

**State:** Pennsylvania **Filing Company:** Genworth Life Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.001 Qualified  
**Product Name:** 2018 PCS II\_IFA Round 5  
**Project Name/Number:** 2018 PCS II\_IFA Round 5/2018 PCS II\_IFA Round 5

## Filing at a Glance

**Company:** Genworth Life Insurance Company  
**Product Name:** 2018 PCS II\_IFA Round 5  
**State:** Pennsylvania  
**TOI:** LTC03I Individual Long Term Care  
**Sub-TOI:** LTC03I.001 Qualified  
**Filing Type:** Rate - Other (Not M.U. or G.I. Product)  
**Date Submitted:** 08/17/2018  
**SERFF Tr Num:** GEFA-131601681  
**SERFF Status:** Assigned  
**State Tr Num:** GEFA-131601681  
**State Status:** Received Review in Progress  
**Co Tr Num:** 2018 PCS II\_IFA ROUND 5  
  
**Implementation:** On Approval  
**Date Requested:**  
**Author(s):** Richard Cromwell, Ronald Jackson, June Lipscomb, Jeanette Mai  
**Reviewer(s):** Jim Laverty (primary)  
**Disposition Date:**  
**Disposition Status:**  
**Implementation Date:**

**State Filing Description:**  
 Proposed aggregate 34.24% (43% on unlimited BPs and 29% on limited BPs) increase on 5,602 policyholders of Genworth forms 7030 and 7032 (the PCS II series).

**State:** Pennsylvania **Filing Company:** Genworth Life Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.001 Qualified  
**Product Name:** 2018 PCS II\_IFA Round 5  
**Project Name/Number:** 2018 PCS II\_IFA Round 5/2018 PCS II\_IFA Round 5

## General Information

Project Name: 2018 PCS II_IFA Round 5	Status of Filing in Domicile: Authorized
Project Number: 2018 PCS II_IFA Round 5	Date Approved in Domicile: 04/02/2018
Requested Filing Mode: Review & Approval	Domicile Status Comments: N/A
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact: 34.24%	Filing Status Changed: 08/20/2018
	State Status Changed: 08/21/2018
Deemer Date:	Created By: Ronald Jackson
Submitted By: Ronald Jackson	Corresponding Filing Tracking Number:
	State TOI: LTC03I Individual Long Term Care

### Filing Description:

RE:Genworth Life Insurance Company (GLIC)  
 Company NAIC No: 70025  
 Policy Forms: 7030 et al, 7032 et al

The referenced filing is a Long Term Care (LTC) rate schedule change request submitted for your review.

In this filing, GLIC requests a premium rate increase of 43% for lifetime benefits and 29% for limited benefits on the above-mentioned policy forms. In the submitted actuarial memorandum, we include detailed rate increase justification and we demonstrate that this premium rate increase satisfies Long Term Care regulatory requirements of Pennsylvania.

GLIC will offer insureds affected by the premium increase several options to change their benefits in order to maintain a premium rate level reasonably similar to what they were paying prior to the rate increase. The benefit and rate combinations are consistent with the rate tables approved by the Department.

Thank you for your assistance in reviewing this filing.

## Company and Contact

### Filing Contact Information

Ronald N. Jackson, Contract Analyst	ronald.jackson@genworth.com
Product Compliance	804-289-6725 [Phone]
P O Box 27601	804-281-6916 [FAX]
Richmond, VA 23261-7601	

### Filing Company Information

Genworth Life Insurance Company	CoCode: 70025	State of Domicile: Delaware
6610 W Broad Street	Group Code: 4011	Company Type: LifeHealth &
Richmond, VA 23230	Group Name:	Annuity
(804) 281-6600 ext. [Phone]	FEIN Number: 91-6027719	State ID Number:

## Filing Fees

Fee Required?	Yes
Fee Amount:	\$150.00

**State:** Pennsylvania **Filing Company:** Genworth Life Insurance Company

**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.001 Qualified

**Product Name:** 2018 PCS II\_IFA Round 5

**Project Name/Number:** 2018 PCS II\_IFA Round 5/2018 PCS II\_IFA Round 5

Retaliatory? Yes

Fee Explanation: DE, the domiciliary state, requires \$150 for a rate and form submission.

Per Company: Yes

Company	Amount	Date Processed	Transaction #
Genworth Life Insurance Company	\$150.00	08/17/2018	145371541

State: Pennsylvania

Filing Company:

Genworth Life Insurance Company

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: 2018 PCS II\_IFA Round 5

Project Name/Number: 2018 PCS II\_IFA Round 5/2018 PCS II\_IFA Round 5

## Form Schedule

Lead Form Number: 7030END-SPO 1017

Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1		Stable Premium Option Endorsement (PCS II)	7030END-SPO PA 1017	POLA	Initial		50.000	7030END-SPO 1017_PA.pdf

### Form Type Legend:

<b>ADV</b>	Advertising	<b>AEF</b>	Application/Enrollment Form
<b>CER</b>	Certificate	<b>CERA</b>	Certificate Amendment, Insert Page, Endorsement or Rider
<b>DDP</b>	Data/Declaration Pages	<b>FND</b>	Funding Agreement (Annuity, Individual and Group)
<b>MTX</b>	Matrix	<b>NOC</b>	Notice of Coverage
<b>OTH</b>	Other	<b>OUT</b>	Outline of Coverage
<b>PJK</b>	Policy Jacket	<b>POL</b>	Policy/Contract/Fraternal Certificate
<b>POLA</b>	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	<b>SCH</b>	Schedule Pages

# GENWORTH LIFE INSURANCE COMPANY

A Delaware domiciled stock insurance company (herein called We, Us and Our)

Administrative Office: [3100 Albert Lankford Drive, Lynchburg, VA 24501]

**[Insured/Policyholder]:**

**Policy Number:**

## STABLE PREMIUM OPTION ENDORSEMENT

*This Endorsement is to be attached to, and adds/changes the following language to the above identified Policy.*

This Endorsement changes the policy coverage, and is a part of the policy and subject to all the provisions of the policy except where they are modified by this Endorsement. Except where stated otherwise in this Endorsement, to the extent that any provisions contained in this Endorsement are contrary to or inconsistent with those of the policy, the provisions of this Endorsement will control. This Endorsement and the accompanying updated Schedule are to be attached to and form a part of the policy.

The effective date of this Endorsement is [*endorsement effective date*].

### Lifetime Payment Maximum

- The Lifetime Payment Maximum is changed as shown on the accompanying updated Schedule.

### Compound 1% Benefit Increases

- As shown on the accompanying updated Schedule, the Inflation Protection provision is changed to Compound 1% Benefit Increases. The Daily Payment Maximum will remain at its current level (or slightly above due to system rounding) [, including all prior [Equal][Compound] 5% Benefit Increases if that was an original benefit under the policy,] until the first anniversary of the policy effective date that occurs after the effective date of this Endorsement. Beginning on the first anniversary of the policy effective date that occurs after the effective date of this Endorsement, the Daily Payment Maximum and Lifetime Payment Maximum amounts will increase in accordance with the Compound 1% Benefit Increases provision of the policy.
- [Except for the phrase “Signed for General Electric Capital Assurance Company” and the associated signatures and titles in the signature block, [the Equal Benefit Increases Inflation Protection Rider is renamed to be the Compound Benefit Increases Inflation Protection Rider and] the provisions of the [Equal][Compound] Benefit Increases Inflation Protection Rider are deleted in their entirety and replaced with the following:]

COMPOUND 1% BENEFIT INCREASES – The Daily Payment Maximum and Lifetime Payment Maximum amounts will each increase on every anniversary of the effective date of the policy. Annual increases will apply to benefits payable for expenses incurred on or after the date of the increase. Beginning on the first anniversary of the policy effective date that occurs after the effective date of the Endorsement changing this Inflation Protection provision to Compound 1% Benefit Increases, the Daily Payment Maximum and Lifetime Payment Maximum amounts will increase by 1% of the amounts in effect at that time as shown on Your updated Schedule accompanying that Endorsement; and each increase thereafter will be equal to 1% of the Daily Payment Maximum and Lifetime Payment Maximum in effect at the time of each such increase.

In all other respects, the conditions and provisions of the policy, as modified by any other riders or endorsements, remain the same.

Elimination Period [and co-insurance]

- [As shown on the accompanying updated Schedule, the Elimination Period is changed to 180 days for the Long Term Care Facility Benefit, and a 90-day Elimination Period is required for the Home Care Benefit.
- The definition of the term “Elimination Period” in the Glossary section of the policy is deleted in its entirety and replaced with the following:

The number of days for which an Insured Person must incur expenses that qualify for benefit payments under the policy; but for which we will NOT pay benefits. For the Long Term Care Facility Benefit, the Elimination Period can be satisfied by days for which payment would otherwise be made under the Long Term Care Facility Benefit (including Bed Reservation Benefit Days), or days the Insured Person receives services covered under the Home Care Benefit in accordance with a Privileged Care Coordinator’s Plan of Care. For the Home Care Benefit, the Elimination Period can be satisfied by days for which payment would otherwise be made under either the Home Care Benefit or the Long Term Care Facility Benefit (including Bed Reservation Benefit Days). Days used to satisfy the Elimination Period do not need to be consecutive, but must occur within a 2 year period.

Once an Insured Person has satisfied this Elimination Period requirement, he or she will never have to satisfy a new Elimination Period for the policy. The Schedule shows the number of days in each Insured Person’s Elimination Period.

Note, the Elimination Period does not apply to: the Privileged Care Coordination Benefit; the Caregiver Training Benefit; or the Equipment Benefit.

- The paragraphs of the “Home Care Benefit” provision that appear prior to the “Definitions” section of that provision are deleted in their entirety and replaced with the following:

The following benefits apply when an Insured Person receives care and support services in accordance with a Plan of Care developed by a Licensed Health Care Practitioner:

- Subject to the Elimination Period and the Daily Payment Maximum limitation in the next paragraph, we will pay the expenses he or she incurs for the following care and services that are consistent with that Plan of Care:
  - Health care services provided by a Nurse, or a licensed physical, occupational, respiratory or speech therapist;
  - Home Health Aide and Personal Care Attendant Services;
  - Homemaker Services;
  - Chore Services;
  - Adult Day Care;
  - Hospice Care; and
  - The first 21 days of Respite Care he or she receives during a Policy Year. (Respite Care is not subject to, nor will it satisfy any Elimination Period.)

- Unless specified differently by a separate Policy rider or endorsement, payment for the above expenses will not be subject to the Daily Payment Maximum; however, not more than 7 times the Daily Payment Maximum will be paid for all those expenses which an Insured Person incurs during any calendar week (Sunday through Saturday).
  - After satisfying the Elimination Period, the policy will be eligible for monthly waiver of any premiums becoming due while an Insured person is receiving Home Care Benefits in accordance with a Plan of Care developed by a Privileged Care Coordinator.
- The first paragraph of the “Bed Reservation Benefit” provision is deleted in its entirety and replaced with the following:

We will continue to pay benefits under the Long Term Care Facility Benefit, or give Elimination Period credit for either the Long Term Care Facility Benefit or Home Care Benefit, for each day an Insured Person:

- is temporarily absent during a stay in the Long Term Care Facility; and
  - is charged to reserve his or her accommodations in that facility.
- The first paragraph of the “Waiver of Premium” provision in the “Effective Date and Premium Provisions” section is deleted in its entirety and replaced with the following:

We will waive premium payments for each coverage month that begins:

- While an Insured Person is receiving continuing benefits under the Long Term Care Facility Benefit or the Bed Reservation Benefit (after satisfying the Elimination Period); or
- When Home Care Benefits are being received in accordance with a Plan of Care from a Privileged Care Coordinator (after satisfying the Elimination Period).]

**OR**

[[As shown on the accompanying updated Schedule, the Elimination Period is changed to be 100 days for the Long Term Care Facility Benefit.]

- The third paragraph of the definition of the term “Elimination Period” in the Glossary section of the policy is deleted in its entirety and replaced with the following:

Note, the Elimination Period does not apply to: the Privileged Care Coordination Benefit; the Caregiver Training Benefit; or the Equipment Benefit.

- The paragraphs of the “Home Care Benefit” provision that appear prior to the “Definitions” section of that provision are deleted in their entirety and replaced with the following:

The following benefits apply when an Insured Person receives care and support services in accordance with a Plan of Care developed by a Licensed Health Care Practitioner:

- Subject to the Daily Payment Maximum limitation in the next paragraph, we will pay 90% of the expenses he or she incurs for the following care and services that are consistent with that Plan of Care:
  - Health care services provided by a Nurse, or a licensed physical, occupational, respiratory or speech therapist;
  - Home Health Aide and Personal Care Attendant Services;
  - Homemaker Services;

- Chore Services;
- Adult Day Care;
- Hospice Care; and
- The first 21 days of Respite Care he or she receives during a Policy Year.  
(Respite Care is not subject to, nor will it satisfy any Elimination Period.)
- Unless specified differently by a separate Policy rider or endorsement, payment for the above expenses will not be subject to the Daily Payment Maximum; however, not more than 7 times the Daily Payment Maximum will be paid for all those expenses which an Insured Person incurs during any calendar week (Sunday through Saturday).
- The policy will be eligible for monthly waiver of any premiums becoming due while an Insured Person is receiving Home Care Benefits in accordance with a Plan of Care from a Privileged Care Coordinator.

