.

Explanation:

As with most forms of health insurance, indemnity dental plans control premiums by limiting coverage from all plans to the cost of care received.

Coordination of benefit provisions are standard with indemnity plans.

与大多数形式的健康保险一样，赔偿牙科计划通过将所有计划的保险范围限制内所收到的医疗费用来控制保险费。赔偿条款的协调是赔偿计划的标准。

Reference: 21.3.2 in the License Exam Manual.

Question 39 - #201797

Jennifer's dental plan covers routine dental care at 80% (after the deductible), but major dental care is covered at 50%. Which of the following types of dental treatment would most likely have a 50% coinsurance requirement?

A) Creation of a fixed bridge.

B) A stainless steel crown.

C) Scaling of the gums to treat a gum infection.

D) Repair of dentures.

The correct answer was – A

Jennifer的牙科计划涵盖80%的常规牙科护理（免赔额之后），但主要的牙科护理覆盖率为50%。以下哪种类型的牙科治疗最有可能具有50%的共同保险要求？

A) 创建固定桥。

B) 不锈钢表冠。

C) 牙龈的缩放以治疗牙龈感染。

D) 修复假牙。

正确答案是 - A.

Explanation:

While minor post-orthodontic treatment, such as the adjustment of bridges and repair of dentures, is generally covered as routine care, the creation of a bridge or dentures is generally covered as a major expense and subject to a higher coinsurance requirement.

虽然较小的正畸后治疗，例如桥梁的调整和假牙修复，通常被视为常规护理，但桥梁或假牙的创建通常被视为主要费用并且需要更高的共同保险要求。

Reference: 21.3.2 in the License Exam Manual.

Question 47 - #201795

Most dental insurance plans control costs by all of the following EXCEPT:

A) Limiting the dollar limit on the benefits an insured can receive in 1 year.

B) Eliminating all coverage for specified time periods.

C) Limiting the number of services that the plan will cover.

D) Limiting the type of services that the plan will cover.

The correct answer was – B

大多数牙科保险计划通过以下所有方式控制费用，除了：

A) 限制被保险人在1年内可获得的福利限额。

B) 排除指定时间段内的所有覆盖范围。

C) 限制计划将涵盖的服务数量。

D) 限制计划将涵盖的服务类型。

正确答案是 - B

Explanation:

Most dental insurance plans control costs by limiting the dollar limit on the amount of benefits an insured can receive in 1 year or limiting the number or type of services that the plan will cover.

大多数牙科保险计划通过限制被保险人在1年内可以获得的福利金额限制报销限额或限制计划将涵盖的服务数量或类型来控制成本。

Reference: 21.3.2 in the License Exam Manual.

Question 3 - #201976

A long-term care policy cannot limit or exclude coverage for which of the following conditions?

A) Alzheimer's disease.

- B) Mental disorders.
- C) Service provided outside the United States.
- D) Intentionally self-inflicted injury.

The correct answer was – A

长期护理政策不能限制或排除下列哪种情况的保险？

- A) 阿尔茨海默病。
- B) 精神障碍。
- C) 在美国境外提供的服务。
- D) 故意自伤。

正确答案是 - A.

Explanation:

Although some mental or nervous conditions may be limited or excluded, benefits may not be excluded on the basis of Alzheimer's disease or other organic brain disorders.

虽然某些精神或神经疾病可能受到限制或排除,但不能排除基于阿尔茨海默病或其他器质性脑部疾病障碍。

Reference: 24.9.14 in the License Exam Manual.

Question 11 - #201975

Long-term care insurance can limit or exclude coverage for all of the following EXCEPT:

- A) Mental or emotional disorders, alcoholism and drug addiction.
- B) Chronic respiratory ailments.
- C) Medical conditions arising out of war or war-like activities.
- D) Participation in crimes.

The correct answer was – B

长期护理保险可以限制或排除以下所有情况的保险范围,除了,

- A) 精神或情绪障碍,酗酒和吸毒成瘾。
- B) 慢性呼吸道疾病。
- C) 战争或战争活动引起的医疗状况。
- D) 参与犯罪。

正确答案是 - B

Explanation:

As a general rule, long-term care policies may not limit or exclude coverage by type of illness. They may, however, limit or exclude preexisting conditions or

diseases and mental or nervous disorders. Loss from Alzheimer's disease, senile dementia and other organic brain syndromes or senility diseases cannot be excluded or limited.

作为一般规则，长期护理政策可能不会限制或排除疾病类型的覆盖范围。然而，它们可能限制或排除先前存在的病症或疾病以及精神或神经紊乱。阿尔茨海默病，老年痴呆症和其他有机脑综合症或衰老疾病的损失不能排除或限制。

Reference: 24.9.14 in the License Exam Manual.

Question 19 - #201986

Long-term care insurance policies can limit coverage for all of the following EXCEPT:

- A) Alzheimer's disease.
- B) Suicide.
- C) Treatment provided in a government facility.
- D) Mental disorder.

The correct answer was – A

长期护理保险政策可以限制以下所有的保险范围，除了：

- A) 阿尔茨海默病。
- B) 自杀。
- C) 政府机构提供的治疗。
- D) 精神障碍。

正确答案是 - A.

Explanation:

Generally, long-term care policies cannot limit or exclude coverage by type of illness, treatment, medical condition, or accident. However, coverage can be limited or excluded for treatment provided in a government facility. It can also be limited or excluded due to illness, treatment or medical condition arising out of an act of war, participation in a felony, service in the armed forces, suicide, and aviation. Although coverage can be limited or excluded due to mental or nervous disorders, long-term care policies must provide coverage for Alzheimer's disease.

一般而言，长期护理政策不能限制或排除疾病，治疗，医疗状况或事故类型的覆盖范围。但是，对于政府机构提供的治疗，可以限制或排除保险范围。由于战争，参与重罪，武装部队服役，自杀和航空等引发的疾病，治疗或医疗状况，它也可能受到限制或排除。虽然由于精神或神经紊乱可以限制或排除覆盖范围，但长期护理政策必须为阿尔茨海默病提供保险。

Reference: 24.9.14 in the License Exam Manual.

Question 24 - #201984

Long-term care policies can limit or exclude coverage for all of the following conditions EXCEPT:

- A) Intentionally self-inflicted injury.
- B) Alzheimer's disease.
- C) Preexisting conditions or diseases.
- D) Treatment provided in a government facility, if not required by law.

The correct answer was – B

长期护理政策可以限制或排除以下所有条件的保险范围，除了：

- A) 故意自伤。
- B) 阿尔茨海默病。
- C) 先前存在的病症或疾病。
- D) 如果法律没有要求，政府机构提供的治疗。

正确答案是 - B

Explanation:

Long-term care insurance policies may exclude preexisting conditions or diseases, intentionally self-inflicted injuries and treatment provided in a government facility, if not required by law. They also may exclude coverage for mental or nervous disorders without demonstrable organic disease, although benefits cannot be limited because of Alzheimer's disease and senile dementia.

