

199	California LTC 2004 Exam	8 Hours	Instructions
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## CALIFORNIA LONG TERM CARE – CTQ 2004

1. A chronically ill individual is defined as someone unable to perform at least two activities of daily living for a period of at least \_\_\_\_\_.
  - A. One year
  - B. 90 Days
  - C. One Month
  - D. 63 Days
2. Medical necessity means that a doctor or other independent source has certified that an insured's medical condition will \_\_\_\_\_ if he does not receive nursing home or home care.
  - A. Level off
  - B. Improve
  - C. Deteriorate
  - D. Turn around
3. Indemnity style LTC policies cover \_\_\_\_\_ versus reimbursement plans which repay actual costs up to a predetermined maximum.
  - A. A per diem cost of care
  - B. Unlimited claims
  - C. The exact amount of the claim
  - D. "Pool of money" benefits
4. The purpose of the long term care personal worksheet is to gather sufficient information to determine if the client has \_\_\_\_\_.
  - A. A family support network
  - B. A rich uncle
  - C. Sufficient income and assets to afford LTC
  - D. Other monies to invest
5. Impairment of cognitive ability means deterioration or loss of intellectual capacity due to \_\_\_\_\_.
  - A. An accident
  - B. Chronic illness
  - C. Organic mental disease
  - D. Genetic orientation
6. Rate stability and client suitability standards go hand in hand because knowing an LTC plan is right for a consumer is knowing he can \_\_\_\_\_.
  - A. Understand them
  - B. Appreciate them
  - C. Use them
  - D. Afford them today and in the future.
7. Medicare's Prospective Payment System bases hospital payments on the patient's \_\_\_\_\_ at the time of admission.
  - A. Diagnosis
  - B. Condition
  - C. Age
  - D. Ability to pay
8. The long term care continuum is defined as the ever-expanding \_\_\_\_\_ needed by the LTC market.
  - A. Range of Services
  - B. Medical direction
  - C. Financial alternatives
  - D. Legislative help
9. Adult day care emphasizes \_\_\_\_\_ to retain an enhance independence.
  - A. Physical therapy
  - B. Low cost
  - C. Achievement and continued effort
  - D. Mental activities
10. Medical necessity for benefit eligibility is \_\_\_\_\_ for tax qualified LTC contracts
  - A. The basis
  - B. Not permitted
  - C. Encouraged
  - D. Somewhat discouraged
11. Unnecessary replacement of a consumers LTC policy is presumed by the California Code when any third or greater policy is sold to a policyholder in any \_\_\_\_\_ period.
  - A. 60 Day
  - B. 12 Month
  - C. 2 Year
  - D. 9 Month
12. Case management is provided by a third party to \_\_\_\_\_ an insured's care and report regularly on the effectiveness of the care provided.
  - A. Improve
  - B. Manage
  - C. Underwrite
  - D. Supplement
13. Inflation protection as an option must be offered to California LTC applicants with increases compounded annually at the rate of not less than \_\_\_\_\_.
  - A. 10%
  - B. 8%
  - C. 6%
  - D. 5%
14. Which of the following are examples of a *material change* that could void the pre-1997 tax qualified status of a policy?
  - A. The timing of benefits
  - B. A substitution of the insured
  - C. Change in eligibility in a group contract
  - D. All of the above