**No Elimination Period.** We will waive the Insured Person’s Elimination Period for these care and support services. In addition, if the care and support services are provided in accordance with a Privileged Care Coordinator’s Plan of Care, each day the Insured Person incurs expenses for the above care and support services (except Respite Care) will count toward satisfying his or her Elimination Period for other benefits that are subject to an Elimination Period.

- The first sentence of the “Long Term Care Facility Benefit” provision is deleted in its entirety and replaced with the following:

Subject to the Daily Payment Maximum, we will pay ninety percent (90%) of the expenses an Insured Person incurs for care and support services (including room and board, but not prescription drugs) provided by a Long Term Care Facility.]

Impact to Your premium

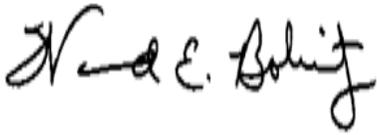
- Once this Endorsement becomes effective, while we may begin the regulatory process of seeking a premium increase, we will not implement a premium increase on Your policy in accordance with Our Limited Right To Change Premiums until at least the anniversary of the policy effective date that occurs on or after January 1, 2028.

Limited options to change coverage

- If You decide that You do not wish to keep the benefit changes made pursuant to this Endorsement but instead wish to revert to the benefits You had prior to selecting the benefit changes made pursuant to this Endorsement, You must change Your decision in writing within 60 days of the effective date of this Endorsement. After the 60-day period, You cannot revert back to the benefits You had prior to selecting the benefit changes made pursuant to this Endorsement.
- Other than Your right described above to provide written notice that You do not wish to keep the benefit changes made pursuant to this Endorsement, the only benefit change that You may make going forward from the effective date of this Endorsement is a reduction to an available Daily Payment Maximum or dropping an applicable rider. Changing Your Daily Payment Maximum will impact other benefits and maximum coverage amounts under Your policy.

In all other respects, the conditions and provisions of the policy, as modified by any other riders or endorsements, remain the same.

**Signed for Genworth Life Insurance Company.**



Ward E. Bobitz  
Secretary



Elena Edwards  
Senior Vice President

SERFF Tracking #:

GEFA-131601681

State Tracking #:

GEFA-131601681

Company Tracking #:

2018 PCS II\_IFA ROUND 5

State:

Pennsylvania

Filing Company:

Genworth Life Insurance Company

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name:

2018 PCS II\_IFA Round 5

Project Name/Number:

2018 PCS II\_IFA Round 5/2018 PCS II\_IFA Round 5

## Rate Information

Rate data applies to filing.

Filing Method:

SERFF

Rate Change Type:

Increase

Overall Percentage of Last Rate Revision:

20.000%

Effective Date of Last Rate Revision:

12/05/2017

Filing Method of Last Filing:

SERFF

SERFF Tracking Number of Last Filing:

GEFA-131152778

## Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Genworth Life Insurance Company	34.240%	34.240%	\$6,023,485	5,602	\$17,590,860	43.000%	29.000%

State: Pennsylvania

Filing Company:

Genworth Life Insurance Company

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: 2018 PCS II\_IFA Round 5

Project Name/Number: 2018 PCS II\_IFA Round 5/2018 PCS II\_IFA Round 5

## Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Rate Tables	7030 et al, 7032 et al	Revised	Previous State Filing Number: GEFA-131152778 Percent Rate Change Request: 34.24	PA PCS II Rate Tables Appendix A 20180810.pdf, PA PCS II Rate Tables Appendix B 20180810.pdf,
2		SPO Rate Table	7030END-SPO 1017	New		PA PCS II Rate Tables Appendix C 20180810.pdf,

**Appendix A**

Genworth Life Insurance Company  
Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Individual  
2 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	62.48	57.28	85.87	80.68	124.93	111.92
25-29	67.66	59.88	91.09	85.87	132.74	122.33
30-34	75.49	65.08	101.51	91.09	145.75	130.15
35-39	80.68	70.27	109.31	98.89	156.18	140.57
40-45	85.87	78.08	119.72	106.72	169.19	150.96
46	85.87	80.68	122.33	109.31	171.79	153.58
47	88.50	80.68	124.93	111.92	174.40	156.18
48	88.50	80.68	127.54	114.53	177.00	161.38
49	91.09	83.28	127.54	114.53	177.00	161.38
50	91.09	83.28	130.15	119.72	182.22	163.97
51	91.09	83.28	132.74	122.33	182.22	163.97
52	93.71	85.87	135.35	124.93	187.40	169.19
53	98.89	88.50	145.75	132.74	192.62	174.40
54	101.51	91.09	153.58	140.57	203.02	182.22
55	109.31	98.89	163.97	148.37	208.22	190.01
56	111.92	101.51	171.79	156.18	216.02	195.23
57	122.33	106.72	187.40	169.19	231.65	208.22
58	130.15	114.53	197.81	182.22	247.27	223.84
59	143.16	127.54	210.83	190.01	260.29	234.25
60	153.58	140.57	229.04	205.61	278.51	252.47
61	166.60	150.96	242.05	218.62	299.34	273.31
62	184.81	166.60	260.29	234.25	317.56	288.91
63	195.23	179.60	281.11	252.47	338.35	309.74
64	208.22	190.01	304.54	273.31	356.59	325.38
65	221.24	203.02	325.38	291.53	382.62	346.18
66	239.46	221.24	351.37	317.56	403.43	367.00
67	260.29	236.87	377.40	340.97	437.28	398.24
68	288.91	262.90	413.84	372.20	476.32	432.08
69	320.16	291.53	455.50	411.25	520.56	471.11
70	359.18	327.96	494.53	450.30	567.43	510.14
71	398.24	367.00	544.00	491.93	622.08	564.84
72	447.70	408.65	601.24	546.59	684.56	616.86
73	497.14	455.50	666.32	606.46	749.60	679.34
74	551.81	502.34	741.80	671.53	822.50	749.60
75	614.27	554.41	822.50	744.40	897.98	819.90
76	679.34	614.27	905.77	822.50	986.46	900.59
77	757.43	684.56	994.27	903.18	1,069.78	978.67
78	832.91	754.82	1,077.58	978.67	1,153.06	1,054.14
79	913.60	830.32	1,163.48	1,056.77	1,236.36	1,124.42
80	1,002.07	916.20	1,251.95	1,140.05	1,324.86	1,202.52
81	1,098.41	1,007.29	1,350.89	1,228.56	1,421.15	1,288.39
82	1,207.72	1,111.42	1,465.39	1,332.65	1,530.46	1,384.69
83	1,330.04	1,220.74	1,592.94	1,452.38	1,650.19	1,491.42
84	1,468.02	1,348.28	1,746.52	1,590.34	1,790.75	1,624.18
85	1,600.76	1,470.61	1,905.25	1,730.88	1,954.73	1,767.31
86	1,746.52	1,603.36	2,077.06	1,887.07	2,129.12	1,926.10
87	1,905.25	1,749.12	2,264.48	2,056.24	2,321.72	2,097.89
88	2,077.06	1,907.88	2,470.09	2,241.05	2,529.97	2,287.87
89	2,264.48	2,079.67	2,691.34	2,444.06	2,756.41	2,493.53
90	2,470.09	2,267.08	2,930.78	2,665.32	3,003.67	2,717.36
91	2,691.34	2,472.68	3,196.27	2,904.78	3,276.97	2,962.02
92	2,930.78	2,693.93	3,485.20	3,167.66	3,571.09	3,230.11
93	3,196.27	2,935.99	3,797.54	3,451.36	3,891.24	3,521.64
94	3,485.20	3,198.88	4,138.51	3,761.09	4,240.01	3,836.59

**Appendix A**

Genworth Life Insurance Company  
Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Individual  
3 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	78.08	70.27	111.92	104.11	161.38	148.37
25-29	83.28	78.08	122.33	111.92	171.79	161.38
30-34	88.50	83.28	130.15	122.33	187.40	171.79
35-39	93.71	88.50	143.16	130.15	203.02	187.40
40-45	104.11	93.71	153.58	143.16	216.02	203.02
46	114.53	98.89	156.18	145.75	218.62	205.61
47	119.72	101.51	161.38	148.37	226.44	208.22
48	119.72	101.51	161.38	148.37	229.04	210.83
49	119.72	101.51	163.97	150.96	231.65	213.43
50	122.33	104.11	166.60	153.58	231.65	213.43
51	124.93	106.72	169.19	156.18	234.25	216.02
52	127.54	106.72	174.40	163.97	239.46	223.84
53	130.15	109.31	184.81	169.19	247.27	229.04
54	135.35	114.53	195.23	182.22	255.08	234.25
55	143.16	122.33	208.22	190.01	268.09	242.05
56	150.96	130.15	218.62	203.02	278.51	255.08
57	163.97	140.57	234.25	216.02	294.12	270.68
58	174.40	148.37	252.47	231.65	312.35	281.11
59	190.01	161.38	270.68	247.27	333.16	301.94
60	205.61	174.40	288.91	262.90	356.59	322.75
61	218.62	190.01	312.35	281.11	382.62	346.18
62	236.87	203.02	335.76	304.54	403.43	367.00
63	255.08	221.24	356.59	327.96	432.08	393.04
64	273.31	234.25	385.21	351.37	455.50	413.84
65	291.53	249.88	408.65	374.81	484.12	442.49
66	314.95	268.09	442.49	406.06	512.77	468.49
67	343.56	294.12	478.92	439.88	551.81	502.34
68	380.03	325.38	525.78	481.51	601.24	549.20
69	424.27	361.78	577.85	528.37	658.52	603.85
70	471.11	406.06	635.09	583.06	723.58	661.13
71	528.37	452.90	705.37	645.50	796.46	728.80
72	593.44	510.14	780.86	713.18	877.15	804.29
73	661.13	567.43	864.13	788.65	963.06	884.96
74	739.21	632.50	952.64	871.96	1,059.36	973.46
75	825.11	705.37	1,051.55	960.46	1,166.08	1,067.16
76	916.20	780.86	1,155.65	1,056.77	1,270.18	1,166.08
77	1,017.71	871.96	1,272.79	1,163.48	1,392.52	1,275.38
78	1,121.81	957.84	1,384.69	1,270.18	1,504.42	1,379.51
79	1,223.34	1,048.94	1,501.82	1,379.51	1,616.36	1,483.62
80	1,335.26	1,147.85	1,626.78	1,494.05	1,738.70	1,592.94
81	1,465.39	1,257.17	1,764.72	1,624.18	1,871.45	1,715.27
82	1,605.96	1,382.10	1,918.28	1,764.72	2,019.79	1,850.60
83	1,772.51	1,522.67	2,092.69	1,926.10	2,188.98	2,006.80
84	1,962.54	1,686.64	2,293.09	2,113.50	2,379.00	2,181.17
85	2,139.54	1,837.60	2,498.72	2,303.50	2,595.02	2,376.38
86	2,329.52	2,004.19	2,722.56	2,511.74	2,829.28	2,592.41
87	2,537.76	2,183.77	2,967.22	2,738.18	3,084.36	2,826.68
88	2,766.82	2,379.00	3,235.33	2,985.46	3,362.86	3,081.74
89	3,014.09	2,595.02	3,526.85	3,253.55	3,664.80	3,357.65
90	3,284.77	2,829.28	3,844.38	3,547.67	3,995.35	3,659.59
91	3,578.92	3,084.36	4,190.58	3,867.80	4,357.15	3,990.13
92	3,901.64	3,362.86	4,567.98	4,213.99	4,750.18	4,349.35
93	4,250.42	3,664.80	4,979.23	4,594.01	5,177.04	4,739.77
94	4,635.64	3,995.35	5,426.90	5,007.85	5,642.96	5,166.62

