

2026 George Access Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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SAMPLE

Questions

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- 1. Which of the following experiences does not qualify an individual for a Special Enrollment Period (SEP)?**
 - A. Change in Primary Care Physician**
 - B. Loss of other coverage**
 - C. Birth of a child**
 - D. Marriage**
- 2. What is the primary purpose of the 2026 George Access Practice Test?**
 - A. To evaluate students' understanding and readiness for the George Access program**
 - B. To measure students' physical fitness levels**
 - C. To determine students' career readiness**
 - D. To assess students' artistic abilities**
- 3. Which option allows employees to select from all SHOP plans available at a single metal level tier?**
 - A. Select a single SHOP plan for all employees**
 - B. Enroll in all available SHOP plans**
 - C. Select any plan from a single SHOP insurance company**
 - D. Enroll in any SHOP plan across all metal tiers**
- 4. In what ways are small employers not permitted to enroll in SHOP plans?**
 - A. Through the Georgia Access Consumer Portal**
 - B. Through HealthCare.gov**
 - C. Only through approved brokers**
 - D. Directly through state agencies**
- 5. Which government program is designed specifically for children from working families with incomes above Medicaid limits?**
 - A. Medicaid**
 - B. PeachCare for Kids®**
 - C. CHIP**
 - D. Medicare**

- 6. What is the significance of using transitional phrases in writing?**
- A. They confuse the reader**
 - B. They aid in maintaining the flow of ideas**
 - C. They are unnecessary embellishments**
 - D. They limit the complexity of the text**
- 7. What is the term for the unauthorized acquisition or disclosure of PHI?**
- A. Access**
 - B. Violation**
 - C. Breach**
 - D. Misuse**
- 8. What circumstance qualifies as a major hardship for exemptions?**
- A. Long-term unemployment**
 - B. Fire, flood, or other disaster**
 - C. Medical expenses exceeding income**
 - D. All of the above**
- 9. Which of the following is certified by Georgia Access to meet the Essential Health Benefits under the Affordable Care Act (ACA)?**
- A. Short-term health insurance plans**
 - B. Qualified Health Plans (QHPs)**
 - C. Medicare Advantage plans**
 - D. Employer-sponsored insurance plans**
- 10. How might a business benefit from accurately counting FTEs?**
- A. Identifying high turnover jobs**
 - B. Improving work-life balance for employees**
 - C. Gaining eligibility for tax incentives**
 - D. Reducing operational expenses**

Answers

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1. A
2. A
3. B
4. C
5. B
6. B
7. C
8. D
9. B
10. C

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Explanations

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1. Which of the following experiences does not qualify an individual for a Special Enrollment Period (SEP)?

A. Change in Primary Care Physician

B. Loss of other coverage

C. Birth of a child

D. Marriage

A change in a primary care physician does not qualify an individual for a Special Enrollment Period (SEP) because SEPs are specifically designed to allow individuals to enroll in or change their health insurance plans in response to significant life events that affect their insurance coverage or needs. Eligible qualifying events usually involve changes that impact one's health insurance status, such as losing existing coverage, getting married, or welcoming a new child into the family. These events often necessitate changes in health plans due to new responsibilities, eligibility issues, or changes in family size. In contrast, a change of primary care physician does not affect the underlying health insurance policy or the individual's eligibility for coverage, as it is merely a shift in which healthcare provider the insured chooses to see for medical services.

2. What is the primary purpose of the 2026 George Access Practice Test?

A. To evaluate students' understanding and readiness for the George Access program

B. To measure students' physical fitness levels

C. To determine students' career readiness

D. To assess students' artistic abilities

The primary purpose of the 2026 George Access Practice Test is to evaluate students' understanding and readiness for the George Access program. This test is designed to gauge how well students grasp the relevant material and whether they possess the necessary skills and knowledge to succeed in the program. It helps identify areas where a student may need improvement, ensuring they are adequately prepared for the challenges ahead. In contrast, the other options focus on different aspects that are not the primary aim of this specific test. For example, measuring physical fitness levels is unrelated to academic assessments, and determining career readiness involves evaluating skills and aptitudes that extend beyond the scope of access preparedness. Additionally, assessing artistic abilities pertains to a different domain of talent evaluation and does not align with the academic focus of the George Access program.