如果法律没有要求，长期护理保险政策可以排除先前存在的条件或疾病，故意造成的自我伤害和政府机构提供的治疗。他们还可以排除没有明显的器质性的精神疾病或神经紊乱的覆盖范围，但由于阿尔茨海默病和老年痴呆症不能限制其受益。

Reference: 24.9.14 in the License Exam Manual.

Question 25 - #201983

Long-term care policies can limit or exclude coverage for all of the following EXCEPT:

- A) Family history of heart condition.
- B) Intentionally self-inflicted injury.
- C) Treatment provided in a government facility, not required by law.
- D) Preexisting conditions or diseases.

The correct answer was – A

长期护理政策可以限制或排除以下所有条款的覆盖范围，除了

- A) 心脏病家族史。

- B) 故意自伤。
- C) 政府机构提供的治疗，法律不要求。
- D) 先前存在的疾病或疾病。

正确答案是 - A.

Explanation:

Generally, long-term care policies cannot limit or exclude coverage by type of illness, treatment, medical condition, or accident. A policy, therefore, would not be able to exclude or limit coverage for a family history of a heart condition. However, there are several permissible exclusions, including preexisting conditions or diseases, intentionally self-inflicted injuries, alcoholism, and drug addiction. Treatment provided in a government facility may also be excluded if coverage is not required by law.

一般而言，长期护理政策不能限制或排除疾病，治疗，医疗状况或事故类型的覆盖范围。因此，政策不能排除或限制心脏病家族史的覆盖范围。但是，有几种允许的排除，包括先前存在的病症或疾病，故意自我伤害，酗酒和吸毒成瘾。如果法律不要求承保范围，也可以排除政府机构提供的治疗。

Reference: 24.9.14 in the License Exam Manual.

Question 32 - #201974

All of the following conditions are typically covered in a long-term insurance policy EXCEPT:

- A) Alzheimer's disease.
- B) Parkinson's disease.
- C) Senile dementia.
- D) Alcohol dependency.

The correct answer was – D

以下所有条件通常都包含在长期保险单中，除了：

- A) 阿尔茨海默病。
- B) 帕金森病。
- C) 老年痴呆症。
- D) 酒精依赖。

正确的答案是 - D.

Explanation:

Most LTC insurance policies exclude coverage for drug and alcohol dependency, acts of war, self-inflicted injuries, and nonorganic mental conditions. Organic cognitive disorders, such as Alzheimer's disease, senile dementia, and Parkinson's disease are almost always included.

大多数LTC保险政策不包括药物和酒精依赖，战争行为，自我伤害和非器官的精

神疾病的保险范围。几乎总是包括器官认知障碍，如阿尔茨海默病，老年性痴呆和帕金森病。

Reference: 24.9.14 in the License Exam Manual.

Question 35 - #201982

All of the following types of illnesses may be excluded from long-term care coverage EXCEPT:

- A) Intentionally self-inflicted injuries.
- B) Drug addiction.
- C) Preexisting conditions that existed within 6 months of the date of coverage for an insured under age 65.
- D) Alzheimer's disease

The correct answer was – D

以下所有类型的疾病都可能被排除在长期护理范围之外，除了：

- A) 故意自伤。
- B) 吸毒成瘾。
- C) 在65岁以下的被保险人承保之日起6个月内存在的先前存在条件。
- D) 阿尔茨海默病

正确的答案是 - D.

Explanation:

In general, long-term care policies may not limit or exclude coverage by type of illness or accident. However, certain illnesses may be excluded, including drug addiction, intentionally self-inflicted injuries, and preexisting conditions that existed within 6 months of the date of coverage for an insured under age 65. Mental or nervous disorders may also be excluded, although those with an organic cause such as Alzheimer's disease may not.

一般而言，长期护理政策可能不会限制或排除疾病或事故类型的覆盖范围。但是，某些疾病可能被排除在外，包括吸毒成瘾，故意造成的伤害，以及在65岁以下被保险人承保之日起6个月内存在的既往疾病。精神或神经紊乱也可能被排除在外，但阿尔茨海默病等器官性原因可能不会。

Reference: 24.9.14 in the License Exam Manual.

Question 37 - #201978

A long-term care insurance policy may limit or exclude coverage for all of the following reasons EXCEPT:

- A) Drug addiction.
- B) Treatment in a government facility when coverage is available through Medicare.
- C) Alzheimer's disease.

D) Alcoholism.

The correct answer was – C

长期护理保险政策可能会限制或排除以下所有原因的保险范围，除了：

- A) 吸毒成瘾。
- B) 通过Medicare提供保险时在政府机构中的治疗。
- C) 阿尔茨海默病。
- D) 酒精中毒。

正确的答案是 - C.

Explanation:

A long-term insurance policy may limit or exclude coverage for alcoholism, drug addiction and treatment provided in a government facility when coverage is available through other sources such as Medicare. A policy also may limit coverage for mental or nervous disorders, except for Alzheimer's disease.

长期保险政策可能会限制或排除政府机构提供的酒精中毒，吸毒成瘾和治疗的保险范围，此时可通过Medicare等其他来源获得保险。政策还可能限制精神或神经疾病的覆盖范围，但除阿尔茨海默病外。

Question 43 - #201977

A long-term care policy can exclude coverage for all of the following EXCEPT:

- A) Alcoholism.
- B) Drug addiction.
- C) Self-inflicted injury.
- D) Alzheimer's disease.

The correct answer was – D

长期护理政策可以排除以下所有情况的覆盖范围，除了：

- A) 酒精中毒。
- B) 吸毒成瘾。
- C) 自我伤害。
- D) 阿尔茨海默病。

正确的答案是 - D.

Explanation:

Exclusions or limitation of benefits for Alzheimer's disease or related problems are not permitted.

不允许排除或限制阿尔茨海默病或相关问题的保障。

Reference: 24.9.14 in the License Exam Manual.

Question 50 - #201981

A long-term care policy can exclude or limit coverage for all of the following EXCEPT:

- A) Alzheimer's disease.
- B) Mental disorders.
- C) Alcoholism.
- D) Illnesses resulting from war.

The correct answer was – A

长期护理政策可以排除或限制以下所有范围的覆盖范围，除了：

- A) 阿尔茨海默病。
- B) 精神障碍。
- C) 酒精中毒。
- D) 战争导致的疾病。

正确答案是 - A.

Explanation:

A long-term care policy can exclude or limit coverage for mental or nervous disorders (except for Alzheimer's disease), alcoholism and drug addiction, illnesses resulting from war, treatment provided in a government facility (unless required by law), preexisting conditions, and services for which benefits are available under Medicare or another governmental program.

长期护理政策可以排除或限制精神或神经紊乱酗酒和吸毒成瘾，战争引起的疾病，政府机构提供的治疗（法律要求除外），既往病情和根据Medicare或其他政府计划提供福利的服务，但阿尔茨海默病除外。

Reference: 24.9.14 in the License Exam Manual.

Question 52 - #201985

Long-term care policies permit all the following to be excluded from coverage EXCEPT:

- A) Treatment for alcoholism or drug addiction.
- B) Any illness or injury resulting from war.
- C) Treatment in a skilled nursing care facility.
- D) Treatment in a federal government facility.