**Appendix A**

Genworth Life Insurance Company  
Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Individual  
4 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	85.87	80.68	130.15	122.33	184.81	171.79
25-29	91.09	85.87	140.57	130.15	197.81	187.40
30-34	101.51	91.09	150.96	143.16	213.43	203.02
35-39	109.31	98.89	163.97	153.58	231.65	216.02
40-45	119.72	106.72	174.40	166.60	249.88	234.25
46	119.72	106.72	177.00	169.19	252.47	236.87
47	122.33	109.31	182.22	171.79	257.68	242.05
48	124.93	111.92	184.81	174.40	260.29	247.27
49	124.93	111.92	187.40	174.40	260.29	247.27
50	127.54	114.53	190.01	177.00	262.90	249.88
51	127.54	114.53	192.62	182.22	270.68	252.47
52	132.74	122.33	203.02	190.01	273.31	255.08
53	140.57	127.54	210.83	195.23	281.11	262.90
54	145.75	132.74	218.62	205.61	294.12	273.31
55	153.58	143.16	234.25	216.02	301.94	278.51
56	161.38	148.37	249.88	231.65	317.56	291.53
57	171.79	161.38	268.09	247.27	335.76	309.74
58	187.40	171.79	283.70	262.90	353.99	322.75
59	203.02	184.81	304.54	281.11	380.03	346.18
60	213.43	195.23	333.16	304.54	406.06	372.20
61	231.65	213.43	356.59	325.38	432.08	398.24
62	252.47	231.65	382.62	353.99	465.90	424.27
63	268.09	244.66	411.25	377.40	494.53	447.70
64	286.32	262.90	437.28	406.06	520.56	476.32
65	304.54	278.51	468.49	432.08	549.20	502.34
66	330.55	301.94	499.75	463.30	585.65	533.58
67	359.18	330.55	541.40	502.34	629.87	575.22
68	400.84	367.00	598.64	551.81	689.75	627.28
69	445.10	408.65	658.52	609.06	754.82	692.36
70	494.53	455.50	733.99	674.15	830.32	760.02
71	557.00	512.77	812.09	747.01	910.99	840.72
72	624.67	572.63	903.18	825.11	1,004.70	929.21
73	700.18	645.50	996.89	910.99	1,108.79	1,020.31
74	780.86	720.97	1,093.20	1,002.07	1,218.14	1,121.81
75	874.55	806.89	1,205.12	1,106.21	1,337.87	1,231.15
76	976.08	897.98	1,327.45	1,218.14	1,468.02	1,345.67
77	1,080.18	994.27	1,460.20	1,343.08	1,605.96	1,473.20
78	1,189.50	1,093.20	1,590.34	1,465.39	1,736.10	1,592.94
79	1,298.82	1,197.30	1,725.70	1,590.34	1,871.45	1,717.86
80	1,415.95	1,301.42	1,874.04	1,728.29	2,017.20	1,853.23
81	1,546.07	1,423.75	2,040.62	1,884.46	2,170.75	1,998.98
82	1,699.64	1,564.31	2,220.22	2,053.63	2,347.76	2,162.95
83	1,871.45	1,723.08	2,425.85	2,243.64	2,548.18	2,347.76
84	2,079.67	1,913.08	2,657.50	2,459.68	2,774.63	2,555.96
85	2,267.08	2,084.88	2,896.96	2,680.91	3,024.50	2,787.64
86	2,472.68	2,274.88	3,157.25	2,923.00	3,295.19	3,037.52
87	2,693.93	2,480.51	3,440.95	3,185.88	3,591.89	3,313.42
88	2,935.99	2,704.34	3,750.67	3,474.78	3,917.27	3,610.14
89	3,198.88	2,949.00	4,089.06	3,787.12	4,271.26	3,932.89
90	3,487.80	3,211.90	4,456.06	4,128.10	4,653.85	4,286.87
91	3,802.74	3,500.81	4,856.89	4,497.70	5,072.92	4,674.70
92	4,146.31	3,815.76	5,291.56	4,901.12	5,531.04	5,093.76
93	4,518.50	4,159.32	5,767.87	5,341.02	6,028.18	5,554.44
94	4,924.56	4,531.54	6,288.47	5,819.93	6,572.17	6,051.60

**Appendix A**

Genworth Life Insurance Company  
Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Individual  
6 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	104.11	98.89	153.58	143.16	216.02	205.61
25-29	111.92	106.72	166.60	153.58	234.25	218.62
30-34	122.33	114.53	182.22	166.60	252.47	236.87
35-39	130.15	124.93	195.23	182.22	273.31	255.08
40-45	143.16	132.74	210.83	195.23	294.12	275.90
46	145.75	135.35	216.02	197.81	299.34	281.11
47	148.37	140.57	218.62	203.02	304.54	283.70
48	150.96	140.57	223.84	208.22	309.74	291.53
49	153.58	143.16	229.04	210.83	312.35	291.53
50	153.58	143.16	231.65	213.43	314.95	294.12
51	156.18	145.75	236.87	218.62	320.16	299.34
52	161.38	148.37	242.05	226.44	330.55	309.74
53	166.60	153.58	255.08	236.87	340.97	317.56
54	174.40	163.97	270.68	252.47	353.99	330.55
55	187.40	174.40	288.91	270.68	367.00	343.56
56	197.81	184.81	304.54	283.70	385.21	359.18
57	210.83	195.23	325.38	304.54	408.65	380.03
58	226.44	210.83	351.37	325.38	432.08	403.43
59	242.05	226.44	377.40	353.99	460.70	426.86
60	260.29	239.46	403.43	377.40	491.93	458.08
61	281.11	257.68	432.08	403.43	525.78	486.73
62	301.94	278.51	463.30	432.08	559.62	523.16
63	322.75	299.34	489.34	460.70	598.64	557.00
64	348.77	322.75	520.56	484.12	637.70	593.44
65	372.20	346.18	549.20	512.77	676.74	629.87
66	403.43	374.81	585.65	546.59	723.58	674.15
67	439.88	406.06	635.09	593.44	778.25	723.58
68	491.93	455.50	707.96	658.52	848.52	791.27
69	544.00	504.95	788.65	733.99	926.62	858.94
70	603.85	562.21	882.35	822.50	1,012.49	939.62
71	676.74	629.87	989.06	918.80	1,108.79	1,028.11
72	762.61	707.96	1,101.00	1,025.51	1,220.74	1,129.63
73	851.11	786.05	1,215.53	1,127.02	1,337.87	1,241.53
74	950.05	879.76	1,340.46	1,241.53	1,473.20	1,366.50
75	1,056.77	976.08	1,475.81	1,371.68	1,616.36	1,501.82
76	1,173.86	1,082.78	1,621.57	1,504.42	1,767.31	1,644.98
77	1,298.82	1,202.52	1,775.14	1,650.19	1,931.29	1,798.56
78	1,418.54	1,311.83	1,933.91	1,798.56	2,082.26	1,944.31
79	1,540.88	1,428.96	2,092.69	1,949.53	2,241.05	2,090.06
80	1,665.80	1,546.07	2,264.48	2,113.50	2,407.63	2,243.64
81	1,814.17	1,686.64	2,451.88	2,290.49	2,584.62	2,412.82
82	1,983.36	1,845.42	2,667.91	2,496.12	2,790.25	2,605.44
83	2,178.56	2,027.60	2,912.57	2,722.56	3,019.28	2,818.86
84	2,412.82	2,243.64	3,193.67	2,988.06	3,282.18	3,068.74
85	2,631.47	2,446.66	3,479.99	3,256.14	3,576.30	3,344.64
86	2,868.34	2,667.91	3,794.94	3,550.27	3,896.44	3,646.58
87	3,126.00	2,909.98	4,135.88	3,870.41	4,247.82	3,974.51
88	3,407.12	3,170.26	4,508.10	4,219.21	4,630.44	4,331.11
89	3,714.24	3,453.95	4,914.16	4,599.20	5,046.90	4,721.56
90	4,050.01	3,766.31	5,359.25	5,010.47	5,499.79	5,145.78
91	4,411.80	4,104.66	5,840.77	5,460.74	5,996.94	5,609.11
92	4,810.03	4,476.89	6,366.52	5,952.67	6,535.72	6,116.68
93	5,242.13	4,880.33	6,939.17	6,488.87	7,123.94	6,668.46
94	5,715.83	5,317.58	7,563.85	7,074.52	7,764.25	7,269.71

Appendix A

Genworth Life Insurance Company  
Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Age	Individual Lifetime Benefit Period					
	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	138.28	129.47	208.92	188.33	282.47	264.82
25-29	147.12	141.23	223.61	205.98	306.00	285.41
30-34	161.83	150.06	241.27	220.69	329.56	308.96
35-39	173.62	164.77	261.86	238.32	356.04	332.48
40-45	188.33	176.54	282.47	258.91	385.44	358.97
46	194.21	182.42	288.35	261.86	391.33	364.85
47	197.14	185.36	291.29	264.82	400.15	373.67
48	197.14	188.33	297.18	270.70	406.03	379.55
49	200.09	191.26	303.06	273.62	408.97	382.48
50	205.98	191.26	306.00	279.52	411.92	385.44
51	208.92	197.14	314.84	288.35	420.74	391.33
52	217.74	205.98	326.60	297.18	432.53	406.03
53	223.61	211.85	341.33	314.84	450.18	420.74
54	235.39	220.69	361.92	335.44	464.89	435.46
55	247.14	232.43	385.44	358.97	488.44	456.05
56	264.82	247.14	411.92	385.44	517.82	482.54
57	285.41	264.82	438.41	411.92	547.26	509.03
58	297.18	279.52	470.77	447.24	579.65	544.32
59	326.60	303.06	503.16	476.68	614.95	573.76
60	344.26	317.77	535.50	509.03	650.26	609.07
61	373.67	344.26	576.68	550.21	694.39	650.26
62	400.15	373.67	614.95	582.59	741.47	694.39
63	432.53	403.10	647.33	614.95	794.45	747.36
64	461.95	429.59	679.66	644.38	847.38	800.32
65	500.20	464.89	715.00	673.80	906.24	859.15
66	541.38	506.10	759.13	712.03	973.91	920.95
67	591.40	556.09	826.79	773.86	1,050.41	991.57
68	656.15	614.95	918.01	865.06	1,138.68	1,073.96
69	726.74	682.61	1,032.77	970.98	1,241.69	1,165.16
70	812.08	759.13	1,168.12	1,097.50	1,350.54	1,259.32
71	903.30	844.44	1,312.27	1,232.83	1,474.10	1,371.13
72	1,009.21	944.51	1,465.30	1,374.08	1,621.24	1,506.48
73	1,129.85	1,053.36	1,624.16	1,521.19	1,774.22	1,650.65
74	1,256.38	1,168.12	1,791.88	1,680.08	1,947.83	1,818.37
75	1,403.47	1,297.56	1,971.37	1,841.89	2,136.12	2,003.71
76	1,553.54	1,441.74	2,165.54	2,024.32	2,339.16	2,200.88
77	1,712.42	1,588.86	2,368.58	2,215.60	2,548.07	2,403.90
78	1,859.56	1,730.09	2,571.60	2,406.83	2,745.19	2,589.24
79	2,009.60	1,877.21	2,777.57	2,603.95	2,948.21	2,780.50
80	2,171.45	2,030.20	2,998.26	2,818.76	3,157.13	2,977.63
81	2,353.87	2,203.81	3,239.51	3,054.13	3,389.57	3,195.38
82	2,562.78	2,403.90	3,519.01	3,321.88	3,651.43	3,442.54
83	2,809.93	2,639.27	3,842.69	3,624.94	3,945.67	3,722.06
84	3,104.17	2,909.96	4,216.37	3,975.10	4,286.99	4,045.74
85	3,386.64	3,171.83	4,595.93	4,334.08	4,672.42	4,410.55
86	3,692.63	3,457.24	5,010.80	4,722.47	5,093.17	4,804.84
87	4,025.11	3,766.19	5,463.91	5,149.09	5,552.18	5,240.29
88	4,387.02	4,107.52	5,955.30	5,613.97	6,052.38	5,711.06
89	4,784.24	4,475.29	6,490.79	6,117.11	6,599.66	6,226.00
90	5,213.82	4,881.34	7,073.36	6,667.33	7,194.00	6,785.03
91	5,684.59	5,319.74	7,708.93	7,267.57	7,838.38	7,394.10
92	6,196.57	5,799.35	8,403.31	7,920.78	8,544.54	8,059.06
93	6,752.66	6,323.08	9,159.49	8,635.74	9,315.44	8,785.80
94	7,361.72	6,890.94	9,983.34	9,412.52	10,153.99	9,577.31

**Appendix A**

Genworth Life Insurance Company  
Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Joint  
3 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	57.28	49.46	80.68	75.49	117.13	106.72
25-29	59.88	57.28	85.87	80.68	124.93	117.13
30-34	62.48	59.88	93.71	85.87	135.35	124.93
35-39	67.66	62.48	104.11	93.71	145.75	135.35
40-45	75.49	67.66	109.31	101.51	156.18	145.75
46	80.68	70.27	111.92	104.11	156.18	148.37
47	83.28	72.86	117.13	106.72	163.97	150.96
48	83.28	72.86	117.13	106.72	163.97	150.96
49	85.87	72.86	117.13	109.31	166.60	153.58
50	85.87	75.49	119.72	109.31	166.60	153.58
51	85.87	78.08	122.33	111.92	169.19	156.18
52	88.50	78.08	124.93	117.13	171.79	161.38
53	93.71	78.08	132.74	122.33	177.00	163.97
54	96.30	83.28	140.57	130.15	184.81	169.19
55	104.11	88.50	150.96	137.94	192.62	174.40
56	106.72	93.71	156.18	145.75	200.40	184.81
57	117.13	101.51	169.19	156.18	210.83	195.23
58	124.93	106.72	182.22	166.60	223.84	203.02
59	137.94	117.13	195.23	177.00	239.46	218.62
60	148.37	124.93	208.22	190.01	257.68	231.65
61	156.18	137.94	223.84	203.02	275.90	249.88
62	171.79	145.75	242.05	218.62	291.53	265.49
63	184.81	158.78	257.68	236.87	312.35	283.70
64	197.81	169.19	278.51	252.47	327.96	296.72
65	210.83	179.60	294.12	270.68	348.77	317.56
66	226.44	192.62	317.56	291.53	369.60	338.35
67	247.27	210.83	343.56	317.56	398.24	361.78
68	273.31	234.25	377.40	346.18	432.08	395.63
69	304.54	260.29	416.46	380.03	473.71	434.69
70	338.35	291.53	458.08	419.06	520.56	476.32
71	380.03	325.38	507.55	465.90	572.63	525.78
72	426.86	367.00	562.21	512.77	632.50	577.85
73	476.32	408.65	622.08	567.43	692.36	637.70
74	530.99	455.50	687.16	627.28	762.61	700.18
75	593.44	507.55	757.43	692.36	840.72	767.83
76	658.52	562.21	832.91	760.02	913.60	840.72
77	733.99	627.28	916.20	838.12	1,002.07	918.80
78	806.89	689.75	996.89	913.60	1,082.78	994.27
79	879.76	754.82	1,080.18	994.27	1,163.48	1,067.16
80	960.46	827.70	1,171.27	1,074.98	1,251.95	1,147.85
81	1,054.14	905.77	1,270.18	1,168.67	1,348.28	1,233.74
82	1,155.65	994.27	1,382.10	1,270.18	1,454.99	1,332.65
83	1,275.38	1,095.80	1,507.03	1,387.30	1,577.33	1,444.58
84	1,413.32	1,215.53	1,650.19	1,522.67	1,712.66	1,569.50
85	1,540.88	1,322.24	1,798.56	1,658.00	1,868.86	1,710.07
86	1,676.22	1,441.98	1,959.95	1,808.96	2,038.01	1,866.24
87	1,827.20	1,572.11	2,136.94	1,970.34	2,220.22	2,035.40
88	1,991.17	1,712.66	2,329.52	2,149.93	2,420.63	2,217.62
89	2,170.75	1,868.86	2,540.36	2,342.56	2,639.28	2,418.02
90	2,365.98	2,038.01	2,766.82	2,553.37	2,876.14	2,634.06
91	2,576.81	2,220.22	3,016.68	2,785.04	3,136.40	2,873.52
92	2,808.44	2,420.63	3,289.99	3,034.92	3,420.13	3,131.22
93	3,060.92	2,639.28	3,584.10	3,308.21	3,727.26	3,412.33
94	3,336.83	2,876.14	3,906.85	3,604.92	4,063.02	3,719.45