3. Which option allows employees to select from all SHOP plans available at a single metal level tier?

A. Select a single SHOP plan for all employees

B. Enroll in all available SHOP plans

C. Select any plan from a single SHOP insurance company

D. Enroll in any SHOP plan across all metal tiers

The correct choice enables employees to choose from a complete range of SHOP plans at a specified metal level tier, providing maximum flexibility and choice. This means that if an employer chooses to offer a single metal tier, employees can explore and select any available plan within that tier. This option encourages healthier benefits decisions, as employees have the freedom to select plans that best meet their individual healthcare needs and preferences while remaining consistent with the employer's stipulated metal level. In contrast, other choices limit employees' options either by requiring them to accept a single plan for all or by restricting them to options offered by only one insurance company, thus reducing their ability to tailor their healthcare choices to their personal circumstances. Additionally, the option that suggests enrolling in plans across all metal tiers would not align with the intended focus on a single tier, making it less relevant to the question.

4. In what ways are small employers not permitted to enroll in SHOP plans?

A. Through the Georgia Access Consumer Portal

B. Through HealthCare.gov

C. Only through approved brokers

D. Directly through state agencies

Small employers are specifically restricted from enrolling in SHOP plans, or Small Business Health Options Program plans, directly through brokers which have been approved. This stipulation is designed to ensure that small businesses have access to appropriate guidance and support in selecting health insurance options that best fit their needs and comply with regulatory requirements. Brokers play a critical role in helping small employers understand their choices, the plan structure, and the financial implications of the various options available. By requiring that enrollment is only conducted through approved brokers, the intent is to promote compliance with the health insurance marketplace's standards and provide an informed decision process for the small employers. The other methods mentioned — like enrolling through the Georgia Access Consumer Portal, HealthCare.gov, or directly through state agencies — highlight alternative pathways that are typically allowed for various types of enrollments, but they would not apply in the context of small employer participation in SHOP plans.

5. Which government program is designed specifically for children from working families with incomes above Medicaid limits?

A. Medicaid

B. PeachCare for Kids®

C. CHIP

D. Medicare

PeachCare for Kids® is a program specifically designed to provide health insurance to children from working families whose incomes exceed the limits set for Medicaid eligibility. This program serves to bridge the gap for families who are moderately low-income and cannot afford insurance but earn too much to qualify for Medicaid. It offers comprehensive health coverage including routine check-ups, immunizations, and emergency services for those children. While CHIP (Children's Health Insurance Program) also targets children in families with incomes too high to qualify for Medicaid but too low to afford private coverage, PeachCare for Kids® is the specific designation used in Georgia for this service. Therefore, it is the correct answer in this context. Other options such as Medicaid provide broader coverage and Medicare is primarily for those over 65 or with certain disabilities, making them unsuitable answers for this question.

6. What is the significance of using transitional phrases in writing?

A. They confuse the reader

B. They aid in maintaining the flow of ideas

C. They are unnecessary embellishments

D. They limit the complexity of the text

Using transitional phrases in writing is crucial for several reasons. They serve as bridges between ideas, allowing the reader to easily follow the writer's line of thought. This leads to a more coherent and organized piece of writing, enhancing overall readability. Transitional phrases help indicate relationships between different sections or points, such as comparisons, contrasts, or causes and effects, which facilitates a smoother progression of ideas. The seamless flow created by these phrases ensures that the reader can navigate through the text without becoming lost or confused, thereby improving comprehension and engagement with the material. This function makes transitions a vital component of effective communication in writing.

