TEXAS PLW 2026 PRACTICE TEST (SAMPLE)

STUDY GUIDE

SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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. **A pre-existing condition timeframe is described as:**
   - A. It applies to any condition ever diagnosed.
   - B. It excludes conditions requiring hospitalization.
   - C. It is not related to medical advice or treatment.
   - D. It includes a condition for which medical advice or treatment was received within a specified period before the policy's effective date.

2. **Life Income (Pure or Straight) payments are guaranteed for the lifetime of the recipient and do what upon death?**
   - A. Payments for a Fixed Term of Years
   - B. Payments Guaranteed for Lifetime Cease on Death
   - C. Payments Depend on Stock Market
   - D. Payments Increase with Age of Recipient

3. **Under federal law, which describes who qualifies as a dependent child for coverage?**
   - A. Only natural children
   - B. Only adopted children
   - C. Natural, adopted, married or unmarried children up to age 26
   - D. Only full-time students

4. **Medicare Supplement policies must be guaranteed renewable and cannot be nonrenewed or canceled on the basis of health status.**
   - A. True
   - B. False
   - C. They can be nonrenewed for health status
   - D. They can be canceled at any time for any reason

5. **Which statement about death benefit proceeds is correct?**
   - A. The death benefit paid as a lump sum to a named beneficiary is generally not taxable income.
   - B. If a settlement option is chosen, the entire death benefit remains tax-free.
   - C. The death benefit must always be reported as income, regardless of form of payout.
   - D. Tax on death benefits depends on the beneficiary's tax bracket regardless of payout form.

6. **Comprehensive Major Medical Policy combines the best features of the Basic and Major Medical policies into one. It will include deductibles, coinsurance, and stop loss limits.**

A. A policy that covers only basic medical expenses

B. A policy that combines the Basic and Major Medical features into one, including deductibles, coinsurance, and stop loss limits

C. A policy that excludes major medical coverage

D. A policy that is only hospital coverage

7. **Which statement about Nonoccupational Policy is true?**

A. It covers injuries that occur on the job

B. It covers injuries and illnesses that occur off the job

C. It covers only catastrophic injuries

D. It covers on-the-job injuries only

8. **Which dental care type deals with dental pulp care and root canals?**

A. Endodontics

B. Orthodontics

C. Periodontics

D. Prosthodontics

9. **If hospitalized beyond 90 days, how many lifetime reserve days are available?**

A. 60 days

B. 30 days

C. 90 days

D. 120 days

10. **An Attending Physician Statement is used in cases where:**

A. The application and/or medical reports reveal conditions for which further information is required.

B. The premium interest rate needs adjustment.

C. Coverage needs to be approved without medical information.

D. Underwriting is complete and no further information is needed.

Answers

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

Explanations

1. A pre-existing condition timeframe is described as:

A. It applies to any condition ever diagnosed.

B. It excludes conditions requiring hospitalization.

C. It is not related to medical advice or treatment.

D. It includes a condition for which medical advice or treatment was received within a specified period before the policy's effective date.

Pre-existing condition timeframe is about a look-back window a policy uses to identify conditions that existed before coverage starts. The idea is to check medical advice or treatment within a specific period prior to the policy's effective date. If a condition was treated or medical advice given during that window, it's treated as pre-existing and may be excluded or subject to a waiting period. That's why describing a condition for which medical advice or treatment was received within a specified period before the policy's effective date best fits how these timeframes work. The other descriptions don't fit because they either ignore the timing, focus on hospitalization, or claim no link to prior medical activity.

2. Life Income (Pure or Straight) payments are guaranteed for the lifetime of the recipient and do what upon death?

A. Payments for a Fixed Term of Years

B. Payments Guaranteed for Lifetime Cease on Death

C. Payments Depend on Stock Market

D. Payments Increase with Age of Recipient

A life income pure/straight annuity pays for the recipient's lifetime and ceases on death. The defining feature is that payments continue while the person is alive, but there is no continuation or death benefit after death—no payments to a beneficiary and no guaranteed period beyond the annuitant's life. That's why it isn't a fixed-term arrangement (which ends after a set number of years), not tied to stock market performance (that would be a variable annuity), and not designed to increase payments with age (different annuity types handle growth or survivor features).

3. Under federal law, which describes who qualifies as a dependent child for coverage?

A. Only natural children

B. Only adopted children

C. Natural, adopted, married or unmarried children up to age 26

D. Only full-time students

Dependents for coverage are defined by age limits and relationship. The key rule is that a dependent child can be covered up to age 26, and this includes natural and adopted children, with the option for coverage regardless of whether the child is married or unmarried. That's why including natural or adopted children and allowing for both married and unmarried status up to 26 makes this option the best fit. In practice, other qualifying relationships like stepchildren or foster children are also covered in many federal plans, but the essential point is the up-to-26 age cap combined with the defined family relationships. The other options are too narrow, excluding either natural or adopted children or tying coverage to a narrower circumstance like being a full-time student.

4. Medicare Supplement policies must be guaranteed renewable and cannot be nonrenewed or canceled on the basis of health status.

A. True

B. False

C. They can be nonrenewed for health status

D. They can be canceled at any time for any reason

Medicare Supplement policies are guaranteed renewable. That means the insurer must renew your policy as long as you pay the premium and continue to meet eligibility; they cannot cancel or nonrenew you because of your health status or changes in health. This protection helps ensure you don't lose coverage just because you develop illnesses or incur higher medical costs. The policy can be terminated only for limited reasons such as nonpayment of premium, material fraud or misrepresentation, or if the insurer stops selling that specific Medigap plan in your area. Because health status cannot be used to cancel or nonrenew, the statement is correct.

