

Health, Life, and Disability Plans

AIA Trust Self-Assessment Test - VIII

Print out this page and fax back to The AIA Trust at (202) 626-7421.

DO THIS TEST-EARN LUS

The AIA Trust presents the latest in a series of instructional needs assessments to evaluate your lifelong learning. The Trust is pleased to provide members with these opportunities to earn AIA/CES learning units. Circle your answers to the following 20 questions; return the test by fax to The AIA Trust, (202) 626-7421; and earn one LU.

You don't have to have all the right answers to get credit. After all, the learning objectives of this exercise are:

- To learn what you don't know about the subject, in this case Health Insurance
- To use your corrected test and the follow-up materials and resources you will receive to increase your knowledge
- To identify areas for more extensive study.

When you fax the completed test to the Trust, it will be scored and your results will be returned to you along with annotated answers and related references. After you have read the material, the AIA Trust will report your learning unit to the University of Oklahoma. Keeping this information in your files will assist you in planning your future continuing education schedule.

T F	1. Coinsurance is the portion of your medical claim that is paid by health and dental insurance plans.
T F	2. An out-of-pocket maximum in a health plan is the total dollar amount paid by an insured out of his/her own pocket no matter how large the medical claim may reach.
T F	3. If my treatment was prescribed by my doctor, it will be covered by my health insurance.
T	4. My doctor always charges more than the Usual, Customary & Reasonable (UCR)

F	charges, and I end up owing a balance. When I called the insurance company they told me that they set their UCR at the eightieth percentile. This means that they are only paying 80% of the bill.
T F	5. A self insured medical plan is always cheaper than an insured plan.
T F	6. I have only 15 full time employees whose health insurance I pay. As long as I have fewer than 20 employees, I do not have to offer COBRA coverage to employees who terminate.
T F	7. A Section 125 plan allows employees to pay for their health insurance premiums and certain unreimbursed medical and dependent care expenses on a pre-tax basis.
T F	8. My wife and I both have family coverage for ourselves and our three children. Because her birthday is in April and mine is in June, her coverage is primary for herself and the children. My plan is secondary and will pay balances after her plan reimburses us for claims.
T F	9. Managed care plans like health maintenance organizations (HMOs) and preferred provider organizations (PPOs) are cheaper because they do not cover the same medical services that a traditional non-managed care plan does.
T F	10. Generic drugs are inferior to brand name drugs. That is why they are cheaper.
T F	11. I broke my tooth falling down a flight of stairs. My dentist said that my treatment should be covered by my health insurance plan.
T F	12. I woke up on Saturday morning feeling achy and running a fever. My health insurance plan will cover me if I go to the emergency room.
T F	13. On March 1, 1997 I will be changing jobs. I have been covered by my current employer's health benefit plan for two years. My new employer's plan limits coverage for pre-existing conditions for the first twelve months. Due to the passage of the Health Insurance Portability and Accountability Act (HIPAA), I will not be

	subject to the new plan's pre-existing condition limitation.
T F	14. If I am terminally ill, I can receive a portion of my life insurance benefits before I die tax-free.
T F	15. I pay the full cost of employee life insurance benefits equal to two times their annual pay. This benefit is not included as taxable income to my employees.
T F	16. When disabled, I do not have to pay my life insurance premiums even though my coverage remains in force until I return to work, under the Americans with Disability Act.
T F	17. Long-term care insurance is a waste of money for me because I am already covered by health insurance.
T F	18. My employer provides me with a long-term disability plan for which I pay half the cost. If I become disabled, the benefits paid to me under this policy are tax-free.
T F	19. I do not need long-term disability coverage to replace my salary, if I become disabled, because I will qualify for disability benefits under Social Security.
T F	20. Once I qualify for long-term disability benefits, I will always be considered disabled and will be unable to purchase additional coverage should my salary increase in the future.

Name

Membership Number

Firm Name

Address

City State Zip

Phone/Fax