**Appendix A**

Genworth Life Insurance Company  
Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Joint  
4 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	62.48	57.28	83.28	80.68	122.33	109.31
25-29	67.66	59.88	88.50	83.28	130.15	119.72
30-34	75.49	65.08	98.89	88.50	143.16	127.54
35-39	80.68	70.27	106.72	96.30	153.58	137.94
40-45	83.28	78.08	117.13	104.11	166.60	148.37
46	83.28	80.68	119.72	106.72	169.19	150.96
47	85.87	80.68	122.33	109.31	171.79	153.58
48	85.87	80.68	124.93	111.92	174.40	158.78
49	88.50	80.68	124.93	111.92	174.40	158.78
50	88.50	80.68	127.54	117.13	179.60	161.38
51	88.50	80.68	130.15	119.72	179.60	161.38
52	91.09	83.28	132.74	122.33	184.81	166.60
53	96.30	85.87	143.16	130.15	190.01	171.79
54	98.89	88.50	150.96	137.94	200.40	179.60
55	106.72	96.30	161.38	145.75	205.61	187.40
56	109.31	98.89	169.19	153.58	213.43	192.62
57	119.72	104.11	184.81	166.60	229.04	205.61
58	127.54	111.92	195.23	179.60	242.05	221.24
59	140.57	124.93	208.22	187.40	255.08	231.65
60	150.96	137.94	226.44	203.02	273.31	247.27
61	163.97	148.37	239.46	216.02	294.12	268.09
62	182.22	163.97	255.08	231.65	312.35	283.70
63	192.62	177.00	275.90	247.27	333.16	304.54
64	205.61	187.40	299.34	268.09	351.37	320.16
65	218.62	200.40	320.16	286.32	377.40	340.97
66	236.87	218.62	346.18	312.35	398.24	361.78
67	255.08	234.25	372.20	335.76	429.47	393.04
68	283.70	257.68	406.06	367.00	468.49	424.27
69	314.95	286.32	447.70	403.43	512.77	463.30
70	353.99	322.75	486.73	442.49	559.62	502.34
71	393.04	361.78	536.18	484.12	611.65	557.00
72	439.88	400.84	590.83	538.79	674.15	606.46
73	489.34	447.70	655.92	596.05	736.58	668.93
74	544.00	494.53	728.80	661.13	809.48	736.58
75	603.85	546.59	809.48	731.39	882.35	806.89
76	668.93	603.85	890.17	809.48	970.86	884.96
77	744.40	674.15	978.67	887.56	1,051.55	963.06
78	819.90	741.80	1,059.36	963.06	1,134.83	1,038.53
79	897.98	817.31	1,145.23	1,041.13	1,215.53	1,106.21
80	986.46	900.59	1,231.15	1,121.81	1,304.02	1,184.29
81	1,080.18	991.68	1,330.04	1,207.72	1,397.72	1,267.57
82	1,189.50	1,093.20	1,441.98	1,311.83	1,507.03	1,361.30
83	1,309.24	1,199.92	1,566.91	1,428.96	1,624.18	1,468.02
84	1,444.58	1,327.45	1,717.86	1,564.31	1,762.13	1,598.14
85	1,574.72	1,447.18	1,874.04	1,702.26	1,923.50	1,738.70
86	1,717.86	1,577.33	2,043.23	1,855.82	2,095.28	1,894.86
87	1,874.04	1,720.49	2,228.04	2,022.40	2,285.28	2,064.04
88	2,043.23	1,876.64	2,431.03	2,204.60	2,488.31	2,251.48
89	2,228.04	2,045.82	2,647.09	2,405.03	2,712.14	2,454.47
90	2,431.03	2,230.63	2,883.94	2,623.67	2,956.81	2,673.10
91	2,647.09	2,433.65	3,144.23	2,857.91	3,224.90	2,915.20
92	2,883.94	2,649.70	3,430.55	3,118.19	3,513.84	3,178.06
93	3,144.23	2,889.16	3,737.66	3,396.71	3,828.77	3,464.36
94	3,430.55	3,146.83	4,073.45	3,701.24	4,172.35	3,774.11

**Appendix A**

Genworth Life Insurance Company  
Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Joint  
6 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	72.86	65.08	104.11	96.30	150.96	137.94
25-29	78.08	72.86	114.53	104.11	158.78	150.96
30-34	83.28	78.08	119.72	114.53	174.40	158.78
35-39	85.87	83.28	132.74	119.72	187.40	174.40
40-45	96.30	85.87	143.16	132.74	200.40	187.40
46	98.89	91.09	145.75	135.35	203.02	190.01
47	101.51	93.71	150.96	137.94	210.83	192.62
48	104.11	93.71	150.96	137.94	213.43	195.23
49	104.11	93.71	150.96	140.57	216.02	197.81
50	106.72	96.30	153.58	143.16	216.02	197.81
51	106.72	96.30	156.18	145.75	218.62	200.40
52	109.31	98.89	161.38	150.96	221.24	208.22
53	119.72	101.51	171.79	156.18	229.04	213.43
54	124.93	106.72	182.22	169.19	236.87	218.62
55	124.93	114.53	192.62	177.00	249.88	223.84
56	132.74	119.72	203.02	187.40	257.68	236.87
57	143.16	130.15	218.62	200.40	273.31	252.47
58	161.38	137.94	234.25	216.02	288.91	260.29
59	169.19	150.96	252.47	229.04	309.74	281.11
60	177.00	161.38	268.09	244.66	330.55	299.34
61	192.62	177.00	288.91	260.29	353.99	320.16
62	218.62	187.40	312.35	283.70	374.81	340.97
63	223.84	205.61	330.55	304.54	400.84	364.39
64	236.87	218.62	356.59	325.38	421.67	385.21
65	252.47	231.65	380.03	348.77	450.30	411.25
66	273.31	249.88	411.25	377.40	476.32	434.69
67	296.72	273.31	445.10	408.65	512.77	465.90
68	330.55	301.94	486.73	447.70	557.00	510.14
69	369.60	335.76	536.18	489.34	611.65	559.62
70	411.25	377.40	588.23	541.40	671.53	614.27
71	463.30	419.06	653.30	598.64	739.21	676.74
72	517.97	473.71	723.58	661.13	814.68	747.01
73	580.44	525.78	801.67	731.39	892.76	822.50
74	648.11	588.23	884.96	809.48	983.86	903.18
75	723.58	653.30	976.08	890.17	1,082.78	989.06
76	809.48	723.58	1,072.37	981.26	1,179.08	1,082.78
77	895.37	809.48	1,181.70	1,080.18	1,291.01	1,184.29
78	986.46	890.17	1,285.80	1,179.08	1,395.11	1,280.58
79	1,074.98	973.46	1,392.52	1,280.58	1,499.23	1,376.89
80	1,171.27	1,064.56	1,509.64	1,387.30	1,613.77	1,478.41
81	1,280.58	1,166.08	1,637.17	1,507.03	1,736.10	1,592.94
82	1,408.13	1,283.21	1,780.34	1,637.17	1,874.04	1,717.86
83	1,551.29	1,413.32	1,941.72	1,788.14	2,030.20	1,861.03
84	1,723.08	1,564.31	2,129.12	1,962.54	2,207.20	2,024.99
85	1,879.26	1,704.85	2,319.13	2,136.94	2,407.63	2,204.60
86	2,048.41	1,861.03	2,527.36	2,332.14	2,626.26	2,405.03
87	2,233.22	2,027.60	2,753.80	2,540.36	2,863.13	2,623.67
88	2,433.65	2,207.20	3,003.67	2,769.42	3,120.80	2,860.50
89	2,649.70	2,407.63	3,271.76	3,019.28	3,401.90	3,115.60
90	2,889.16	2,626.26	3,568.50	3,292.60	3,706.44	3,396.71
91	3,149.44	2,863.13	3,888.64	3,589.30	4,042.20	3,703.84
92	3,435.76	3,120.80	4,240.01	3,909.46	4,409.20	4,036.99
93	3,742.87	3,401.90	4,620.05	4,263.44	4,804.82	4,398.78
94	4,081.24	3,706.44	5,036.47	4,646.06	5,236.91	4,794.42

**Appendix A**

Genworth Life Insurance Company  
Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Joint  
8 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	75.49	70.27	114.53	106.72	161.38	150.96
25-29	80.68	75.49	122.33	114.53	171.79	163.97
30-34	88.50	80.68	132.74	124.93	187.40	177.00
35-39	96.30	85.87	143.16	132.74	203.02	187.40
40-45	104.11	93.71	150.96	145.75	218.62	203.02
46	104.11	93.71	153.58	148.37	221.24	205.61
47	106.72	96.30	158.78	150.96	223.84	210.83
48	109.31	96.30	161.38	150.96	226.44	216.02
49	109.31	96.30	163.97	150.96	226.44	216.02
50	111.92	98.89	166.60	153.58	229.04	218.62
51	111.92	98.89	169.19	158.78	236.87	221.24
52	114.53	106.72	177.00	166.60	239.46	221.24
53	122.33	111.92	184.81	169.19	244.66	229.04
54	127.54	114.53	190.01	179.60	257.68	239.46
55	132.74	124.93	203.02	187.40	262.90	242.05
56	140.57	130.15	218.62	203.02	275.90	255.08
57	150.96	140.57	234.25	216.02	291.53	270.68
58	163.97	150.96	247.27	229.04	309.74	281.11
59	177.00	161.38	265.49	244.66	330.55	301.94
60	187.40	169.19	291.53	265.49	353.99	325.38
61	203.02	187.40	309.74	283.70	377.40	346.18
62	221.24	203.02	333.16	309.74	406.06	369.60
63	234.25	213.43	359.18	327.96	432.08	390.42
64	249.88	229.04	380.03	353.99	452.90	416.46
65	265.49	242.05	408.65	377.40	478.92	437.28
66	288.91	262.90	434.69	403.43	510.14	465.90
67	312.35	288.91	471.11	437.28	549.20	502.34
68	348.77	320.16	523.16	481.51	601.24	546.59
69	387.82	356.59	575.22	530.99	658.52	603.85
70	432.08	398.24	640.30	588.23	723.58	663.72
71	486.73	447.70	707.96	650.71	793.87	733.99
72	544.00	499.75	788.65	718.37	877.15	809.48
73	611.65	562.21	869.33	793.87	965.66	890.17
74	681.94	629.87	952.64	874.55	1,061.96	978.67
75	762.61	702.78	1,051.55	965.66	1,166.08	1,072.37
76	851.11	783.46	1,158.26	1,061.96	1,280.58	1,173.86
77	942.24	866.74	1,272.79	1,171.27	1,400.32	1,285.80
78	1,038.53	952.64	1,387.30	1,277.99	1,514.84	1,389.91
79	1,132.22	1,043.75	1,504.42	1,387.30	1,631.98	1,499.23
80	1,233.74	1,134.83	1,634.57	1,507.03	1,759.50	1,616.36
81	1,348.28	1,241.53	1,780.34	1,642.39	1,892.24	1,743.91
82	1,481.03	1,363.90	1,936.51	1,790.75	2,048.41	1,887.07
83	1,631.98	1,501.82	2,116.10	1,957.32	2,222.82	2,048.41
84	1,814.17	1,668.42	2,316.50	2,144.76	2,420.63	2,228.04
85	1,978.16	1,816.79	2,527.36	2,337.35	2,636.69	2,431.03
86	2,155.13	1,983.36	2,753.80	2,548.18	2,873.52	2,649.70
87	2,350.36	2,162.95	3,001.07	2,777.22	3,131.22	2,889.16
88	2,561.18	2,358.17	3,271.76	3,029.71	3,414.92	3,146.83
89	2,790.25	2,571.60	3,565.90	3,303.00	3,724.64	3,430.55
90	3,040.12	2,800.64	3,886.04	3,599.71	4,057.84	3,737.66
91	3,316.03	3,053.14	4,234.81	3,922.48	4,424.82	4,076.05
92	3,615.32	3,326.41	4,614.84	4,273.86	4,823.04	4,443.05
93	3,940.70	3,625.74	5,028.68	4,656.48	5,257.73	4,843.88
94	4,294.67	3,951.12	5,484.18	5,075.53	5,731.44	5,275.93

