

PY 2026 Pennie Individual Marketplace Training for New Agents and Brokers Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

- 1. When a customer becomes eligible for Medicare, what happens to their Pennie policy?**
 - A. It stays active for a month**
 - B. It is terminated a day before Medicare begins**
 - C. It automatically converts to Medicare**
 - D. Only changes if requested**
- 2. What should you attempt to do when assisting households with mixed immigration statuses?**
 - A. Help all the customers of the household**
 - B. Provide resources in different formats, preferably in their preferred language**
 - C. Only ask questions and collect information for eligible Pennie applicants seeking coverage**
 - D. All of the above**
- 3. What types of financial assistance are available through Pennie?**
 - A. Loan options and grants**
 - B. Premium tax credits and cost-sharing reductions**
 - C. Only tax deductions**
 - D. Scholarships for health coverage**
- 4. What is the benefit of a secure, encrypted password manager?**
 - A. It helps keep track of social media passwords**
 - B. It provides random password generation**
 - C. It securely stores and encrypts your passwords**
 - D. It allows you to share passwords easily**
- 5. What is the main purpose of the cost-sharing reduction (CSR) program?**
 - A. To increase the consumer's out-of-pocket costs**
 - B. To provide free health insurance for everyone**
 - C. To decrease the amount consumers pay for deductibles, copayments, and coinsurance**
 - D. To offer tax deductions for health insurance premiums**

- 6. If a customer receives a bill from an out-of-network provider, where should they file their appeal?**
- A. With Pennie**
 - B. With their broker or assister**
 - C. With the insurer**
 - D. With the state healthcare office**
- 7. What is the primary purpose of the Pennie Individual Marketplace?**
- A. To provide a platform for individuals to enroll in health insurance plans under the Affordable Care Act**
 - B. To regulate healthcare providers and insurance companies**
 - C. To offer educational resources about health insurance**
 - D. To promote healthy living and wellness programs**
- 8. Who can provide guidance to individuals that are unsure about their coverage options in Pennie?**
- A. Only family members who are experienced**
 - B. Licensed agents and navigators**
 - C. Unlicensed individuals familiar with healthcare**
 - D. Only state government employees**
- 9. What is the purpose of the premium tax credits in the Pennie marketplace?**
- A. To provide free health insurance**
 - B. To reduce the cost of premiums for eligible individuals and families**
 - C. To encourage purchasing a specific plan**
 - D. To cover all healthcare expenses**
- 10. If you are changing agencies as an Agent, what action should you take?**
- A. Create another agent account**
 - B. Ask the Agency Manager of the new Agency to initiate a new Agent account**
 - C. Request your former agency manager to transfer your account**
 - D. Complete a broker and book of business transfer request form**

Answers

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

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Explanations

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1. When a customer becomes eligible for Medicare, what happens to their Pennie policy?

A. It stays active for a month

B. It is terminated a day before Medicare begins

C. It automatically converts to Medicare

D. Only changes if requested

When a customer becomes eligible for Medicare, their Pennie policy is terminated a day before their Medicare coverage begins. This is important because Medicare serves as a primary source of coverage for those who qualify, and therefore, private health insurance like that offered through Pennie is no longer necessary. Customers need to be aware of the timing, as it ensures there is no overlap in coverage, which could lead to confusion or unnecessary costs. Coordination of benefits is also crucial for managing health care expenses effectively, as individuals transitioning to Medicare should know what to expect regarding their coverage changes. The other options do not align with the established protocols. For instance, the idea that the policy stays active for a month does not reflect the immediate transition to Medicare. An automatic conversion implies a continuity that does not exist, as two distinct coverages cannot overlap. Lastly, the option about only changing if requested overlooks the mandatory nature of the transition when a member becomes eligible for Medicare.

2. What should you attempt to do when assisting households with mixed immigration statuses?

A. Help all the customers of the household

B. Provide resources in different formats, preferably in their preferred language

C. Only ask questions and collect information for eligible Pennie applicants seeking coverage

D. All of the above

When assisting households with mixed immigration statuses, it is important to adopt a comprehensive approach that addresses the diverse needs of all members. This entails helping all customers in the household, as each member may have different eligibility circumstances. Furthermore, by ensuring that resources are provided in various formats and, importantly, in the preferred language of the household members, you enhance communication and understanding, which can significantly improve the effectiveness of the assistance provided. Collecting information and asking questions specifically geared toward eligible Pennie applicants is also crucial. This helps to streamline the application process for those who qualify while ensuring that those who do not meet the criteria are still supported. By encompassing all these elements - assisting every individual in the household, providing resources in accessible formats, and focusing on eligibility while still engaging all members - you create a supportive environment that respects the complexity of mixed immigration statuses. This holistic approach is essential for effectively navigating the nuances of health coverage options available to these households.