The correct answer was – C

长期护理政策允许将以下所有内容排除在保险范围之外，除了：

- A) 治疗酗酒或吸毒成瘾。
- B) 战争造成的任何疾病或伤害。
- C) 在专业护理机构中的治疗。

D) 联邦政府机构的治疗。

正确的答案是 - C.

Explanation:

Treatment in a skilled nursing facility will be covered by long-term care policies.

长期护理政策将涵盖专业护理机构的治疗。

Reference: 24.9.14 in the License Exam Manual.

Question 55 - #201980

Long-term care policies can limit or exclude coverage for all of the following EXCEPT:

- A) Family history of heart condition.
- B) Preexisting conditions or diseases.
- C) Intentionally self-inflicted injury.
- D) Treatment provided in a government facility, not required by law.

The correct answer was – A

长期护理政策可以限制或排除以下所有条款的覆盖范围，除了，

- A) 心脏病家族史。
- B) 先前存在的疾病或疾病。
- C) 故意自伤。
- D) 政府机构提供的治疗，法律不要求。

正确答案是 - A.

Explanation:

Long-term care policies can exclude coverage for, among other things, preexisting conditions or diseases, treatment provided in a government facility that is not required by law, and intentionally self-inflicted injury. Coverage cannot be limited or excluded based on an individual's family history of heart conditions.

长期护理政策可以排除其他事项的覆盖范围，包括先前存在的疾病，政府机构提供的法律不要求的治疗，以及故意造成的自我伤害。根据个人心脏病的家族史，不能限制或排除保险范围。

Reference: 24.9.14 in the License Exam Manual.

Question 56 - #201979

A long-term care policy can exclude or limit coverage for all of the following EXCEPT:

- A) Mental disorders.
- B) Alcoholism.

- C) Alzheimer's disease.
- D) Illnesses resulting from war.

The correct answer was – C

长期护理政策可以排除或限制以下所有范围的覆盖范围，除了：

- A) 精神障碍。
- B) 酒精中毒。
- C) 阿尔茨海默病。
- D) 战争导致的疾病。

正确的答案是 - C.

A long-term care policy can exclude or limit coverage for mental or nervous disorders (except for Alzheimer's disease), alcoholism and drug addiction, illnesses resulting from war, treatment provided in a government facility, preexisting conditions, and services for which benefits are available under Medicare or another governmental program.

长期护理政策可以排除或限制精神或神经疾病，酗酒和吸毒成瘾，战争导致的疾病，政府机构提供的治疗，既有疾病以及可获得福利的服务的保险范围 根据 Medicare或其他政府计划。但阿尔茨海默病除外。

Reference: 24.9.14 in the License Exam Manual.

Question 23 - #201771

All of the following statements regarding preexisting conditions are correct EXCEPT:

- A) By most policy definitions, a preexisting condition is one that was contracted by the insured within 1 year before a policy was issued.
- B) Specifying exclusions for preexisting conditions helps an insurer to maintain reasonable premium rates.
- C) Disability income policies commonly include a probationary period to help control the risk of preexisting conditions.
- D) Medical expense policies frequently exclude benefits for losses due to such conditions.

The correct answer was – A

关于先前存在的条件的所有以下陈述都是正确的，除了：

- A) 根据大多数保单定义，预先存在的条件是在保单发布前1年内由被保险人签订的条件。
- B) 指定先前存在条件的排除条款有助于保险公司维持合理的保险费率。
- C) 残疾收入保单通常包括试用期，以帮助控制先前存在的条件的风险。
- D) 医疗费用保单经常排除因这些条件造成的损失。

正确答案是 - A.

Explanation:

A preexisting condition is one that first manifested or was treated within a stipulated period before the insured applied for the policy. This period is not necessarily limited to one year.

先前存在的条件是在被保险人申请保单之前的规定期限内首先表现的或被处理的病史条件。这段时间不一定限于一年。

Reference: 20.4.4.5 in the License Exam Manual.

Question 6 - #201988

Regarding long-term care insurance, the existence of symptoms that would cause an ordinarily prudent person to seek diagnosis or treatment, or a condition for which medical advice or treatment was recommended by or received from a provider of health care services within six months before the effective date of an insured's coverage is known as:

- A) Pre-coverage warranty.
- B) A preexisting condition.
- C) Previous symptoms.
- D) The 6-month rule.

The correct answer was – B

关于长期护理保险，在被保险人保险的生效日期之前六个月内，存在可能导致被保险人寻求诊断或治疗的症状，或者在医疗保健服务提供者推荐或接受医疗建议或治疗的情况。称为：

- A) 预覆盖保证。
- B) 预先存在的条件。
- C) 以前的症状。
- D) 6个月的规则。

正确答案是 - B

Explanation:

The most restrictive definition allowed for a preexisting condition in long-term care insurance is the existence of symptoms that would cause an ordinarily prudent person to seek diagnosis or treatment, or a condition for which medical advice or treatment was recommended by or received from a provider of health care services within 6 months preceding the effective date of an insured's coverage.

在长期护理保险中存在先前条件的限制性最强的定义是，在被保险人承保生效日期之前6个月内，存在会导致普通谨慎的人寻求诊断或治疗的症状，或者医疗保健服务提供者推荐或接受医疗建议或治疗的条件下。

Reference: 24.9.15 in the License Exam Manual.

Question 45 - #201987

What is the definition of "preexisting condition" in a long-term care policy?

- A) A condition for which advice or treatment was received within three months before the effective date of coverage.
- B) A condition for which advice or treatment was received within six months before the effective date of coverage.
- C) Any health condition that existed before coverage was in force.
- D) A condition for which advice or treatment was received within one year before the effective date of coverage.

The correct answer was – B

长期护理政策中“先前存在的情况”的定义是什么？

- A) 在保险生效日期之前三个月内收到建议或治疗的条件。
- B) 在保险生效日期之前六个月内收到建议或治疗的条件。
- C) 在保险范围生效之前存在的任何健康状况。
- D) 在保险生效日期之前一年内收到建议或治疗的条件。

正确答案是 - B

Explanation:

A condition is considered to be preexisting if advice or treatment was received from a health care provider within six months before the effective date of coverage.

如果在保险生效日期之前六个月内收到医疗保健提供者的建议或治疗，则该病症被认为是预先存在的。

Reference: 24.9.15 in the License Exam Manual.

Question 45 - #201711

John is back on the job two weeks when he again becomes sick and is unable to work. He is likely to receive benefits immediately for which of the following reasons?

- A) He is eligible for coverage under Social Security.
- B) He is covered under his disability income insurance policy's partial disability provision.
- C) He is covered under his disability income insurance policy's recurrent disability provision.
- D) He is covered under an accidental death and dismemberment (AD&D) policy.

The correct answer was – C

约翰在他再次生病，无法工作后的两周重新上班。出于以下原因，他可能会立

即获得福利?

- A) 他有资格获得社会保障的保险。
- B) 他受残疾收入保险单部分残疾规定的保障。
- C) 他受残疾收入保险单的复发性残疾规定保险。
- D) 他受到意外死亡和肢解 (AD&D) 政策的保护。

正确的答案是 - C.