5. Which statement about death benefit proceeds is correct?

A. The death benefit paid as a lump sum to a named beneficiary is generally not taxable income.

B. If a settlement option is chosen, the entire death benefit remains tax-free.

C. The death benefit must always be reported as income, regardless of form of payout.

D. Tax on death benefits depends on the beneficiary's tax bracket regardless of payout form.

The main idea is how life insurance death benefits are taxed. In general, when a death benefit is paid to a beneficiary, it is excluded from the beneficiary's gross income, so it isn't taxed as ordinary income. The key nuance is what form the payout takes. If the death benefit is paid as a lump sum to a named beneficiary, that amount is typically not taxable income at all. The money goes to the beneficiary without creating taxable income, which is why lump-sum payments are described as generally non-taxable. If the benefit is not paid in a lump sum but instead through a settlement option or kept with the insurer to be paid out over time, the principal amount remains non-taxable, but any interest that accrues on the proceeds or is included in the periodic payments is taxable as ordinary income. So the entire death benefit isn't tax-free in that case—the interest portion is. The other statements are off because they imply the death benefit is always fully taxable or always tax-free regardless of payout form, or that tax depends solely on the beneficiary's tax bracket. The tax treatment hinges on whether the payout is a lump sum (usually non-taxable) or installment/settlement payments (where interest portions are taxable). Therefore, the correct understanding is that a lump-sum death benefit to a named beneficiary is generally not taxable income.

6. Comprehensive Major Medical Policy combines the best features of the Basic and Major Medical policies into one. It will include deductibles, coinsurance, and stop loss limits.

A. A policy that covers only basic medical expenses

B. A policy that combines the Basic and Major Medical features into one, including deductibles, coinsurance, and stop loss limits

C. A policy that excludes major medical coverage

D. A policy that is only hospital coverage

A Comprehensive Major Medical policy is a single plan that blends the routine protection of Basic medical expenses with the broader, catastrophe-style protection of Major Medical, and it includes cost-sharing features like a deductible, coinsurance, and a stop-loss limit. The deductible is what you pay out of pocket before benefits start, coinsurance is the percentage you pay after the deductible, and the stop-loss limit caps your total out-of-pocket costs for covered services. This combination gives both predictable, everyday coverage and protection against very large bills, all in one policy. The other options describe only basic coverage, excluding major medical, or limiting to hospital coverage, none of which reflect the integrated, cost-sharing structure of a Comprehensive Major Medical policy.

7. Which statement about Nonoccupational Policy is true?

A. It covers injuries that occur on the job

B. It covers injuries and illnesses that occur off the job

C. It covers only catastrophic injuries

D. It covers on-the-job injuries only

Nonoccupational coverage means protection for events that happen away from work. So a nonoccupational policy covers injuries and illnesses that occur off the job, rather than those that occur on the job. Injuries that happen at work are handled by workers' compensation, not a nonoccupational policy. That's why the statement describing off the job coverage is the correct one. The ideas that it only covers catastrophic injuries or that it covers on the job injuries don't fit the typical scope of nonoccupational coverage.

8. Which dental care type deals with dental pulp care and root canals?

A. Endodontics

B. Orthodontics

C. Periodontics

D. Prosthodontics

Inside the tooth, the pulp and the delicate root canal system are the focus. Endodontics specializes in diseases and injuries of the dental pulp and the tissues around the root of the tooth, including procedures like root canal therapy where infected or inflamed pulp is removed, the canals are cleaned, and the tooth is sealed to preserve it. This is distinct from the other specialties: orthodontics deals with aligning teeth and correcting bites; periodontics focuses on the gums and supporting bone; prosthodontics restores missing teeth with crowns, bridges, dentures, or implants. So endodontics is the field that directly handles dental pulp care and root canals.

9. If hospitalized beyond 90 days, how many lifetime reserve days are available?

A. 60 days

B. 30 days

C. 90 days

D. 120 days

In Medicare Part A, you get 90 days of inpatient hospital coverage per benefit period. If a stay goes beyond those 90 days, there's a pool of 60 lifetime reserve days you can draw from to extend coverage. These reserve days are available only once in a person's lifetime, meaning you can use up to 60 extra days total beyond the initial 90, but no more than that across all future benefit periods. That's why the correct number is 60 days. The other numbers don't fit because there isn't a 30-day or 90-day or 120-day lifetime reserve in this framework. The lifetime reserve pool is exactly 60 days.

10. An Attending Physician Statement is used in cases where:

A. The application and/or medical reports reveal conditions for which further information is required.

B. The premium interest rate needs adjustment.

C. Coverage needs to be approved without medical information.

D. Underwriting is complete and no further information is needed.

When underwriters see medical conditions on the application or in the medical reports that need more detail, they request an Attending Physician Statement from the applicant's doctor. The APS provides a clear, professional assessment from the treating physician, including diagnoses, dates of onset, treatment plans, medications, test results, and prognosis. This information helps the underwriter judge how stable or progressive a condition is, how it might affect future health, and whether the risk can be adequately priced or requires a rating, exclusion, or other terms. This isn't about approving coverage with no medical information, and it isn't a tool used after underwriting is already finished. It also isn't a standalone method for changing premiums by itself—the APS supplies the necessary medical details that can influence the final rating or decision.

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://texasplw.examzify.com

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