3. What types of financial assistance are available through Pennie?

- A. Loan options and grants**
- B. Premium tax credits and cost-sharing reductions**
- C. Only tax deductions**
- D. Scholarships for health coverage**

The availability of premium tax credits and cost-sharing reductions through Pennie is significant as these forms of financial assistance help to make health coverage more affordable for individuals and families. Premium tax credits are available to lower the monthly premium cost of a health plan purchased through the marketplace, based on income and family size. Cost-sharing reductions further assist those who qualify, allowing for reduced out-of-pocket costs when receiving care, such as lower deductibles and copayments. This financial assistance is specifically designed to support eligible individuals who might otherwise find health insurance premiums or costs prohibitively high, ensuring that access to healthcare is more equitable and manageable. It plays a crucial role in making healthcare affordable, thereby improving health outcomes for many citizens.

4. What is the benefit of a secure, encrypted password manager?

- A. It helps keep track of social media passwords**
- B. It provides random password generation**
- C. It securely stores and encrypts your passwords**
- D. It allows you to share passwords easily**

A secure, encrypted password manager provides the essential function of securely storing and encrypting your passwords, which is crucial for protecting sensitive information. By using advanced encryption methods, it safeguards your passwords from unauthorized access and potential breaches, ensuring that even if the data is compromised, it remains unreadable without the correct decryption key. This feature significantly enhances security across your online accounts, allowing users to manage multiple passwords without needing to remember each one individually or resort to less secure strategies, such as using the same password across different accounts. While tracking social media passwords, generating random passwords, and sharing passwords can be convenient features provided by some password managers, these aspects primarily support the overarching function of secure password storage and management. The core benefit lies in the encryption and security that these tools offer, making option C the most accurate representation of a secure, encrypted password manager's primary advantage.

5. What is the main purpose of the cost-sharing reduction (CSR) program?

- A. To increase the consumer's out-of-pocket costs**
- B. To provide free health insurance for everyone**
- C. To decrease the amount consumers pay for deductibles, copayments, and coinsurance**
- D. To offer tax deductions for health insurance premiums**

The main purpose of the cost-sharing reduction (CSR) program is to decrease the amount consumers pay for deductibles, copayments, and coinsurance. The CSR program is designed to assist individuals and families with lower incomes in making healthcare more affordable. It reduces the cost-sharing that consumers would otherwise face when accessing healthcare services, thereby lessening the financial burden when they need medical care. By lowering these out-of-pocket costs, the CSR program aims to increase access to necessary healthcare services for those who may struggle to afford them otherwise. This means that when eligible individuals go to the doctor or fill a prescription, they will pay less compared to those without CSR benefits, which helps ensure that healthcare is more accessible and equitable. The other options reflect goals that do not align with the purpose of the CSR program. Increasing consumer out-of-pocket costs does not facilitate access to care, nor does providing free health insurance align with the CSR's intention of reducing specific financial barriers. Additionally, offering tax deductions pertains to a different aspect of healthcare financing and doesn't specifically address cost-sharing reductions for medical services.

6. If a customer receives a bill from an out-of-network provider, where should they file their appeal?

- A. With Pennie**
- B. With their broker or assister**
- C. With the insurer**
- D. With the state healthcare office**

Filing an appeal regarding a bill from an out-of-network provider should be done with the insurer because they are responsible for reviewing and making decisions on claims related to their coverage. The insurer has the necessary information and authority to assess the circumstances of the claim and determine whether the service provided is covered under the individual's health plan, even if the provider is out-of-network. The process often involves the customer contacting their insurer directly, providing the relevant documentation and information about the situation. The insurer will then evaluate the claim based on the specifics of the policy, which may include details on out-of-network coverage. This makes the insurer the appropriate entity to handle such appeals, ensuring that the customer's concerns are addressed in accordance with the terms of their health plan. In contrast, while the other options may involve support and guidance related to insurance matters—such as general advice from brokers or assisters or oversight from state healthcare offices—they do not have the direct ability to adjudicate or resolve claims related to insurance coverage.