Explanation:

Under a disability income policy's "recurrent disability" provision, disabled individuals are encouraged to return to work on a part-time basis. If they become disabled again with the same disability, there is generally no second elimination period. AD&D policies generally do not pay benefits for illness. Social Security requires a waiting period before the start of benefits. Also, with most disability income policies, partial disability, when available, pays benefits only after a period of full disability.

根据残疾人收入政策的“复发性残疾”规定，鼓励残疾人以兼职方式返回工作岗位。如果他们再次成为残疾人，则通常没有第二个消除期。AD&D政策通常不会为疾病支付福利。社会保障需要在福利开始前等待一段时间。此外，对于大多数残疾收入政策，部分残疾（如果有的话）仅在完全残疾期后支付福利金。

Reference: 19.3.8 in the License Exam Manual.

Question 65 - #201710

Which of the following statements pertaining to recurrent disabilities for disability income insurance is NOT correct?

- A) A recurrent disability may begin a new benefit period.
- B) A new elimination period may or may not be required for a recurrent disability.
- C) A recurrent disability policy provision would have no effect on the payment of benefits.
- D) A recurrent disability is one that the insured experiences more than once.

The correct answer was – C

以下哪项与残疾收入保险的经常性残疾有关的陈述不正确?

- A) 复发性残疾可能会开始新的受益期。
- B) 复发残疾可能需要或可能不需要新的消除期。
- C) 复发性的残疾政策规定对福利金的支付没有影响。
- D) 复发性残疾是指被保险人不止一次经历的残疾。

正确的答案是 - C.

Explanation:

Policy provisions dealing with recurrent disabilities determine how and when benefits are payable.

处理复发性残疾的政策规定决定了如何以及何时支付福利。

Reference: 19.3.8 in the License Exam Manual.

Question 12 - #201765

In major medical and comprehensive medical expense policies, a coinsurance provision:

- A) Has no effect on claims.
- B) Helps to satisfy the deductible amount.
- C) Does not apply until benefit amounts exceed \$2,000.
- D) Provides for percentage participation by the insured.

The correct answer was – D

在主要的医疗和综合医疗费用政策中，共同保险条款：

- A) 对索赔没有影响。
- B) 帮助满足免赔额。
- C) 在福利金额超过2,000美元之前不适用。
- D) 规定被保险人的参与百分比。

正确的答案是 - D.

Explanation:

In major medical and comprehensive medical expense policies, a coinsurance provision provides for percentage participation by the insured. For example, a 75/25 coinsurance provision means the insurance company will cover 75% of the allowable medical expenses, and the insured pays the remaining 25%. Coinsurance provisions apply after any required deductible has been paid.

在主要的医疗和综合医疗费用政策中，共同保险条款规定了被保险人的参与百分比。例如，75/25共同保险条款意味着保险公司将承担75%的允许医疗费用，而被保险人支付剩余的25%。在支付任何所需的免赔额后，适用保险条款。

Reference: 20.4.1.2 in the License Exam Manual.

Question 7 - #201763

The calendar year deductible provision of a major medical policy means that:

- A) All claims submitted during the calendar year are subject to the amount of the deductible.
- B) The deductible is applied against each claim during the first calendar year the policy is in effect.
- C) The deductible is applied only once during the calendar year.
- D) The insurer pays a higher percentage of the medical expenses than the insured.

The correct answer was – C

一、日历年度可扣除的主要医疗政策规定意味着：

- A) 在日历年内提交的所有索赔均受免赔额的限制。
- B) 在保单生效的第一个日历年内，免赔额适用于每项索赔。
- C) 免赔额仅在日历年内适用一次。
- D) 保险公司支付的医疗费用比被保险人高。

正确的答案是 - C.

Explanation:

A major medical policy's calendar year deductible means that when the deductible amount is met during the calendar year, all claims submitted will be treated for the balance of the year without meeting any new deductibles. Dividing the costs of medical expenses between the insured and insurer is known as percentage participation, or coinsurance.

主要医疗保险的日历年免赔额意味着当在日历年内满足可扣除金额时，所有提交的索赔将在一年中的余额中处理，而不会达到任何新的免赔额。将被保险人和保险人之间的医疗费用分摊称为参与百分比或共同保险。

Reference: 20.4.1.1 in the License Exam Manual.

Question 11 - #201764

Leonard owns a major medical health policy which requires him to pay the first \$200 of covered expenses each year before the policy pays its benefits. The \$200 is the policy's:

- A) Deductible.
- B) Coinsurance amount.
- C) stop-loss amount.
- D) Annual premium.

The correct answer was – A

伦纳德拥有一项主要的医疗保健政策，要求他在保单支付福利金之前每年支付首笔200美元的保障费用。200美元是政策的：

- A) 免赔额。
- B) 共同保险金额。
- C) 止损金额。
- D) 年度保费。

正确答案是 - A.

Explanation:

A deductible is a stated initial dollar amount that the individual insured is required to pay before insurance benefits are paid.

免赔额是指保险个人在支付保险金之前需要支付的初始金额。

Reference: 20.4.1.1 in the License Exam Manual.

Question 3 - #201769

Comprehensive medical expense insurance covers all of the following EXCEPT:

- A) Surgical fees.
- B) Loss of income resulting from sickness.
- C) Hospital miscellaneous expenses.
- D) Hospital room and board.

The correct answer was – B

综合医疗费用保险涵盖以下所有内容：

- A) 手术费。
- B) 疾病造成的收入损失。
- C) 医院杂费。
- D) 医院食宿。

正确答案是 – B

Explanation:

Comprehensive medical expense insurance covers room and board, surgical fees and hospital miscellaneous expenses up to a dollar limit. Disability income insurance covers loss of income resulting from accident or illness.

综合医疗费用保险包括食宿费，手术费和医院杂费，最高限额为每美元限额。残疾收入保险包括因意外或疾病导致的收入损失。

Reference: 20.4.2.2 in the License Exam Manual.

Question 7 - #201469

All of the following are considered basic health care services offered by HMOs EXCEPT:

- A) Inpatient hospital care.
- B) X-ray services.
- C) Rehabilitative and home health services.
- D) Emergency care.

The correct answer was – C

以下所有内容均被视为HMO提供的基本医疗保健服务，除了：

- A) 住院治疗。
- B) X射线服务。
- C) 康复和家庭保健服务。
- D) 紧急护理。

正确的答案是 - C.

Explanation:

Basic health care services include emergency care, inpatient hospital and physician care, outpatient medical and chiropractic services, laboratory and x-ray services, coverage for certain low-protein food products, optional coverage for mental health services for alcohol or drug abuse, and chiropractic services on a referral basis as an optional service. Rehabilitative and home health services are not considered basic health care services; instead, they are characterized as health care services.

基本保健服务包括紧急护理，住院医院和医生护理，门诊医疗和脊椎按摩服务，实验室和X光服务，某些低蛋白食品的保险，可选择的酒精或药物滥用精神保健服务，以及脊椎按摩疗法 作为可选服务的推荐服务。康复和家庭保健服务不被视为基本保健服务；相反，它们被定性为医疗保健服务。

Reference: 16.5.3.6 in the License Exam Manual.