## CALIFORNIA LONG TERM CARE – CTQ 2004

15. Increased coverage for an extra premium is an option that California LTC policies must offer the insured no less frequently than \_\_\_\_\_ after the policy is issued.
- Each anniversary date
  - Quarterly
  - Every six months
  - Twice in 5 years
16. Impairment in activities of daily living means the insured needs \_\_\_\_\_ either in the form of hands on assistance or standby assistance.
- Help
  - Assistance
  - Substantial assistance
  - Medical attention
17. Family caregivers are considered to be \_\_\_\_\_ of the long term care system in the United States.
- A small part
  - The backbone
  - A growing segment
  - A somewhat popular element
18. Aggressive Medigap plans can extend coverage to "at-home recovery" and assistance with ADLs, but once the health progress stops the condition is termed \_\_\_\_\_ and no longer covered.
- Chronic
  - Skilled
  - Inoperable
  - Unworkable
19. Medi-Cal eligibility is based on an individual being \_\_\_\_\_ and being unable to pay for health care services.
- Reasonably healthy
  - Chronically ill
  - In financial need
  - Responsible for his own care
20. Acute care is given to a patient to \_\_\_\_\_. Once progress stops, however, care is termed chronic.
- Get better
  - Save his live
  - Stabilize his condition
  - Save time
21. Hands on assistance means the need for \_\_\_\_\_ from another person without which, the individual would be unable to perform the ADL.
- Indirect help
  - Standby help
  - Physical assistance
  - Medical attention
22. An Outline of Coverage must be provided a prospective application for LTC \_\_\_\_\_.
- In duplicate
  - At the time of initial solicitation
  - When the policy is issued
  - Within 30 days of purchasing
23. Preexisting conditions disclosed on an application must be covered no later than \_\_\_\_\_ following the effective date of coverage subject to the insured's established underwriting standards.
- Three months
  - Six months
  - Nine months
  - One year
24. Reimbursement LTC plans repay the insured for the \_\_\_\_\_ up to a predetermined maximum. Rates for these plans tend to be lower than indemnity plans.
- Actual cost of care
  - Per diem rate of care
  - Co-pay portion of care
  - Skilled care portion of care
25. Assisted living benefits must be provided in LTC policies at no less than \_\_\_\_\_ of the maximum benefit for institutional care.
- Half
  - 25%
  - One-third
  - 70%
26. Medical necessity is a common trigger of LTC benefits for \_\_\_\_\_.
- Non-tax qualified plans
  - Tax qualified plans
  - Both non-tax and tax qualified plans
  - Neither tax or non-tax qualified plans
27. Converted policy premiums must be calculated (based) on \_\_\_\_\_.
- The insured's age at the time of certificate issue
  - Attained age
  - A 30-day month
  - Gross premiums, less tax
28. Which of the following are *benefit triggers* of eligibility for non-tax qualified policies:
- Impairment of two of seven ADLs
  - Impairment of cognitive ability
  - Medical necessity
  - Any of the above
29. Accelerated death or living benefits policies \_\_\_\_\_ long term care insurance.
- Can be marketed as
  - Should not be sold as
  - Are considered to be the same as
  - Pay the same benefits as

## CALIFORNIA LONG TERM CARE – CTQ 2004

30. Knowing the local HICAP name, address and phone number is a responsibility of California \_\_\_\_\_.
- A. Insurance companies
  - B. Agents
  - C. Insureds
  - D. Consumers
31. Medi-Cal estate recovery laws require California to recover from \_\_\_\_\_ to help pay covered expenses
- A. Insurance companies
  - B. Insurance agents
  - C. Medi-Cal recipients
  - D. The Medi-Cal Trust Fund
32. The evolution of long term care services might see a patient's condition go from acute to \_\_\_\_\_.
- A. Skilled
  - B. Chronic
  - C. Emergent
  - D. Diagnostic
33. Standby assistance means the presence of another person \_\_\_\_\_ is necessary to prevent injury to the individual while he is performing an ADL
- A. Within arm's reach
  - B. Nearby
  - C. In the same room
  - D. In the building
34. Specimen policies are important for agents to obtain because \_\_\_\_\_ products, policies and definitions.
- A. We see an increase in
  - B. There is a rapid evolution of
  - C. Insurers want agents to know their
  - D. The authorities want agents to know about
35. The daily benefit for *caregiver training* (informal care) is \_\_\_\_\_.
- A. Not covered by any insurer
  - B. Typically 1/2 the home care benefit per diem
  - C. Equal to home care benefit amounts
  - D. About 20% less than skilled care benefits

---END EXAM---



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