
Addendum: for use with Wisconsin Life and Health ExamFX online courses and study guide version 22225en/22227en, per exam outline update effective 11/16/19.

New Exam Breakdowns:

**Wisconsin Life Insurance Examination
100 Questions
Time Limit: 2 hours
Passing Score: 70%**

CHAPTER	PERCENTAGE OF EXAM
General Insurance	10%
Life Insurance Basics	10%
Life Insurance Policies	12%
Life Insurance Policy Provisions, Riders, and Options	14%
Annuities	10%
Qualified Plans	4%
Federal Tax Considerations for Life Insurance and Annuities	5%
Insurance Regulation	35%

**Wisconsin Health Insurance Examination
100 Questions
Time Limit: 2 hours
Passing Score: 70%**

CHAPTER	PERCENTAGE OF EXAM
General Insurance	10%
Accident and Health Insurance Basics	8%
Disability Income and Related Insurance	8%
Medical Plans	8%
Group Accident and Health Insurance	8%
Dental Insurance	4%
Medicare	8%
Long-Term Care Insurance	8%
Federal Tax Considerations for Accident and Health Insurance	3%
Insurance Regulation	35%

The following are **content additions** to supplement your existing text unless otherwise indicated:

ALL LINES

General Wisconsin Insurance Law

E. Marketing Practices

1. Types of Unfair Practices

Evidence of Insurance

No person may prepare, issue, request, or require a certificate of insurance or other document used for evidence of insurance to do any of the following:

- Contain information concerning the policy referenced by the certificate of insurance that is false, misleading, deceptive, unfairly discriminatory, or that otherwise violates public policy or law;
- Appear to alter, amend, or extend coverage provided by the policy referenced by the certificate of insurance;
- Alter the terms and conditions of any notice requirement in the policy.

It is illegal to alter a certificate of insurance or other document used for evidence of insurance after it is issued.

HEALTH

Medicare and Long-Term Care Insurance

D. Medicare Access and CHIP Reauthorization Act of 2015 (MACRA)

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) amended the Social Security act to change how physicians are reimbursed in an attempt to emphasize quality of care over volume and to reauthorize the Children's Health Insurance Program, among other improvements. MACRA also required the removal of Social Security numbers from all Medicare cards.

Quality Payment Program

Before MACRA was passed, payment increases for Medicare services were set by the Sustainable Growth Rate (SGR) law, which capped spending increases by growth in the Medicare population, allowing a modest amount for inflation. This meant, however, that as clinicians increased their utilization of services, the reimbursement for each unit of service had to be adjusted downward to hold costs constant.

MACRA created the Quality Payment Program, which

- Repeals the Sustainable Growth Rate formula;
- Changes the way that Medicare rewards clinicians for value over volume;
- Streamlines multiple quality programs under the new Merit Based Incentive Payments System (MIPS); and
- Gives bonus payments for participation in eligible alternative payment models (APMs).

With these changes, high-quality Medicare clinicians get payment increases while clinicians who aren't meeting performance standards have their payments reduced.

Starting in 2019, physicians would choose from two payment models:

- The Merit-based Incentive Payment System (MIPS), under which health care professionals receive annual payment increases or decreases based on their performance; or
- The Alternative Payment Models (APMs), in which professionals who receive at least 25% of their Medicare revenue through an APM receive a 5% payment bonus.

Wisconsin Health Insurance Law

B. Coverages

Prescription Eye Drops

Any health plan that provides coverage for prescription eye drops must cover a refill of the prescription eye drops if

- The refill is requested when 75% or more of the days have elapsed from the later of
 - The original date the prescription was distributed; or
 - The date on which the most recent refill was distributed;
- The prescription allows for a refill of the prescription eye drops; and
- The requested refill does not exceed the number of refills allowed by the prescription.

Oral and Injected Chemotherapy

A disability insurance policy or self-insured health plan that covers injected or intravenous chemotherapy and oral chemotherapy may not require a higher copayment, deductible, or coinsurance amount for oral chemotherapy than it requires for injected or intravenous chemotherapy.