7. What is the term for the unauthorized acquisition or disclosure of PHI?

- A. Access**
- B. Violation**
- C. Breach**
- D. Misuse**

The term for the unauthorized acquisition or disclosure of Protected Health Information (PHI) is a breach. In the context of healthcare and HIPAA (Health Insurance Portability and Accountability Act), a breach refers to any access or disclosure of PHI that is not permitted under the privacy rules, which can lead to a risk of compromising the privacy and security of that information. Breach is a critical concept because it has specific implications for entities handling PHI, including notification obligations to affected individuals and potentially regulatory scrutiny. Understanding that a breach indicates not just an unauthorized acquisition, but also a serious failure to protect sensitive health information emphasizes the importance of robust data safeguarding practices in healthcare settings.

8. What circumstance qualifies as a major hardship for exemptions?

- A. Long-term unemployment**
- B. Fire, flood, or other disaster**
- C. Medical expenses exceeding income**
- D. All of the above**

A major hardship can encompass various significant financial or personal challenges that make it difficult for individuals to meet their obligations. Long-term unemployment is a substantial hardship as it directly affects a person's ability to earn income and maintain financial stability. It can lead to an inability to pay bills and meet financial obligations, which is a qualifying circumstance for exemptions. Additionally, experiences such as fire, flood, or other disasters are extreme situations that cause irreparable damage to an individual's home or belongings, often leading to overwhelming expenses and emotional distress. These disasters disrupt lives and create significant financial burdens, qualifying as major hardships. Medical expenses exceeding income represent another critical scenario. When healthcare costs rise dramatically beyond what an individual can afford to pay, it can lead to insurmountable debt and financial distress. This situation is particularly impactful as it affects overall well-being while limiting financial resources. Since each of these circumstances presents a profound impact on an individual's life, they collectively qualify as major hardships for exemptions, making the inclusive choice the correct response.

9. Which of the following is certified by Georgia Access to meet the Essential Health Benefits under the Affordable Care Act (ACA)?

A. Short-term health insurance plans

B. Qualified Health Plans (QHPs)

C. Medicare Advantage plans

D. Employer-sponsored insurance plans

Qualified Health Plans (QHPs) are certified by Georgia Access to meet the Essential Health Benefits outlined in the Affordable Care Act (ACA). QHPs are designed to provide comprehensive coverage that includes key health benefits such as hospitalization, prescription drugs, maternity care, mental health services, and preventive care, among others. These plans are made available through the Health Insurance Marketplace and must adhere to specific standards set by the ACA to ensure that they provide sufficient coverage to meet the health care needs of individuals. In contrast, short-term health insurance plans are generally not designed to cover the comprehensive set of benefits required by the ACA, and they often include significant limitations and exclusions. Medicare Advantage plans cater specifically to Medicare beneficiaries and, although they provide essential services, they are not classified as QHPs. Employer-sponsored insurance plans vary widely in coverage and may or may not meet the ACA's essential benefits requirements, depending on the plan design. Therefore, QHPs stand out as the certified option that guarantees compliance with the ACA's essential health benefits framework.

10. How might a business benefit from accurately counting FTEs?

A. Identifying high turnover jobs

B. Improving work-life balance for employees

C. Gaining eligibility for tax incentives

D. Reducing operational expenses

Accurately counting Full-Time Equivalents (FTEs) can indeed position a business to gain eligibility for tax incentives. Many tax incentives are tied to employment levels, workforce size, and the associated costs of hiring and retaining employees. By maintaining precise FTE counts, a business can better understand its workforce dynamics and ensure it remains compliant with regulations linked to tax credits or deductions that may be based on employee metrics. For example, certain government programs provide tax breaks or credits to businesses that meet specific employment thresholds or invest in workforce development. If FTE counts are underreported or inaccurately calculated, a business might miss out on these financial benefits. Thus, having accurate FTE figures allows businesses to leverage available incentives effectively, ultimately enhancing their financial position. This precision in counting also supports strategic planning, workforce management, and can influence decisions that lead to better resource allocation and operational efficiency, reinforcing the overall value of maintaining accurate employment data.