Question 12 - #201765

In major medical and comprehensive medical expense policies, a coinsurance provision:

- A) Has no effect on claims.
- B) Helps to satisfy the deductible amount.
- C) Does not apply until benefit amounts exceed \$2,000.
- D) Provides for percentage participation by the insured.

The correct answer was – D

在主要的医疗和综合医疗费用政策中，共同保险条款：

- A) 对索赔没有影响。
- B) 帮助满足免赔额。
- C) 在福利金额超过2,000美元之前不适用。
- D) 规定被保险人的参与百分比。

正确的答案是 - D.

Explanation:

In major medical and comprehensive medical expense policies, a coinsurance provision provides for percentage participation by the insured. For example, a 75/25 coinsurance provision means the insurance company will cover 75% of the allowable medical expenses, and the insured pays the remaining 25%.

Coinsurance provisions apply after any required deductible has been paid.

在主要的医疗和综合医疗费用政策中，共同保险条款规定了被保险人的参与百分比。例如，75/25共同保险条款意味着保险公司将承担75%的允许医疗费用，而被保险人支付剩余的25%。在支付任何所需的免赔额后，适用保险条款。

Reference: 20.4.1.2 in the License Exam Manual.

Question 78 - #201470

In a health maintenance organization, the role of the gatekeeper is performed by the insured's:

- A) Claims adjuster.
- B) Insurer.
- C) Insurance broker.
- D) Primary physician.

The correct answer was – D

在健康维护组织中，看门人的角色由被保险人执行：

- A) 理赔员。
- B) 保险公司。
- C) 保险经纪人。
- D) 初级保健医师。

正确的答案是 - D.

Explanation:

Employees who join a managed care organization that is not a point-of-service plan must consult their primary care physician before they receive any medical care. The primary care physician then either provides the care an employee needs or refers the employee to a specialist, a hospital, or an ancillary health care professional. In so doing, the primary care physician acts as a guide, or gatekeeper, for patients in the health care system.

加入非托管服务计划的管理式医疗机构的员工必须在接受任何医疗护理之前咨询其初级保健医生。然后，初级保健医生要么提供员工需要的护理，要么将员工转介给专科医生，医院或辅助医疗保健专业人员。这样做时，初级保健医生充当医疗保健系统中的患者的指导或看门人。

Reference: 16.5.3.7.1 in the License Exam Manual.

Question 19 - #201752

Which of the following methods of determining benefits under a surgical expense policy assigns a set of points to surgical procedures?

- A) Surgical schedule.
- B) Relative value.
- C) Corridor offset.
- D) Reasonable and customary costs.

The correct answer was – B

根据手术费用政策确定福利的以下哪种方法为手术程序指定了一组要点？

- A) 手术时间表。
- B) 相对价值。
- C) 走廊偏移。
- D) 合理和惯常的成本。

正确答案是 - B

Explanation:

The relative value approach to determining benefits assigns a number of points to different surgical procedures, relative to the number of points assigned to a maximum procedure, such as a heart bypass. If a heart bypass were assigned, say, 1,000 points, every other procedure's point assignment would be relative to that. For example, an appendectomy might be assigned 200 points; setting a broken finger might be assigned five points. A dollar-per-point conversion factor is then applied to determine dollar benefits.

确定保障的相对价值方法相对于分配给最大程序的点数（例如心脏旁路），为不同的外科手术程序分配了许多点。如果指定心脏搭桥，例如1000点，则每个其他手术的点分配将相对于此。例如，阑尾切除术可能被分配200分；设置断手指可能会分配五个点。然后应用每美元每点转换因子来确定美元收益。

Reference: 20.3.2 in the License Exam Manual.

Question 26 - #201753

All of the following approaches are used by insurers to determine benefits payable under basic surgical expense insurance EXCEPT:

- A) Traditional net cost method.
- B) Reasonable and customary approach.
- C) Relative value scale approach.
- D) Surgical schedule method.

The correct answer was - A

保险公司使用以下所有方法来确定基本手术费用保险下的支付福利，除了：

- A) 传统的净成本法。
- B) 合理和习惯的方法。
- C) 相对价值尺度方法。
- D) 手术计划方法。

正确答案是 - A.

Explanation:

There are 3 different approaches used by insurers to determine benefits payable for surgical services: surgical schedule approach, the reasonable and customary approach, and the relative value scale approach. Under the surgical schedule method, every surgical procedure is assigned a dollar amount by the

insurer. The reasonable and customary approach is more open in its determination of benefits payable. The relative value scale is similar to the surgical schedule method, except that instead of a flat dollar amount being assigned to every surgical procedure, a set of points is assigned. The number of points assigned to any one procedure is relative to the number of points assigned to a maximum procedure. The traditional net cost method is a way of comparing costs of similar policies.

保险公司使用3种不同的方法来确定外科服务的应付福利：手术时间表方法，合理和习惯方法以及相对价值量表方法。根据手术计划方法，每个外科手术程序由保险公司分配一笔金额。在确定支付福利时，合理和惯常的做法更为开放。相对值标度与手术计划方法类似，不同之处在于，不是为每个外科手术程序分配固定的美元金额，而是分配一组点。分配给任何一个过程的点数相对于分配给最大过程的点数。传统的净成本法是一种比较类似保单成本的方法。

Reference: 20.3.2 in the License Exam Manual.

Question 25 - #201736

If an impairment rider is attached to a health insurance policy, it will:

- A) Lengthen the policy's waiting period.
- B) Increase the premium rate charged.
- C) Decrease the amount of benefits provided.
- D) Exclude from coverage losses resulting from specified conditions.

The correct answer was – D

如果减值附加险被附加到健康保险单中，它将：

- A) 延长保单的等待期。
- B) 增加收取的保费率。
- C) 减少提供的福利金额。
- D) 排除因特定条件导致的保险范围的损失。

正确的答案是 - D.

Explanation:

An impairment rider attached to a health insurance policy excludes coverage for losses that result from chronic conditions or physical impairments. Through such a rider, an otherwise substandard risk can be insured at a standard rate.

健康保险单附带的减值附加险不包括因慢性病或身体损伤导致的损失保险。通过这样的附加险，可以以标准费率保证其他不合标准的风险。

Reference: 19.7.9 in the License Exam Manual.

Question 35 - #201734

Which of the following riders allows an insurer to issue a health insurance

policy to an individual that covers everything but a certain injury or illness?

- A) Preexisting condition.
- B) Optional exclusion.
- C) Multiple indemnity.
- D) Waiver for impairments.

The correct answer was – D

以下哪些附加险允许保险公司向除了某种伤害或疾病之外的所有人发布健康保险政策?

- A) 预先存在的条件。
- B) 可选的排除。
- C) 多重赔偿。
- D) 豁免减损。

正确的答案是 - D.

Explanation:

The waiver of impairments rider allows the insurer to issue a health insurance policy to an individual that covers everything but a certain specified injury or illness. This allows an otherwise uninsurable person to obtain at least some coverage.