**Appendix A**

Genworth Life Insurance Company  
Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Joint  
12 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	91.09	85.87	132.74	124.93	187.40	177.00
25-29	96.30	91.09	143.16	132.74	203.02	190.01
30-34	106.72	98.89	156.18	143.16	218.62	205.61
35-39	111.92	106.72	169.19	156.18	236.87	221.24
40-45	124.93	114.53	182.22	169.19	255.08	239.46
46	124.93	117.13	187.40	171.79	257.68	242.05
47	127.54	122.33	190.01	174.40	262.90	244.66
48	130.15	122.33	192.62	179.60	268.09	252.47
49	132.74	124.93	197.81	182.22	270.68	252.47
50	132.74	124.93	200.40	184.81	273.31	255.08
51	135.35	124.93	205.61	190.01	275.90	257.68
52	140.57	127.54	208.22	195.23	286.32	268.09
53	143.16	132.74	221.24	205.61	294.12	273.31
54	150.96	140.57	234.25	218.62	307.13	286.32
55	161.38	150.96	249.88	234.25	317.56	296.72
56	171.79	158.78	262.90	244.66	333.16	309.74
57	182.22	169.19	281.11	262.90	353.99	327.96
58	195.23	182.22	304.54	281.11	372.20	348.77
59	208.22	195.23	325.38	307.13	398.24	369.60
60	223.84	205.61	348.77	325.38	424.27	395.63
61	242.05	223.84	372.20	348.77	455.50	421.67
62	260.29	239.46	400.84	372.20	484.12	452.90
63	278.51	257.68	421.67	398.24	517.97	481.51
64	301.94	278.51	450.30	419.06	551.81	512.77
65	322.75	299.34	473.71	442.49	585.65	544.00
66	348.77	322.75	504.95	471.11	624.67	583.06
67	380.03	351.37	549.20	512.77	671.53	624.67
68	424.27	393.04	611.65	570.02	733.99	684.56
69	471.11	437.28	681.94	635.09	801.67	741.80
70	520.56	486.73	762.61	710.59	874.55	812.09
71	585.65	544.00	853.73	793.87	957.84	887.56
72	658.52	611.65	950.05	884.96	1,054.14	976.08
73	736.58	679.34	1,048.94	973.46	1,155.65	1,072.37
74	819.90	760.02	1,158.26	1,072.37	1,272.79	1,181.70
75	913.60	843.34	1,275.38	1,184.29	1,397.72	1,298.82
76	1,015.10	934.42	1,400.32	1,298.82	1,527.85	1,421.15
77	1,121.81	1,038.53	1,533.06	1,426.34	1,668.42	1,553.89
78	1,225.93	1,132.22	1,671.01	1,553.89	1,798.56	1,678.82
79	1,330.04	1,233.74	1,808.96	1,684.04	1,936.51	1,806.36
80	1,439.36	1,335.26	1,957.32	1,827.20	2,079.67	1,939.10
81	1,566.91	1,457.59	2,118.72	1,978.16	2,233.22	2,084.88
82	1,712.66	1,595.54	2,306.12	2,157.74	2,410.21	2,251.48
83	1,881.86	1,751.71	2,516.95	2,352.96	2,608.03	2,436.24
84	2,084.88	1,939.10	2,759.00	2,582.00	2,837.09	2,652.30
85	2,274.88	2,113.50	3,006.28	2,813.65	3,089.57	2,889.16
86	2,477.90	2,306.12	3,279.58	3,066.14	3,365.46	3,149.44
87	2,701.74	2,514.34	3,573.71	3,344.64	3,670.00	3,433.15
88	2,943.80	2,738.18	3,893.83	3,646.58	4,000.55	3,742.87
89	3,209.30	2,985.46	4,245.23	3,974.51	4,359.76	4,078.64
90	3,498.20	3,253.55	4,630.44	4,328.52	4,752.78	4,445.64
91	3,810.55	3,547.67	5,046.90	4,718.94	5,182.24	4,846.48
92	4,156.73	3,867.80	5,499.79	5,143.19	5,648.15	5,283.74
93	4,528.92	4,216.61	5,994.32	5,606.50	6,155.71	5,762.69
94	4,937.58	4,594.01	6,535.72	6,111.46	6,707.50	6,280.64

Appendix A

Genworth Life Insurance Company  
Current-Year Premiums

Form 7032 et al  
Annual Premiums per \$10 Daily Benefit

2 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	20 EP	100 EP	20 EP	100 EP	20 EP	100 EP
18-24	31.22	23.44	52.07	39.06	67.66	49.46
25-29	36.44	26.03	59.88	44.24	75.49	54.66
30-34	41.65	31.22	70.27	52.07	88.50	62.48
35-39	49.46	33.85	78.08	59.88	98.89	72.86
40-45	54.66	39.06	91.09	70.27	114.53	83.28
46	54.66	41.65	96.30	75.49	117.13	91.09
47	57.28	41.65	98.89	75.49	124.93	93.71
48	57.28	41.65	98.89	75.49	124.93	93.71
49	57.28	41.65	98.89	75.49	127.54	96.30
50	59.88	44.24	101.51	78.08	130.15	106.72
51	59.88	44.24	109.31	80.68	132.74	109.31
52	67.66	52.07	111.92	83.28	143.16	111.92
53	70.27	54.66	114.53	88.50	145.75	114.53
54	70.27	54.66	117.13	91.09	150.96	114.53
55	75.49	59.88	127.54	96.30	163.97	127.54
56	83.28	62.48	137.94	101.51	182.22	132.74
57	91.09	72.86	148.37	114.53	190.01	148.37
58	101.51	78.08	158.78	124.93	205.61	158.78
59	111.92	83.28	177.00	137.94	223.84	171.79
60	127.54	93.71	200.40	150.96	249.88	190.01
61	135.35	106.72	213.43	163.97	268.09	210.83
62	150.96	117.13	242.05	187.40	304.54	234.25
63	171.79	127.54	265.49	195.23	335.76	247.27
64	195.23	143.16	301.94	223.84	380.03	281.11
65	210.83	156.18	322.75	239.46	411.25	301.94
66	234.25	171.79	356.59	260.29	447.70	325.38
67	257.68	187.40	380.03	275.90	478.92	343.56
68	281.11	208.22	416.46	307.13	520.56	380.03
69	307.13	226.44	447.70	325.38	562.21	408.65
70	333.16	247.27	478.92	359.18	596.05	445.10
71	364.39	270.68	523.16	382.62	642.89	473.71
72	395.63	294.12	564.84	416.46	684.56	504.95
73	432.08	322.75	601.24	452.90	723.58	544.00
74	473.71	356.59	655.92	491.93	775.64	580.44
75	523.16	382.62	720.97	530.99	832.91	616.86
76	577.85	426.86	786.05	580.44	903.18	663.72
77	640.30	476.32	864.13	642.89	968.27	723.58
78	702.78	525.78	939.62	700.18	1,043.75	778.25
79	770.44	572.63	1,020.31	757.43	1,114.01	843.34
80	843.34	624.67	1,095.80	814.68	1,192.10	903.18
81	921.40	684.56	1,186.88	882.35	1,285.80	976.08
82	1,002.07	747.01	1,270.18	947.42	1,379.51	1,051.55
83	1,095.80	814.68	1,376.89	1,022.92	1,486.24	1,129.63
84	1,192.10	890.17	1,478.41	1,106.21	1,600.76	1,212.92
85	1,251.95	934.42	1,553.89	1,160.86	1,681.43	1,275.38
86	1,314.43	981.26	1,631.98	1,218.14	1,764.72	1,337.87
87	1,379.51	1,030.73	1,712.66	1,277.99	1,853.23	1,405.54
88	1,449.77	1,082.78	1,798.56	1,343.08	1,944.31	1,475.81
89	1,522.67	1,137.43	1,887.07	1,410.73	2,043.23	1,548.70
90	1,598.14	1,194.71	1,983.36	1,481.03	2,144.76	1,626.78
91	1,678.82	1,254.56	2,082.26	1,553.89	2,251.48	1,707.48
92	1,762.13	1,317.04	2,186.39	1,631.98	2,363.38	1,793.35
93	1,850.60	1,382.10	2,295.70	1,715.27	2,483.10	1,881.86
94	1,941.72	1,449.77	2,410.21	1,801.16	2,605.44	1,978.16

## Appendix A

Genworth Life Insurance Company  
Current-Year PremiumsForm 7032 et al  
Annual Premiums per \$10 Daily Benefit

## 3 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	20 EP	100 EP	20 EP	100 EP	20 EP	100 EP
18-24	33.85	26.03	59.88	44.24	75.49	54.66
25-29	39.06	31.22	70.27	52.07	88.50	62.48
30-34	44.24	33.85	80.68	59.88	98.89	72.86
35-39	52.07	39.06	93.71	70.27	114.53	83.28
40-45	59.88	44.24	109.31	78.08	132.74	96.30
46	67.66	49.46	111.92	80.68	143.16	106.72
47	67.66	49.46	114.53	88.50	145.75	109.31
48	70.27	49.46	117.13	88.50	150.96	109.31
49	70.27	52.07	117.13	91.09	150.96	111.92
50	72.86	52.07	124.93	91.09	153.58	111.92
51	75.49	57.28	127.54	93.71	158.78	124.93
52	75.49	57.28	130.15	96.30	166.60	127.54
53	83.28	59.88	135.35	98.89	174.40	132.74
54	88.50	59.88	143.16	106.72	177.00	132.74
55	91.09	67.66	150.96	111.92	192.62	143.16
56	98.89	72.86	163.97	124.93	208.22	153.58
57	109.31	80.68	171.79	130.15	223.84	169.19
58	117.13	88.50	192.62	143.16	244.66	182.22
59	132.74	96.30	208.22	156.18	268.09	195.23
60	145.75	111.92	226.44	174.40	288.91	221.24
61	158.78	127.54	252.47	200.40	317.56	242.05
62	174.40	135.35	275.90	210.83	346.18	265.49
63	200.40	156.18	314.95	247.27	395.63	307.13
64	221.24	169.19	343.56	262.90	434.69	333.16
65	242.05	192.62	374.81	296.72	468.49	372.20
66	262.90	205.61	395.63	307.13	494.53	385.21
67	288.91	223.84	432.08	333.16	544.00	419.06
68	322.75	252.47	473.71	374.81	590.83	471.11
69	359.18	278.51	523.16	403.43	648.11	504.95
70	393.04	304.54	572.63	439.88	710.59	546.59
71	429.47	327.96	616.86	473.71	754.82	583.06
72	476.32	372.20	679.34	525.78	822.50	635.09
73	530.99	416.46	747.01	583.06	897.98	700.18
74	583.06	452.90	809.48	635.09	955.25	747.01
75	645.50	497.14	892.76	687.16	1,033.33	799.08
76	715.79	549.20	973.46	749.60	1,116.61	856.32
77	806.89	627.28	1,090.58	845.94	1,228.56	955.25
78	900.59	697.57	1,194.71	926.62	1,332.65	1,030.73
79	968.27	757.43	1,280.58	1,002.07	1,410.73	1,101.00
80	1,051.55	814.68	1,363.90	1,059.36	1,504.42	1,168.67
81	1,129.63	879.76	1,457.59	1,134.83	1,600.76	1,246.75
82	1,215.53	944.83	1,551.29	1,210.32	1,710.07	1,327.45
83	1,296.22	1,007.29	1,642.39	1,280.58	1,803.77	1,402.93
84	1,371.68	1,061.96	1,728.29	1,343.08	1,889.65	1,473.20
85	1,439.36	1,116.61	1,814.17	1,410.73	1,983.36	1,546.07
86	1,512.24	1,171.27	1,905.25	1,481.03	2,084.88	1,624.18
87	1,587.74	1,231.15	1,998.98	1,556.48	2,188.98	1,704.85
88	1,665.80	1,291.01	2,100.48	1,631.98	2,298.29	1,790.75
89	1,749.12	1,356.08	2,204.60	1,715.27	2,412.82	1,879.26
90	1,837.60	1,423.75	2,313.91	1,801.16	2,532.58	1,975.55
91	1,928.69	1,496.64	2,431.03	1,889.65	2,660.10	2,074.45
92	2,024.99	1,569.50	2,550.77	1,985.98	2,792.84	2,175.97
93	2,126.52	1,647.59	2,678.32	2,084.88	2,933.39	2,285.28
94	2,233.22	1,730.88	2,813.65	2,188.98	3,079.15	2,399.82

