

# AIA Trust Self-Assessment Test XXII

## The Health Insurance Maze

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

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### DO THIS TEST-EARN LUS

In architecture firms, as with most businesses in the 1990s, health insurance is second only to salaries as the largest monthly payroll expense. For individuals, the price tag is often higher than it is for those covered by employer plans, and coverage is more difficult to obtain even if one can afford the premiums. After all, health care coverage insures any firm's most important asset: its talented people. This is true for sole practitioners and 150-person offices alike.

The AIA Trust presents the latest in a series of instructional needs assessments to evaluate your lifelong learning. The Trust provides AIA members with these opportunities to earn AIA Continuing Education System learning units (LUs) with the intention of helping you know what you don't know (and maybe thought you did). Circle your answers to the following 10 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, but you do have to use the follow-up materials.

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 this material, the Trust will report your LU to the University of Oklahoma. (Keeping this information in your files will help you plan your future continuing education schedule.)

<b>T</b> <b>F</b>	1. The Health Insurance Portability & Accountability Act of 1996 (HIPAA) is the federal law that created a tax-favored medical insurance option called Health Savings Accounts (HSAs) for individuals and small businesses.
<b>T</b> <b>F</b>	2. Most individuals now have access to health insurance without a need to satisfy preexisting-condition exclusions.
<b>T</b> <b>F</b>	3. In an HMO or other managed-care programs there are insurance regulations requiring the managed-care program to provide some level of benefit outside the hospital/physician network.

<b>T</b> <b>F</b>	4. If an individual who has been covered by his or her former employer's health insurance program changes employment and enrolls in the new employer's health insurance program, the individual will be given credit for any portion of the preexisting condition satisfied under the prior employer's health insurance program.
<b>T</b> <b>F</b>	5. COBRA is a federal law that provides insured dependents of small employers (with fewer than 20 employees) the right to continue their coverage in an employer sponsored health insurance program after they become ineligible for the program.
<b>T</b> <b>F</b>	6. In most situations where a full-time employee is eligible for Medicare but is also covered by the employer's health-insurance program, Medicare will pay eligible benefits after the employer program pays the primary benefits.
<b>T</b> <b>F</b>	7. In the situation where an insured employee adopts a child or has a foster child placed in his or her home, most group insurance programs will not cover the child until after the insurance company is satisfied that the child is healthy.
<b>T</b> <b>F</b>	8. AIA members insured as individuals or sole proprietors are now allowed to deduct a portion of their health-insurance premiums from their taxable income.
<b>T</b> <b>F</b>	9. Partners in a firm can deduct all of the medical insurance provided to them through the firm's medical insurance program.
<b>T</b> <b>F</b>	10. A medical insurance claim should be filed within one year of the date in which the medical care was provided to be eligible for reimbursement under the medical insurance plan or the claim will be denied by the company.

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Name

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Membership Number

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Firm Name

Address

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City/State/Zip

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Phone

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Fax

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