放弃减损附加险允许保险公司向个人签发健康保险保单, 该保险单涵盖除特定伤害或疾病之外的所有事项。这允许不可保险的人获得至少一些保险。

Reference: 19.7.9 in the License Exam Manual.

Question 46 - #201737

Persons who are otherwise considered unacceptable health insurance risks can obtain coverage if an insurer issues a policy with a(n)

- A) Waiver of impairments rider.
- B) Multiple indemnity rider.
- C) Optional exclusion rider.
- D) Non disabling injury rider.

The correct answer was – A

被认为是不可接受的健康保险风险的人可以获得保险, 那保险公司签发的是一个怎样的保单?

- A) 放弃损伤的附加值。
- B) 多重赔偿附加险。
- C) 可选的排除附加险。
- D) 非残伤害附加险。

正确答案是 - A.

Explanation:

The waiver of impairments rider allows an insurer to issue a health insurance policy that covers everything but a specified illness or injury. This allows an otherwise uninsurable person to receive at least some amount of insurance coverage.

对豁免减损的附加险允许保险公司签发涵盖除特定疾病或伤害之外的所有事项的健康保险。这允许不可保险的人接收至少一定数量的保险。

Reference: 19.7.9 in the License Exam Manual.

Question 60 - #201735

The effect of an impairment rider attached to a health insurance policy is to:

- A) Lengthen the preexisting condition waiting period.
- B) Exclude losses resulting from specified conditions.
- C) Decrease the amount of benefits provided.
- D) Increase the premium rate charged.

The correct answer was - B

减损附加险对健康保险单的影响是：

- A) 延长先前存在的条件等待期。
- B) 排除因特定条件造成的损失。
- C) 减少提供的福利金额。
- D) 增加收取的保费率。

正确答案是 - B

Explanation:

An exclusion or impairment rider rules out coverage for losses resulting from specified conditions, such as chronic conditions or physical impairments. By excluding such questionable risks, the insurer is able to issue a policy at standard rates.

排除或减值附加险排除因特定条件（例如慢性病或身体损伤）导致的损失的保险范围。通过排除这些可疑风险，保险公司能够以标准费率签发保单。

Reference: 19.7.9 in the License Exam Manual.

Question 3 - #201154

A guaranteed insurability rider may be attached to which of the following policies?

- A) Group health.
- B) Disability income.
- C) Accidental death and dismemberment.
- D) Medical expense.

The correct answer was – B

保证可保险性的附加险可以附加到以下哪项保单？

- A) 团体健康。
- B) 残疾收入。
- C) 意外死亡和肢解。
- D) 医疗费用。

正确答案是 - B

Explanation:

The guaranteed insurability rider may be attached to a disability income policy. This rider is sometimes also referred to as the future increase option or guaranteed purchase option.

保证可保性的附加险可以附加到残疾收入政策。该附加险有时也被称为未来增加选项或保证购买选项。

Reference: 19.7.2 in the License Exam Manual.

Question 14 - #201728

Dan is a young man with a bright future, and he expects his income to increase over the next ten years. Under the disability income insurance policy he is considering, why might he add a guaranteed insurability rider?

- A) If he becomes disabled, the rider will pay benefits in addition to any Social Security benefits he might receive.
- B) The rider will allow him to increase his benefit amount every time his income increases.
- C) The rider will increase his benefits to reflect increases in the cost of living.
- D) The rider will allow him to increase his benefit amount periodically without being required to show evidence of insurability.

The correct answer was – D

丹是一个有着光明未来的年轻人，他预计未来十年他的收入会增加。根据他正在考虑的残疾收入保险政策，为什么他会增加一个保证可保险性的附加险？

- A) 如果他成为残疾人，除了他可能获得的任何社会保障福利外，附加险还将支付福利金。
- B) 附加险将允许他在每次收入增加时增加他的福利金额。
- C) 附加险将增加他的利益以反映生活费用的增加。
- D) 附加险将允许他定期增加他的福利金额，而不需要显示可保险性的证据。

正确的答案是 - D.

Explanation:

The future increase option provided under a guaranteed insurability rider has 2 key features: (1) increases to coverage amounts can be made at predetermined times, and (2) no evidence of insurability is required.

在保证可保性附加险下提供的未来增加选项具有两个关键特征：（1）可以在预定时间增加覆盖量，以及（2）不需要可保证性证据。

Reference: 19.7.2 in the License Exam Manual.

Question 6 - #201136

An accidental death and dismemberment (AD&D) policy paying twice the principal sum is known as:

- A) principal twice.
- B) Double indemnity.
- C) Double consideration.
- D) A reimbursement policy.

The correct answer was – B

支付两倍本金的意外死亡和肢解（AD&D）政策被称为：

- A) 两倍本金。
- B) 双重赔偿。
- C) 双重考虑。
- D) 报销政策。

正确答案是 - B

Explanation:

An AD&D policy paying twice the principal sum if the insured dies as a result of an accident is known as a double indemnity policy.

如果被保险人因事故而死亡，则支付两倍本金的AD&D保单被称为双重赔偿政策。

Reference: 10.3.1 in the License Exam Manual.

Question 15 - #201133

Jay has a \$50,000 life insurance policy with an accidental death benefit that pays triple the face amount. If Jay commits suicide three years after purchasing the policy, how much will his beneficiary receive?

- A) \$50,000.00
- B) \$100,000.00
- C) \$0.00
- D) \$150,000.00

The correct answer was – A

杰拥有50,000美元的人寿保险保单，其意外死亡保险金额为三倍。如果Jay在

购买保单三年后自杀，他的受益人会收到多少？

- A) \$ 50,000.00
- B) \$ 100,000.00
- C) 0.00美元
- D) \$ 150,000.00

正确答案是 - A.

Explanation:

Suicide is excluded from coverage under the accidental death benefit and, as a result, does not qualify for the additional payment. Moreover, most policies include a 1- or 2-year suicide clause that excludes coverage if the insured commits suicide during that period following the effective date. Because the suicide occurred more than two years after the policy effective date, the face amount will be paid.

自杀被排除在意外死亡抚恤金的保险范围之外，因此不符合额外付款的资格。此外，大多数政策都包括1年或2年的自杀条款，如果被保险人在生效日期后的那段时间内自杀，则不包括保险。由于自杀是在政策生效日期后两年以上发生的，因此将支付面额。

Reference: 10.3.1 in the License Exam Manual.

Question 21 - #201137

Theodore received a \$15,000 cash benefit from his \$50,000 accidental death and dismemberment policy for the accidental loss of one eye. The amount he received could be identified as the policy's:

- A) Contingent amount.
- B) Secondary sum.
- C) Capital sum.
- D) Principal sum.

The correct answer was – C

西奥多因意外失去一只眼睛，从他的50,000美元意外死亡和肢解保单而获得了15,000美元的现金补助。他收到的金额可以确定为保单：

- A) 或有金额。
- B) 二次总和。
- C) 资本金额。
- D) 本金。

正确的答案是 - C.

Explanation:

The capital sum paid under an AD&D policy is the amount payable for the accidental loss of sight or accidental dismemberment. It is a specified amount,

usually expressed as a percentage of the principal sum, that varies according to the severity of the injury. The principal sum under an AD&D policy is the amount payable as a death benefit. The principal sum is the maximum amount the policy will pay.