**Appendix A**

Genworth Life Insurance Company  
Current-Year Premiums

Form 7032 et al  
Annual Premiums per \$10 Daily Benefit

4 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	20 EP	100 EP	20 EP	100 EP	20 EP	100 EP
18-24	39.06	31.22	70.27	52.07	88.50	62.48
25-29	44.24	33.85	80.68	59.88	98.89	72.86
30-34	52.07	39.06	93.71	70.27	114.53	83.28
35-39	59.88	44.24	109.31	78.08	132.74	96.30
40-45	70.27	52.07	124.93	91.09	153.58	111.92
46	72.86	54.66	127.54	93.71	158.78	117.13
47	75.49	54.66	130.15	93.71	166.60	119.72
48	75.49	54.66	130.15	96.30	166.60	119.72
49	75.49	57.28	132.74	101.51	169.19	124.93
50	80.68	57.28	137.94	101.51	171.79	124.93
51	83.28	62.48	143.16	109.31	187.40	135.35
52	88.50	62.48	145.75	109.31	192.62	137.94
53	91.09	67.66	150.96	111.92	192.62	143.16
54	96.30	70.27	156.18	114.53	200.40	148.37
55	101.51	75.49	169.19	124.93	221.24	158.78
56	111.92	83.28	184.81	135.35	231.65	174.40
57	119.72	91.09	192.62	148.37	247.27	187.40
58	132.74	98.89	213.43	156.18	268.09	200.40
59	145.75	106.72	231.65	169.19	296.72	213.43
60	163.97	124.93	252.47	195.23	320.16	244.66
61	177.00	143.16	283.70	223.84	356.59	281.11
62	200.40	150.96	314.95	239.46	385.21	309.74
63	221.24	174.40	343.56	270.68	434.69	343.56
64	244.66	187.40	380.03	294.12	484.12	372.20
65	270.68	218.62	416.46	327.96	523.16	416.46
66	288.91	226.44	439.88	346.18	554.41	434.69
67	322.75	249.88	478.92	372.20	603.85	465.90
68	356.59	281.11	525.78	413.84	655.92	520.56
69	395.63	307.13	580.44	450.30	723.58	562.21
70	437.28	338.35	637.70	491.93	791.27	611.65
71	478.92	372.20	687.16	530.99	848.52	655.92
72	530.99	411.25	752.22	583.06	910.99	705.37
73	588.23	458.08	822.50	645.50	983.86	773.04
74	645.50	507.55	900.59	705.37	1,061.96	832.91
75	720.97	559.62	996.89	770.44	1,153.06	890.17
76	804.29	619.49	1,090.58	843.34	1,257.17	965.66
77	897.98	697.57	1,210.32	942.24	1,363.90	1,059.36
78	994.27	770.44	1,322.24	1,022.92	1,470.61	1,140.05
79	1,077.58	848.52	1,426.34	1,116.61	1,561.70	1,220.74
80	1,176.49	924.02	1,533.06	1,199.92	1,668.42	1,301.42
81	1,285.80	1,002.07	1,663.20	1,291.01	1,790.75	1,384.69
82	1,397.72	1,093.20	1,775.14	1,384.69	1,913.08	1,483.62
83	1,530.46	1,189.50	1,926.10	1,501.82	2,056.24	1,587.74
84	1,658.00	1,288.39	2,058.84	1,598.14	2,194.19	1,697.05
85	1,741.30	1,353.48	2,162.95	1,676.22	2,303.50	1,782.94
86	1,827.20	1,421.15	2,269.69	1,762.13	2,420.63	1,871.45
87	1,918.28	1,491.42	2,384.21	1,848.01	2,540.36	1,965.14
88	2,014.61	1,566.91	2,503.94	1,941.72	2,667.91	2,061.44
89	2,116.10	1,644.98	2,628.88	2,038.01	2,800.64	2,165.56
90	2,220.22	1,728.29	2,759.00	2,139.54	2,941.20	2,274.88
91	2,332.14	1,814.17	2,896.96	2,246.26	3,089.57	2,386.81
92	2,449.25	1,905.25	3,042.72	2,360.78	3,243.12	2,506.54
93	2,571.60	1,998.98	3,193.67	2,477.90	3,404.50	2,631.47
94	2,699.12	2,100.48	3,355.06	2,602.84	3,576.30	2,764.21

## Appendix A

Genworth Life Insurance Company  
Current-Year PremiumsForm 7032 et al  
Annual Premiums per \$10 Daily Benefit

## 6 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	20 EP	100 EP	20 EP	100 EP	20 EP	100 EP
18-24	49.46	36.44	88.50	67.66	111.92	80.68
25-29	54.66	41.65	98.89	75.49	130.15	93.71
30-34	62.48	49.46	114.53	88.50	148.37	109.31
35-39	72.86	54.66	132.74	98.89	169.19	124.93
40-45	83.28	62.48	153.58	114.53	192.62	143.16
46	91.09	70.27	158.78	119.72	203.02	150.96
47	91.09	70.27	163.97	119.72	205.61	150.96
48	93.71	70.27	166.60	124.93	208.22	153.58
49	93.71	72.86	166.60	127.54	210.83	156.18
50	98.89	72.86	171.79	127.54	213.43	158.78
51	101.51	75.49	177.00	135.35	226.44	169.19
52	109.31	78.08	184.81	137.94	234.25	174.40
53	111.92	80.68	190.01	143.16	242.05	182.22
54	117.13	88.50	200.40	148.37	252.47	190.01
55	130.15	96.30	213.43	163.97	278.51	208.22
56	137.94	106.72	234.25	177.00	299.34	229.04
57	150.96	114.53	249.88	192.62	320.16	244.66
58	166.60	127.54	275.90	205.61	346.18	265.49
59	184.81	135.35	299.34	223.84	380.03	283.70
60	205.61	156.18	325.38	257.68	413.84	322.75
61	223.84	182.22	364.39	296.72	458.08	369.60
62	249.88	192.62	408.65	309.74	502.34	411.25
63	278.51	223.84	447.70	359.18	564.84	452.90
64	309.74	242.05	494.53	385.21	627.28	489.34
65	343.56	278.51	541.40	434.69	679.34	549.20
66	372.20	294.12	572.63	458.08	723.58	577.85
67	411.25	322.75	627.28	494.53	788.65	619.49
68	450.30	364.39	684.56	551.81	853.73	687.16
69	504.95	395.63	757.43	598.64	944.83	741.80
70	559.62	437.28	832.91	655.92	1,033.33	812.09
71	609.06	478.92	900.59	705.37	1,106.21	869.33
72	674.15	528.37	981.26	775.64	1,189.50	939.62
73	747.01	590.83	1,074.98	856.32	1,285.80	1,025.51
74	822.50	655.92	1,173.86	937.03	1,384.69	1,106.21
75	910.99	718.37	1,298.82	1,020.31	1,504.42	1,184.29
76	1,017.71	796.46	1,426.34	1,116.61	1,637.17	1,283.21
77	1,134.83	900.59	1,579.92	1,249.36	1,777.73	1,408.13
78	1,259.77	989.06	1,723.08	1,358.68	1,918.28	1,514.84
79	1,366.50	1,090.58	1,861.03	1,483.62	2,032.81	1,618.98
80	1,494.05	1,189.50	2,001.59	1,592.94	2,165.56	1,720.49
81	1,629.37	1,291.01	2,170.75	1,715.27	2,313.91	1,827.20
82	1,772.51	1,408.13	2,319.13	1,837.60	2,467.50	1,949.53
83	1,941.72	1,533.06	2,514.34	1,988.58	2,644.48	2,087.47
84	2,100.48	1,658.00	2,686.12	2,118.72	2,818.86	2,222.82
85	2,207.20	1,741.30	2,821.46	2,225.42	2,962.02	2,332.14
86	2,316.50	1,827.20	2,962.02	2,337.35	3,107.78	2,449.25
87	2,433.65	1,918.28	3,110.39	2,454.47	3,263.96	2,571.60
88	2,553.37	2,014.61	3,266.56	2,576.81	3,427.93	2,701.74
89	2,680.91	2,116.10	3,430.55	2,704.34	3,599.71	2,837.09
90	2,816.27	2,220.22	3,602.32	2,839.69	3,779.33	2,977.64
91	2,956.81	2,332.14	3,781.92	2,982.85	3,969.34	3,126.00
92	3,105.18	2,449.25	3,969.34	3,131.22	4,167.14	3,282.18
93	3,258.74	2,571.60	4,169.74	3,287.40	4,375.34	3,446.16
94	3,422.74	2,699.12	4,377.97	3,451.36	4,594.01	3,620.54

Appendix A

Genworth Life Insurance Company  
Current-Year Premiums

Form 7032 et al  
Annual Premiums per \$10 Daily Benefit

Lifetime Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	20 EP	100 EP	20 EP	100 EP	20 EP	100 EP
18-24	61.79	47.08	114.76	88.26	147.12	108.85
25-29	70.63	55.91	132.41	102.97	170.65	126.52
30-34	82.37	61.79	153.00	114.76	194.21	147.12
35-39	94.15	70.63	176.54	132.41	226.55	167.71
40-45	108.85	82.37	205.98	153.00	258.91	191.26
46	120.64	91.20	214.80	164.77	273.62	205.98
47	120.64	91.20	217.74	164.77	276.58	205.98
48	123.56	91.20	226.55	167.71	282.47	211.85
49	123.56	94.15	226.55	170.65	285.41	214.80
50	129.47	94.15	229.49	170.65	291.29	217.74
51	132.41	100.04	238.32	179.50	300.11	229.49
52	144.18	105.92	250.10	188.33	314.84	238.32
53	147.12	108.85	255.98	194.21	326.60	247.14
54	155.94	120.64	270.70	200.09	344.26	258.91
55	173.62	129.47	294.25	226.55	379.55	285.41
56	185.36	144.18	320.70	247.14	408.97	320.70
57	200.09	155.94	344.26	264.82	444.30	341.33
58	226.55	173.62	379.55	285.41	482.54	370.74
59	250.10	188.33	411.92	314.84	526.67	400.15
60	276.58	214.80	450.18	356.04	573.76	450.18
61	303.06	247.14	506.10	411.92	635.54	514.91
62	341.33	261.86	561.97	432.53	691.44	573.76
63	379.55	306.00	620.83	503.16	785.60	635.54
64	423.70	332.48	688.51	541.38	870.94	685.56
65	467.83	382.48	750.30	612.02	944.51	770.89
66	509.03	403.10	797.38	641.44	1,009.21	809.16
67	559.04	444.30	873.86	697.32	1,094.56	870.94
68	614.95	506.10	953.33	776.78	1,191.64	968.02
69	691.44	547.26	1,059.25	838.56	1,318.16	1,044.54
70	765.01	606.12	1,159.27	920.95	1,435.86	1,144.56
71	835.63	662.03	1,256.38	994.50	1,538.87	1,224.02
72	918.01	729.71	1,368.18	1,091.63	1,659.49	1,324.06
73	1,020.98	817.96	1,497.66	1,203.42	1,794.84	1,447.62
74	1,123.97	903.30	1,638.88	1,318.16	1,933.12	1,556.50
75	1,244.62	988.62	1,809.55	1,435.86	2,094.96	1,668.31
76	1,391.74	1,103.39	1,989.00	1,574.15	2,280.31	1,806.59
77	1,553.54	1,241.69	2,200.88	1,762.45	2,477.44	1,983.13
78	1,721.27	1,368.18	2,403.90	1,915.46	2,671.64	2,133.20
79	1,871.33	1,506.48	2,595.14	2,086.13	2,830.55	2,280.31
80	2,044.91	1,641.83	2,792.28	2,245.01	3,004.13	2,415.66
81	2,233.24	1,786.00	3,024.70	2,415.66	3,204.19	2,562.78
82	2,424.50	1,941.94	3,236.58	2,589.24	3,410.16	2,730.48
83	2,653.99	2,118.48	3,507.28	2,801.10	3,654.36	2,921.74
84	2,877.61	2,289.11	3,748.56	2,983.54	3,895.67	3,107.11
85	3,021.77	2,403.90	3,933.90	3,133.61	4,089.84	3,260.10
86	3,171.83	2,524.51	4,131.04	3,289.54	4,292.87	3,424.88
87	3,330.72	2,651.05	4,337.02	3,454.31	4,507.66	3,595.55
88	3,498.42	2,783.45	4,554.73	3,624.94	4,734.22	3,775.00
89	3,672.04	2,921.74	4,784.24	3,807.38	4,969.60	3,963.32
90	3,854.46	3,068.84	5,022.58	3,998.63	5,219.71	4,163.41
91	4,048.66	3,221.87	5,272.66	4,198.70	5,478.62	4,369.36
92	4,251.67	3,383.68	5,537.47	4,407.62	5,755.20	4,590.05
93	4,463.52	3,551.40	5,814.05	4,628.30	6,040.60	4,819.55
94	4,687.13	3,730.90	6,105.36	4,857.80	6,343.68	5,057.88