7. What is the primary purpose of the Pennie Individual Marketplace?

- A. To provide a platform for individuals to enroll in health insurance plans under the Affordable Care Act**
- B. To regulate healthcare providers and insurance companies**
- C. To offer educational resources about health insurance**
- D. To promote healthy living and wellness programs**

The primary purpose of the Pennie Individual Marketplace is to provide a platform for individuals to enroll in health insurance plans under the Affordable Care Act. This marketplace serves as a crucial tool for consumers seeking health coverage, especially for those who may not have access to employer-sponsored insurance or other health benefits. By offering a centralized location to compare different health insurance options and enroll in plans, the Pennie Individual Marketplace aims to increase access to health coverage and make the process easier for individuals. This aligns with the broader goals of the Affordable Care Act, which seeks to expand health insurance coverage and improve affordability for consumers. While the other options may touch on important aspects related to health and wellness, they do not capture the primary function of the marketplace. Unlike the educational resources about health insurance or the promotion of wellness programs, which are supportive but secondary, the main focus of Pennie is facilitating enrollment in health plans, making it essential for individuals looking to secure health coverage.

8. Who can provide guidance to individuals that are unsure about their coverage options in Pennie?

- A. Only family members who are experienced**
- B. Licensed agents and navigators**
- C. Unlicensed individuals familiar with healthcare**
- D. Only state government employees**

Licensed agents and navigators are the appropriate choices for providing guidance to individuals who are uncertain about their coverage options in Pennie. These professionals possess specialized training and certification that enable them to assist individuals effectively in navigating the complexities of health insurance options available through the Pennie platform. They can assess an individual's needs, explain different plan choices, and help with the enrollment process, ensuring clients understand their options and make informed decisions. Family members may not have the necessary knowledge or understanding of the marketplace and its rules, which might lead to misinformation or confusion. Unlicensed individuals, even if they have some familiarity with healthcare, lack the official training required to give professional advice on health insurance. State government employees may have valuable insights about the marketplace in general, but not all of them are trained to provide specific guidance on coverage options. Hence, licensed agents and navigators are the best resources for individuals seeking assistance with their health insurance options in the Pennie marketplace.

9. What is the purpose of the premium tax credits in the Pennie marketplace?

- A. To provide free health insurance**
- B. To reduce the cost of premiums for eligible individuals and families**
- C. To encourage purchasing a specific plan**
- D. To cover all healthcare expenses**

The purpose of premium tax credits in the Pennie marketplace is to reduce the cost of premiums for eligible individuals and families. These credits are designed to make health insurance more affordable by lowering the monthly premiums that consumers must pay. The eligibility for these credits is typically based on income, household size, and other factors, aiming to assist those who may struggle to afford health insurance coverage without financial aid. This provision is critical in ensuring that individuals and families can access necessary healthcare services without facing overwhelming costs. Options suggesting free health insurance misinterpret the nature of the tax credits, as they provide assistance but do not eliminate costs entirely. Proposals to encourage purchasing a specific plan mischaracterize the intended purpose of the credits, which do not favor one plan over another, but rather aim to make a variety of coverage options more accessible. Offering to cover all healthcare expenses inaccurately describes the role of premium tax credits, which specifically focus on making premiums more manageable while other out-of-pocket costs may still apply.

10. If you are changing agencies as an Agent, what action should you take?

- A. Create another agent account**
- B. Ask the Agency Manager of the new Agency to initiate a new Agent account**
- C. Request your former agency manager to transfer your account**
- D. Complete a broker and book of business transfer request form**

When changing agencies as an Agent, completing a broker and book of business transfer request form is the appropriate action to take. This form facilitates the official transfer of your licensing and client information from your former agency to the new agency. It ensures that all necessary documentation is properly handled and that your clients' information is retained and respected during the transition. In the context of transferring to a new agency, this process is important to maintain compliance with regulatory requirements and to ensure that clients receive uninterrupted service. This transfer request helps to formally document the change, making it clear that you are moving your business and will continue to assist your clients at your new agency. Creating another agent account independently is not advisable because it could lead to confusion regarding your licensing and client management, potentially violating policies related to agency transitions. Asking the new Agency Manager to initiate an account is a step that may occur after the transfer, but it doesn't address the necessary protocol for handling your book of business. Similarly, while requesting your former agency manager to transfer your account might seem like a viable option, it does not follow the standard procedure for such transitions, which the designated transfer request form properly adheres to.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://py2025pennieindimarketplavetrainingnewagentsbrokers.examzify.com>

We wish you the very best on your exam journey. You've got this!