根据AD&D政策支付的资本金额是意外丧失视力或意外肢解的应付金额。它是指定的金额，通常表示为本金的百分比，根据损伤的严重程度而变化。AD&D政策下的本金是作为死亡抚恤金应付的金额。最高本金是政策支付的最高金额。

Reference: 10.3.1 in the License Exam Manual.

Question 24 - #201134

For a beneficiary to receive accidental death benefits, death of the insured generally must occur within how many days following the accident?

A) 60 days. B) 90 days. C) 45 days. D) 30 days.

The correct answer was – B

对于受益人获得意外死亡抚恤金，被保险人的死亡一般必须在事故发生后的几天内发生？

A) 60天。 B) 90天。 C) 45天。 D) 30天。

正确答案是 - B

Explanation:

For a beneficiary to receive accidental death benefits, death of the insured generally must occur within 90 days following an accident.

对于受益人获得意外死亡抚恤金，被保险人的死亡一般必须在事故发生后90天内发生。

Reference: 10.3.1 in the License Exam Manual.

Question 32 - #201135

The insured in a \$25,000 life insurance policy died of a heart attack. Since the policy had a "double indemnity" provision, the policy beneficiary received

A) \$12,500.00
B) \$50,000.00
C) Nothing.
D) \$25,000.00

The correct answer was – D

25,000美元的人寿保险单中的被保险人死于心脏病。由于该政策有“双重赔偿”条款，政策受益人收到了

A) 12,500.00美元
B) \$ 50,000.00

- C) 没什么。
D) 25,000.00美元

正确的答案是 - D.

Explanation:

Under a "double indemnity" provision, the policy beneficiary would receive double the face amount in the event of a fatal accidental injury. Since the insured's death was not due to an accident, the policy paid its \$25,000 face amount.

根据“双重赔偿”条款，如果发生致命的意外伤害，保单受益人将获得面额的两倍。由于被保险人的死亡不是由于事故造成的，该保单支付了25,000美元的面值。

Reference: 10.3.1 in the License Exam Manual.

Question 109 - #201678

Assured Insurance Company issues a health insurance policy it describes as non cancellable. This means that:

- A) The company cannot cancel the policy for any reason.
B) The insured is entitled to renew the policy indefinitely, though the insurer can change policy provisions.
C) The insured can continue the policy by paying premiums until at least age 65.
D) The company cannot cancel the policy after the insured becomes eligible for Medicare.

The correct answer was – C

Assured Insurance Company发布了一项描述为不可取消的健康保险。这意味着：

- A) 公司无法以任何理由取消该保单。
B) 被保险人有权无限期续订保单，但保险公司可以更改保单条款。
C) 被保险人可以通过支付保险费至少年满65岁来继续保险。
D) 被保险人有资格获得Medicare后，公司不能取消保单。

正确的答案是 - C.

Explanation:

A policy that is non-cancellable or guaranteed renewable gives the insured the right to continue it in force by the timely payment of premiums at least until age 65 or until the insured becomes eligible for Medicare. The insurer cannot unilaterally change any provision while the policy is in force.

不可撤销或保证可续约的保单使被保险人有权通过及时支付保险费至少直到65岁或直到被保险人有资格获得Medicare来继续保险。在保单生效期间，保险公

司不能单方面改变任何条款。

Reference: 18.5.5.4 in the License Exam Manual.

Question 113 - #201677

Which of the following types of health insurance policies prevents the insurer from changing the premium rate or modifying the coverage in any way?

A) Guaranteed renewable. B) Non-cancelable. C) Cancelable. D) Optionally renewable.

The correct answer was - B

以下哪种健康保险政策会阻止保险公司以任何方式更改保险费率或修改保险范围？

A) 保证可续约。 B) 不可取消。 C) 可取消。 D) 可选择续约。

正确答案是 - B

Explanation:

Non-cancelable health insurance policies prevent the insurer from changing the premium rate or modifying the coverage in any way.

不可取消的健康保险政策会阻止保险公司以任何方式更改保险费率或修改保险范围。

Reference: 18.5.5.4 in the License Exam Manual.

Question 70 - #201670

Which renewability provision allows an insurer to not renew a health insurance policy on a given date as specified in the policy?

A) Optionally renewable.
B) guaranteed renewable.
C) Conditionally renewable.
D) Cancellable.

The correct answer was - A

哪种可续约性条款允许保险公司不在保单中指定的特定日期续签健康保险？

A) 可选择续约。
B) 保证可续约。
C) 有条件的可续约。
D) 可取消。

正确答案是 - A.

Explanation:

The renewability provision in an optionally renewable policy gives the insurer the option to terminate the policy on the date specified in the contract. The date specified is typically the policy anniversary date or the premium due date.

可续约保单是一个可选的选项，条款使保险公司可以选择在合同中指定的日期终止保单。指定的日期通常是保单周年日或保费到期日。

Reference: 18.5.5.2 in the License Exam Manual.

Question 114 - #201672

Which of the following statements characterizes a cancelable policy?

- A) The insurer may cancel the policy only at the end of the term.
- B) The insurer may cancel the policy at any time.
- C) The insurer may not cancel the policy because of the insured's age.
- D) The insurer may not cancel the policy because of the insured's retirement.

The correct answer was - B

以下哪项陈述是可取消保单的特征？

- A) 保险公司可以仅在期限结束时取消保单。
- B) 保险公司可以随时取消保单。
- C) 由于被保险人的年龄，保险公司不得取消保单。
- D) 由于被保险人退休，保险人不得取消保单。

正确答案是 - B

Explanation:

An insurer may cancel a cancelable policy at any time and for any reason.

Clearly, this type of policy is most advantageous to the insurer, not the insured.

保险公司可以随时以任何理由取消可取消的保单。显然，这种政策对保险公司最有利，而不是被保险人。

Reference: 18.5.5.2 in the License Exam Manual.

Question 3 - #201674

Which kind of health insurance policy ensures renewability up to a specific age of the insured, although the insurer reserves the right to change the premium rate on a class basis?

- A) Cancelable.
- B) Optionally renewable.
- C) Non-cancelable.
- D) guaranteed renewable.

The correct answer was – D

尽管保险公司保留在等级基础上更改保费率的权利，但哪种健康保险政策可以确保被保险人续保到特定年龄？

- A) 可取消。
- B) 可选择续约。
- C) 不可取消。
- D) 保证可续约。

正确的答案是 - D.

Explanation:

Guaranteed renewable health insurance policies ensure renewability up to a specific age of the insured, although the insurer reserves the right to change the premium rate on a class basis.

尽管保险公司保留在等级基础上更改保险费率的保证,但保证可续约健康保险政策可确保受保人在特定年龄的可续约性。

Reference: 18.5.5.3 in the License Exam Manual.

Question 28 - #201675

What accident and health insurance renewability clause means the insurer cannot unilaterally change any provision while the policy is in force but can change premium rates by class?

- A) Transitional.
- B) Non-cancellable.
- C) guaranteed renewable.
- D) Provisional.