**Appendix B**

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Individual  
2 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	80.60	73.89	110.77	104.08	161.16	144.38
25-29	87.28	77.25	117.51	110.77	171.23	157.81
30-34	97.38	83.95	130.95	117.51	188.02	167.89
35-39	104.08	90.65	141.01	127.57	201.47	181.34
40-45	110.77	100.72	154.44	137.67	218.26	194.74
46	110.77	104.08	157.81	141.01	221.61	198.12
47	114.17	104.08	161.16	144.38	224.98	201.47
48	114.17	104.08	164.53	147.74	228.33	208.18
49	117.51	107.43	164.53	147.74	228.33	208.18
50	117.51	107.43	167.89	154.44	235.06	211.52
51	117.51	107.43	171.23	157.81	235.06	211.52
52	120.89	110.77	174.60	161.16	241.75	218.26
53	127.57	114.17	188.02	171.23	248.48	224.98
54	130.95	117.51	198.12	181.34	261.90	235.06
55	141.01	127.57	211.52	191.40	268.60	245.11
56	144.38	130.95	221.61	201.47	278.67	251.85
57	157.81	137.67	241.75	218.26	298.83	268.60
58	167.89	147.74	255.17	235.06	318.98	288.75
59	184.68	164.53	271.97	245.11	335.77	302.18
60	198.12	181.34	295.46	265.24	359.28	325.69
61	214.91	194.74	312.24	282.02	386.15	352.57
62	238.40	214.91	335.77	302.18	409.65	372.69
63	251.85	231.68	362.63	325.69	436.47	399.56
64	268.60	245.11	392.86	352.57	460.00	419.74
65	285.40	261.90	419.74	376.07	493.58	446.57
66	308.90	285.40	453.27	409.65	520.42	473.43
67	335.77	305.56	486.85	439.85	564.09	513.73
68	372.69	339.14	533.85	480.14	614.45	557.38
69	413.01	376.07	587.60	530.51	671.52	607.73
70	463.34	423.07	637.94	580.89	731.98	658.08
71	513.73	473.43	701.76	634.59	802.48	728.64
72	577.53	527.16	775.60	705.10	883.08	795.75
73	641.31	587.60	859.55	782.33	966.98	876.35
74	711.83	648.02	956.92	866.27	1,061.03	966.98
75	792.41	715.19	1,061.03	960.28	1,158.39	1,057.67
76	876.35	792.41	1,168.44	1,061.03	1,272.53	1,161.76
77	977.08	883.08	1,282.61	1,165.10	1,380.02	1,262.48
78	1,074.45	973.72	1,390.08	1,262.48	1,487.45	1,359.84
79	1,178.54	1,071.11	1,500.89	1,363.23	1,594.90	1,450.50
80	1,292.67	1,181.90	1,615.02	1,470.66	1,709.07	1,551.25
81	1,416.95	1,299.40	1,742.65	1,584.84	1,833.28	1,662.02
82	1,557.96	1,433.73	1,890.35	1,719.12	1,974.29	1,786.25
83	1,715.75	1,574.75	2,054.89	1,873.57	2,128.75	1,923.93
84	1,893.75	1,739.28	2,253.01	2,051.54	2,310.07	2,095.19
85	2,064.98	1,897.09	2,457.77	2,232.84	2,521.60	2,279.83
86	2,253.01	2,068.33	2,679.41	2,434.32	2,746.56	2,484.67
87	2,457.77	2,256.36	2,921.18	2,652.55	2,995.02	2,706.28
88	2,679.41	2,461.17	3,186.42	2,890.95	3,263.66	2,951.35
89	2,921.18	2,682.77	3,471.83	3,152.84	3,555.77	3,216.65
90	3,186.42	2,924.53	3,780.71	3,438.26	3,874.73	3,505.39
91	3,471.83	3,189.76	4,123.19	3,747.17	4,227.29	3,821.01
92	3,780.71	3,475.17	4,495.91	4,086.28	4,606.71	4,166.84
93	4,123.19	3,787.43	4,898.83	4,452.25	5,019.70	4,542.92
94	4,495.91	4,126.56	5,338.68	4,851.81	5,469.61	4,949.20

**Appendix B**

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Individual  
3 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	100.72	90.65	144.38	134.30	208.18	191.40
25-29	107.43	100.72	157.81	144.38	221.61	208.18
30-34	114.17	107.43	167.89	157.81	241.75	221.61
35-39	120.89	114.17	184.68	167.89	261.90	241.75
40-45	134.30	120.89	198.12	184.68	278.67	261.90
46	147.74	127.57	201.47	188.02	282.02	265.24
47	154.44	130.95	208.18	191.40	292.11	268.60
48	154.44	130.95	208.18	191.40	295.46	271.97
49	154.44	130.95	211.52	194.74	298.83	275.32
50	157.81	134.30	214.91	198.12	298.83	275.32
51	161.16	137.67	218.26	201.47	302.18	278.67
52	164.53	137.67	224.98	211.52	308.90	288.75
53	167.89	141.01	238.40	218.26	318.98	295.46
54	174.60	147.74	251.85	235.06	329.05	302.18
55	184.68	157.81	268.60	245.11	345.84	312.24
56	194.74	167.89	282.02	261.90	359.28	329.05
57	211.52	181.34	302.18	278.67	379.41	349.18
58	224.98	191.40	325.69	298.83	402.93	362.63
59	245.11	208.18	349.18	318.98	429.78	389.50
60	265.24	224.98	372.69	339.14	460.00	416.35
61	282.02	245.11	402.93	362.63	493.58	446.57
62	305.56	261.90	433.13	392.86	520.42	473.43
63	329.05	285.40	460.00	423.07	557.38	507.02
64	352.57	302.18	496.92	453.27	587.60	533.85
65	376.07	322.35	527.16	483.50	624.51	570.81
66	406.29	345.84	570.81	523.82	661.47	604.35
67	443.19	379.41	617.81	567.45	711.83	648.02
68	490.24	419.74	678.26	621.15	775.60	708.47
69	547.31	466.70	745.43	681.60	849.49	778.97
70	607.73	523.82	819.27	752.15	933.42	852.86
71	681.60	584.24	909.93	832.70	1,027.43	940.15
72	765.54	658.08	1,007.31	920.00	1,131.52	1,037.53
73	852.86	731.98	1,114.73	1,017.36	1,242.35	1,141.60
74	953.58	815.93	1,228.91	1,124.83	1,366.57	1,255.76
75	1,064.39	909.93	1,356.50	1,238.99	1,504.24	1,376.64
76	1,181.90	1,007.31	1,490.79	1,363.23	1,638.53	1,504.24
77	1,312.85	1,124.83	1,641.90	1,500.89	1,796.35	1,645.24
78	1,447.13	1,235.61	1,786.25	1,638.53	1,940.70	1,779.57
79	1,578.11	1,353.13	1,937.35	1,779.57	2,085.10	1,913.87
80	1,722.49	1,480.73	2,098.55	1,927.32	2,242.92	2,054.89
81	1,890.35	1,621.75	2,276.49	2,095.19	2,414.17	2,212.70
82	2,071.69	1,782.91	2,474.58	2,276.49	2,605.53	2,387.27
83	2,286.54	1,964.24	2,699.57	2,484.67	2,823.78	2,588.77
84	2,531.68	2,175.77	2,958.09	2,726.42	3,068.91	2,813.71
85	2,760.01	2,370.50	3,223.35	2,971.52	3,347.58	3,065.53
86	3,005.08	2,585.41	3,512.10	3,240.14	3,649.77	3,344.21
87	3,273.71	2,817.06	3,827.71	3,532.25	3,978.82	3,646.42
88	3,569.20	3,068.91	4,173.58	3,851.24	4,338.09	3,975.44
89	3,888.18	3,347.58	4,549.64	4,197.08	4,727.59	4,331.37
90	4,237.35	3,649.77	4,959.25	4,576.49	5,154.00	4,720.87
91	4,616.81	3,978.82	5,405.85	4,989.46	5,620.72	5,147.27
92	5,033.12	4,338.09	5,892.69	5,436.05	6,127.73	5,610.66
93	5,483.04	4,727.59	6,423.21	5,926.27	6,678.38	6,114.30
94	5,979.98	5,154.00	7,000.70	6,460.13	7,279.42	6,664.94

**Appendix B**

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Individual  
4 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	110.77	104.08	167.89	157.81	238.40	221.61
25-29	117.51	110.77	181.34	167.89	255.17	241.75
30-34	130.95	117.51	194.74	184.68	275.32	261.90
35-39	141.01	127.57	211.52	198.12	298.83	278.67
40-45	154.44	137.67	224.98	214.91	322.35	302.18
46	154.44	137.67	228.33	218.26	325.69	305.56
47	157.81	141.01	235.06	221.61	332.41	312.24
48	161.16	144.38	238.40	224.98	335.77	318.98
49	161.16	144.38	241.75	224.98	335.77	318.98
50	164.53	147.74	245.11	228.33	339.14	322.35
51	164.53	147.74	248.48	235.06	349.18	325.69
52	171.23	157.81	261.90	245.11	352.57	329.05
53	181.34	164.53	271.97	251.85	362.63	339.14
54	188.02	171.23	282.02	265.24	379.41	352.57
55	198.12	184.68	302.18	278.67	389.50	359.28
56	208.18	191.40	322.35	298.83	409.65	376.07
57	221.61	208.18	345.84	318.98	433.13	399.56
58	241.75	221.61	365.97	339.14	456.65	416.35
59	261.90	238.40	392.86	362.63	490.24	446.57
60	275.32	251.85	429.78	392.86	523.82	480.14
61	298.83	275.32	460.00	419.74	557.38	513.73
62	325.69	298.83	493.58	456.65	601.01	547.31
63	345.84	315.61	530.51	486.85	637.94	577.53
64	369.35	339.14	564.09	523.82	671.52	614.45
65	392.86	359.28	604.35	557.38	708.47	648.02
66	426.41	389.50	644.68	597.66	755.49	688.32
67	463.34	426.41	698.41	648.02	812.53	742.03
68	517.08	473.43	772.25	711.83	889.78	809.19
69	574.18	527.16	849.49	785.69	973.72	893.14
70	637.94	587.60	946.85	869.65	1,071.11	980.43
71	718.53	661.47	1,047.60	963.64	1,175.18	1,084.53
72	805.82	738.69	1,165.10	1,064.39	1,296.06	1,198.68
73	903.23	832.70	1,285.99	1,175.18	1,430.34	1,316.20
74	1,007.31	930.05	1,410.23	1,292.67	1,571.40	1,447.13
75	1,128.17	1,040.89	1,554.60	1,427.01	1,725.85	1,588.18
76	1,259.14	1,158.39	1,712.41	1,571.40	1,893.75	1,735.91
77	1,393.43	1,282.61	1,883.66	1,732.57	2,071.69	1,900.43
78	1,534.46	1,410.23	2,051.54	1,890.35	2,239.57	2,054.89
79	1,675.48	1,544.52	2,226.15	2,051.54	2,414.17	2,216.04
80	1,826.58	1,678.83	2,417.51	2,229.49	2,602.19	2,390.67
81	1,994.43	1,836.64	2,632.40	2,430.95	2,800.27	2,578.68
82	2,192.54	2,017.96	2,864.08	2,649.18	3,028.61	2,790.21
83	2,414.17	2,222.77	3,129.35	2,894.30	3,287.15	3,028.61
84	2,682.77	2,467.87	3,428.18	3,172.99	3,579.27	3,297.19
85	2,924.53	2,689.50	3,737.08	3,458.37	3,901.61	3,596.06
86	3,189.76	2,934.60	4,072.85	3,770.67	4,250.80	3,918.40
87	3,475.17	3,199.86	4,438.83	4,109.79	4,633.54	4,274.31
88	3,787.43	3,488.60	4,838.36	4,482.47	5,053.28	4,657.08
89	4,126.56	3,804.21	5,274.89	4,885.38	5,509.93	5,073.43
90	4,499.26	4,143.35	5,748.32	5,325.25	6,003.47	5,530.06
91	4,905.53	4,516.04	6,265.39	5,802.03	6,544.07	6,030.36
92	5,348.74	4,922.33	6,826.11	6,322.44	7,135.04	6,570.95
93	5,828.87	5,365.52	7,440.55	6,889.92	7,776.35	7,165.23
94	6,352.68	5,845.69	8,112.13	7,507.71	8,478.10	7,806.56