The correct answer was – C

什么事故和健康保险可续签条款意味着保险公司在保单生效期间不能单方面改变任何条款,但可以按类改变保险费率?

- A) 过渡时期。
- B) 不可取消。
- C) 保证可续约。
- D) 临时的。

正确的答案是 - C.

Explanation:

An insurer cannot unilaterally change a guaranteed renewable accident and health insurance policy while the policy is in force. Nevertheless, it can change premium rates by class.

在保单生效期间,保险公司不能单方面改变有保障的可续约事故和健康保险政策。不过,它可以按类别更改保费率。

Reference: 18.5.5.3 in the License Exam Manual.

Question 108 - #201676

Which accident and health insurance renewability clause means the insurer cannot unilaterally change any provision while the policy is in force but can change premium rates by classes?

- A) Transitional. B) Non-cancellable. C) Provisional. D) Guaranteed renewable.

The correct answer was – D

哪种意外和健康保险可续签条款意味着保险公司在保单生效期间不能单方面改变任何条款，但可以按类别更改保险费率？

A) 过渡时期。 B) 不可取消。 C) 临时的。 D) 保证可续约。

正确的答案是 - D.

Explanation:

A guaranteed renewable health insurance policy cannot be changed unilaterally by the insurer. Nevertheless, the insurer can change premium rates for the policy by class.

保险公司不能单方面改变有保障的可再生健康保险政策。然而，保险公司可以按类别更改保单的保费率。

Reference: 18.5.5.3 in the License Exam Manual.

Question 119 - #201673

Applicants for which of the following types of policies normally would require the MOST comprehensive underwriting?

- A) Guaranteed renewable disability income insurance.
- B) Basic medical expense insurance.
- C) Industrial health insurance.
- D) Limited accident insurance.

The correct answer was – A

申请人通常会要求最全面承保哪些类型的政策？

- A) 保证可续约残疾收入保险。
- B) 基本医疗费用保险。
- C) 工业健康保险。
- D) 有限的意外保险。

正确答案是 - A.

Explanation:

Applicants for non-cancelable and guaranteed renewable disability income insurance would require the most comprehensive underwriting because they allow an insured's guaranteed renewal of the policy up to a certain age, without evidence of insurability.

不可取消和有保障的可续约伤残性收入保险的申请人需要最全面的承保，因为他们允许被保险人保证在一定年龄内续约保单，而没有可保险性的证据。

Reference: 18.5.5.3 in the License Exam Manual.

Question 34 - #201668

With an optionally renewable policy, the insurance company reserves the right to:

- A) Modify the coverage if claims filed by the insured exceed an amount specified in the policy.
- B) Increase the premium on a policy if benefits paid to an insured exceed a stated amount.
- C) Terminate coverage at any policy anniversary date or premium due date.
- D) Cancel the policy anytime with 5 days' notice.

The correct answer was – C

根据可选的可续约政策，保险公司保留以下权利：

- A) 如果被保险人提出的索赔超过保单中规定的金额，则修改保险范围。
- B) 如果支付给被保险人的福利超过规定金额，则增加保险费。
- C) 在任何保单周年日或保费到期日终止保险。
- D) 随时提前5天取消保单。

正确的答案是 - C.

Explanation:

With an optionally renewable policy, the company reserves the right to terminate coverage at any policy anniversary date or premium due date but may not exercise this right between such dates.

根据可选的可续约保单，公司保留在任何保单周年日或保费到期日终止承保的权利，但在此类日期之间可能不会行使此权利。

Reference: 18.5.5.1 in the License Exam Manual.

Question 36 - #201669

Beth's health insurance policy contains a provision that allows her to renew coverage up to age 65. However, the policy also states that should Beth lose her job, the insurance company will cancel the policy, regardless of Beth's age. In terms of renewability, what type of policy does Beth have?

- A) Guaranteed renewable.
- B) Conditionally renewable.
- C) Cancellable.
- D) Optionally renewable.

The correct answer was – B

Beth的健康保险政策包含一项条款，允许她续约保险至65岁。但是，该政策还规定，如果Beth失去工作，保险公司将取消保单，无论Beth的年龄。在可续约性方面，Beth个保单？

- A) 保证可续约。
- B) 有条件的可续约。
- C) 可取消。
- D) 可选择续约。

正确答案是 - B

Explanation:

A conditionally renewable policy allows an insurer to terminate the coverage, but only in the event of one or more conditions stated in the contract. These conditions cannot apply to the insured's health. Most frequently, they are related to the insured reaching a certain age or losing gainful employment.

有条件的可续约保险允许保险公司终止保险,但仅限于合同中规定的一个或多个条件。这些条件不适用于被保险人的健康状况。最常见的是,他们与被保险人达到一定年龄或失去有酬职业有关。

Reference: 18.5.5.1 in the License Exam Manual.

Question 110 - #201671

Which of the following statements regarding a conditionally renewable policy is NOT correct?

- A) The insurer may refuse to renew the contract as the result of the insured's deteriorating health.
- B) The insurer may refuse to renew the contract as the result of the insured's retirement.
- C) The insured has the conditional right to renew the policy up to a given date.
- D) The insured has the conditional right to renew the policy up to a given age.

The correct answer was – A

关于有条件可续约保险,以下哪项陈述不正确?

- A) 由于被保险人的健康状况恶化,保险公司可以拒绝续签合同。
- B) 保险人退休后,保险人可以拒绝续签合同。
- C) 被保险人有条件权利将保单续约到指定日期。
- D) 被保险人有条件权利将保单续约到特定年龄。

正确答案是 - A.

Explanation:

Although an insurer may refuse to renew the policy as the result of specific circumstances (such as the insured's retirement), it may not refuse renewal as the result of the insured's deteriorating health.

虽然保险公司可能因特定情况(例如被保险人退休)而拒绝续保,但由于被保险人的健康状况恶化,保险公司可能不会拒绝续保。

Reference: 18.5.5.1 in the License Exam Manual.

Question 44 - #201667

If an individual health policy is renewable until the insured reaches age 65, when would the policy actually terminate?

- A) The first policy anniversary date which occurs on or before the insured's 65th birthday.
- B) The first policy anniversary date which occurs on or after the insured's 65th birthday.
- C) December 31 of the year in which the insured turns 65 years old.
- D) The day of the insured's 65th birthday.

The correct answer was – B

如果个人健康政策可以续约，直到被保险人年满65岁，保单何时才会终止？

- A) 在被保险人65岁生日或之前发生的第一个保单周年日。
- B) 在被保险人65岁生日当天或之后发生的第一个保单周年日。
- C) 被保险人年满65岁的12月31日。
- D) 被保险人65岁生日那天。

Explanation:

Policy terms are defined in terms of anniversaries, meaning the date of policy issue. If a policy defines its expiration date as the date the insured turns 65 years old, coverage would cease the first policy anniversary that occurs on or after the person's 65th birthday.

保单术语以周年纪念日定义，即保单发布日期。如果保单将其到期日定义为被保险人年满65岁的日期，保险范围将在该人65岁生日或之后停止发生的第一个保单周年。

Reference: 18.5.5 in the License Exam Manual.

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