**Appendix B**

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Individual  
6 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	134.30	127.57	198.12	184.68	278.67	265.24
25-29	144.38	137.67	214.91	198.12	302.18	282.02
30-34	157.81	147.74	235.06	214.91	325.69	305.56
35-39	167.89	161.16	251.85	235.06	352.57	329.05
40-45	184.68	171.23	271.97	251.85	379.41	355.91
46	188.02	174.60	278.67	255.17	386.15	362.63
47	191.40	181.34	282.02	261.90	392.86	365.97
48	194.74	181.34	288.75	268.60	399.56	376.07
49	198.12	184.68	295.46	271.97	402.93	376.07
50	198.12	184.68	298.83	275.32	406.29	379.41
51	201.47	188.02	305.56	282.02	413.01	386.15
52	208.18	191.40	312.24	292.11	426.41	399.56
53	214.91	198.12	329.05	305.56	439.85	409.65
54	224.98	211.52	349.18	325.69	456.65	426.41
55	241.75	224.98	372.69	349.18	473.43	443.19
56	255.17	238.40	392.86	365.97	496.92	463.34
57	271.97	251.85	419.74	392.86	527.16	490.24
58	292.11	271.97	453.27	419.74	557.38	520.42
59	312.24	292.11	486.85	456.65	594.30	550.65
60	335.77	308.90	520.42	486.85	634.59	590.92
61	362.63	332.41	557.38	520.42	678.26	627.88
62	389.50	359.28	597.66	557.38	721.91	674.88
63	416.35	386.15	631.25	594.30	772.25	718.53
64	449.91	416.35	671.52	624.51	822.63	765.54
65	480.14	446.57	708.47	661.47	872.99	812.53
66	520.42	483.50	755.49	705.10	933.42	869.65
67	567.45	523.82	819.27	765.54	1,003.94	933.42
68	634.59	587.60	913.27	849.49	1,094.59	1,020.74
69	701.76	651.39	1,017.36	946.85	1,195.34	1,108.03
70	778.97	725.25	1,138.23	1,061.03	1,306.11	1,212.11
71	872.99	812.53	1,275.89	1,185.25	1,430.34	1,326.26
72	983.77	913.27	1,420.29	1,322.91	1,574.75	1,457.22
73	1,097.93	1,014.00	1,568.03	1,453.86	1,725.85	1,601.57
74	1,225.56	1,134.89	1,729.19	1,601.57	1,900.43	1,762.79
75	1,363.23	1,259.14	1,903.79	1,769.47	2,085.10	1,937.35
76	1,514.28	1,396.79	2,091.83	1,940.70	2,279.83	2,122.02
77	1,675.48	1,551.25	2,289.93	2,128.75	2,491.36	2,320.14
78	1,829.92	1,692.26	2,494.74	2,320.14	2,686.12	2,508.16
79	1,987.74	1,843.36	2,699.57	2,514.89	2,890.95	2,696.18
80	2,148.88	1,994.43	2,921.18	2,726.42	3,105.84	2,894.30
81	2,340.28	2,175.77	3,162.93	2,954.73	3,334.16	3,112.54
82	2,558.53	2,380.59	3,441.60	3,219.99	3,599.42	3,361.02
83	2,810.34	2,615.60	3,757.22	3,512.10	3,894.87	3,636.33
84	3,112.54	2,894.30	4,119.83	3,854.60	4,234.01	3,958.67
85	3,394.60	3,156.19	4,489.19	4,200.42	4,613.43	4,314.59
86	3,700.16	3,441.60	4,895.47	4,579.85	5,026.41	4,704.09
87	4,032.54	3,753.87	5,335.29	4,992.83	5,479.69	5,127.12
88	4,395.18	4,089.64	5,815.45	5,442.78	5,973.27	5,587.13
89	4,791.37	4,455.60	6,339.27	5,932.97	6,510.50	6,090.81
90	5,224.51	4,858.54	6,913.43	6,463.51	7,094.73	6,638.06
91	5,691.22	5,295.01	7,534.59	7,044.35	7,736.05	7,235.75
92	6,204.94	5,775.19	8,212.81	7,678.94	8,431.08	7,890.52
93	6,762.35	6,295.63	8,951.53	8,370.64	9,189.88	8,602.31
94	7,373.42	6,859.68	9,757.37	9,126.13	10,015.88	9,377.93

**Appendix B**

Genworth Life Insurance Company  
43% Increase to Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Age	Individual Lifetime Benefit Period					
	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	197.74	185.14	298.76	269.31	403.93	378.69
25-29	210.38	201.96	319.76	294.55	437.58	408.14
30-34	231.42	214.59	345.02	315.59	471.27	441.81
35-39	248.28	235.62	374.46	340.80	509.14	475.45
40-45	269.31	252.45	403.93	370.24	551.18	513.33
46	277.72	260.86	412.34	374.46	559.60	521.74
47	281.91	265.06	416.54	378.69	572.21	534.35
48	281.91	269.31	424.97	387.10	580.62	542.76
49	286.13	273.50	433.38	391.28	584.83	546.95
50	294.55	273.50	437.58	399.71	589.05	551.18
51	298.76	281.91	450.22	412.34	601.66	559.60
52	311.37	294.55	467.04	424.97	618.52	580.62
53	319.76	302.95	488.10	450.22	643.76	601.66
54	336.61	315.59	517.55	479.68	664.79	622.71
55	353.41	332.37	551.18	513.33	698.47	652.15
56	378.69	353.41	589.05	551.18	740.48	690.03
57	408.14	378.69	626.93	589.05	782.58	727.91
58	424.97	399.71	673.20	639.55	828.90	778.38
59	467.04	433.38	719.52	681.65	879.38	820.48
60	492.29	454.41	765.77	727.91	929.87	870.97
61	534.35	492.29	824.65	786.80	992.98	929.87
62	572.21	534.35	879.38	833.10	1,060.30	992.98
63	618.52	576.43	925.68	879.38	1,136.06	1,068.72
64	660.59	614.31	971.91	921.46	1,211.75	1,144.46
65	715.29	664.79	1,022.45	963.53	1,295.92	1,228.58
66	774.17	723.72	1,085.56	1,018.20	1,392.69	1,316.96
67	845.70	795.21	1,182.31	1,106.62	1,502.09	1,417.95
68	938.29	879.38	1,312.75	1,237.04	1,628.31	1,535.76
69	1,039.24	976.13	1,476.86	1,388.50	1,775.62	1,666.18
70	1,161.27	1,085.56	1,670.41	1,569.43	1,931.27	1,800.83
71	1,291.72	1,207.55	1,876.55	1,762.95	2,107.96	1,960.72
72	1,443.17	1,350.65	2,095.38	1,964.93	2,318.37	2,154.27
73	1,615.69	1,506.30	2,322.55	2,175.30	2,537.13	2,360.43
74	1,796.62	1,670.41	2,562.39	2,402.51	2,785.40	2,600.27
75	2,006.96	1,855.51	2,819.06	2,633.90	3,054.65	2,865.31
76	2,221.56	2,061.69	3,096.72	2,894.78	3,345.00	3,147.26
77	2,448.76	2,272.07	3,387.07	3,168.31	3,643.74	3,437.58
78	2,659.17	2,474.03	3,677.39	3,441.77	3,925.62	3,702.61
79	2,873.73	2,684.41	3,971.93	3,723.65	4,215.94	3,976.12
80	3,105.17	2,903.19	4,287.51	4,030.83	4,514.70	4,258.01
81	3,366.03	3,151.45	4,632.50	4,367.41	4,847.09	4,569.39
82	3,664.78	3,437.58	5,032.18	4,750.29	5,221.54	4,922.83
83	4,018.20	3,774.16	5,495.05	5,183.66	5,642.31	5,322.55
84	4,438.96	4,161.24	6,029.41	5,684.39	6,130.40	5,785.41
85	4,842.90	4,535.72	6,572.18	6,197.73	6,681.56	6,307.09
86	5,280.46	4,943.85	7,165.44	6,753.13	7,283.23	6,870.92
87	5,755.91	5,385.65	7,813.39	7,363.20	7,939.62	7,493.61
88	6,273.44	5,873.75	8,516.08	8,027.98	8,654.90	8,166.82
89	6,841.46	6,399.66	9,281.83	8,747.47	9,437.51	8,903.18
90	7,455.76	6,980.32	10,114.90	9,534.28	10,287.42	9,702.59
91	8,128.96	7,607.23	11,023.77	10,392.63	11,208.88	10,573.56
92	8,861.10	8,293.07	12,016.73	11,326.72	12,218.69	11,524.46
93	9,656.30	9,042.00	13,098.07	12,349.11	13,321.08	12,563.69
94	10,527.26	9,854.04	14,276.18	13,459.90	14,520.21	13,695.55

**Appendix B**

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Joint  
3 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	73.89	63.80	104.08	97.38	151.10	137.67
25-29	77.25	73.89	110.77	104.08	161.16	151.10
30-34	80.60	77.25	120.89	110.77	174.60	161.16
35-39	87.28	80.60	134.30	120.89	188.02	174.60
40-45	97.38	87.28	141.01	130.95	201.47	188.02
46	104.08	90.65	144.38	134.30	201.47	191.40
47	107.43	93.99	151.10	137.67	211.52	194.74
48	107.43	93.99	151.10	137.67	211.52	194.74
49	110.77	93.99	151.10	141.01	214.91	198.12
50	110.77	97.38	154.44	141.01	214.91	198.12
51	110.77	100.72	157.81	144.38	218.26	201.47
52	114.17	100.72	161.16	151.10	221.61	208.18
53	120.89	100.72	171.23	157.81	228.33	211.52
54	124.23	107.43	181.34	167.89	238.40	218.26
55	134.30	114.17	194.74	177.94	248.48	224.98
56	137.67	120.89	201.47	188.02	258.52	238.40
57	151.10	130.95	218.26	201.47	271.97	251.85
58	161.16	137.67	235.06	214.91	288.75	261.90
59	177.94	151.10	251.85	228.33	308.90	282.02
60	191.40	161.16	268.60	245.11	332.41	298.83
61	201.47	177.94	288.75	261.90	355.91	322.35
62	221.61	188.02	312.24	282.02	376.07	342.48
63	238.40	204.83	332.41	305.56	402.93	365.97
64	255.17	218.26	359.28	325.69	423.07	382.77
65	271.97	231.68	379.41	349.18	449.91	409.65
66	292.11	248.48	409.65	376.07	476.78	436.47
67	318.98	271.97	443.19	409.65	513.73	466.70
68	352.57	302.18	486.85	446.57	557.38	510.36
69	392.86	335.77	537.23	490.24	611.09	560.75
70	436.47	376.07	590.92	540.59	671.52	614.45
71	490.24	419.74	654.74	601.01	738.69	678.26
72	550.65	473.43	725.25	661.47	815.93	745.43
73	614.45	527.16	802.48	731.98	893.14	822.63
74	684.98	587.60	886.44	809.19	983.77	903.23
75	765.54	654.74	977.08	893.14	1,084.53	990.50
76	849.49	725.25	1,074.45	980.43	1,178.54	1,084.53
77	946.85	809.19	1,181.90	1,081.17	1,292.67	1,185.25
78	1,040.89	889.78	1,285.99	1,178.54	1,396.79	1,282.61
79	1,134.89	973.72	1,393.43	1,282.61	1,500.89	1,376.64
80	1,238.99	1,067.73	1,510.94	1,386.72	1,615.02	1,480.73
81	1,359.84	1,168.44	1,638.53	1,507.58	1,739.28	1,591.52
82	1,490.79	1,282.61	1,782.91	1,638.53	1,876.94	1,719.12
83	1,645.24	1,413.58	1,944.07	1,789.62	2,034.76	1,863.51
84	1,823.18	1,568.03	2,128.75	1,964.24	2,209.33	2,024.66
85	1,987.74	1,705.69	2,320.14	2,138.82	2,410.83	2,205.99
86	2,162.32	1,860.15	2,528.34	2,333.56	2,629.03	2,407.45
87	2,357.09	2,028.02	2,756.65	2,541.74	2,864.08	2,625.67
88	2,568.61	2,209.33	3,005.08	2,773.41	3,122.61	2,860.73
89	2,800.27	2,410.83	3,277.06	3,021.90	3,404.67	3,119.25
90	3,052.11	2,629.03	3,569.20	3,293.85	3,710.22	3,397.94
91	3,324.08	2,864.08	3,891.52	3,592.70	4,045.96	3,706.84
92	3,622.89	3,122.61	4,244.09	3,915.05	4,411.97	4,039.27
93	3,948.59	3,404.67	4,623.49	4,267.59	4,808.17	4,401.91
94	4,304.51	3,710.22	5,039.84	4,650.35	5,241.30	4,798.09

Appendix B

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Joint  
4 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	80.60	73.89	107.43	104.08	157.81	141.01
25-29	87.28	77.25	114.17	107.43	167.89	154.44
30-34	97.38	83.95	127.57	114.17	184.68	164.53
35-39	104.08	90.65	137.67	124.23	198.12	177.94
40-45	107.43	100.72	151.10	134.30	214.91	191.40
46	107.43	104.08	154.44	137.67	218.26	194.74
47	110.77	104.08	157.81	141.01	221.61	198.12
48	110.77	104.08	161.16	144.38	224.98	204.83
49	114.17	104.08	161.16	144.38	224.98	204.83
50	114.17	104.08	164.53	151.10	231.68	208.18
51	114.17	104.08	167.89	154.44	231.68	208.18
52	117.51	107.43	171.23	157.81	238.40	214.91
53	124.23	110.77	184.68	167.89	245.11	221.61
54	127.57	114.17	194.74	177.94	258.52	231.68
55	137.67	124.23	208.18	188.02	265.24	241.75
56	141.01	127.57	218.26	198.12	275.32	248.48
57	154.44	134.30	238.40	214.91	295.46	265.24
58	164.53	144.38	251.85	231.68	312.24	285.40
59	181.34	161.16	268.60	241.75	329.05	298.83
60	194.74	177.94	292.11	261.90	352.57	318.98
61	211.52	191.40	308.90	278.67	379.41	345.84
62	235.06	211.52	329.05	298.83	402.93	365.97
63	248.48	228.33	355.91	318.98	429.78	392.86
64	265.24	241.75	386.15	345.84	453.27	413.01
65	282.02	258.52	413.01	369.35	486.85	439.85
66	305.56	282.02	446.57	402.93	513.73	466.70
67	329.05	302.18	480.14	433.13	554.02	507.02
68	365.97	332.41	523.82	473.43	604.35	547.31
69	406.29	369.35	577.53	520.42	661.47	597.66
70	456.65	416.35	627.88	570.81	721.91	648.02
71	507.02	466.70	691.67	624.51	789.03	718.53
72	567.45	517.08	762.17	695.04	869.65	782.33
73	631.25	577.53	846.14	768.90	950.19	862.92
74	701.76	637.94	940.15	852.86	1,044.23	950.19
75	778.97	705.10	1,044.23	943.49	1,138.23	1,040.89
76	862.92	778.97	1,148.32	1,044.23	1,252.41	1,141.60
77	960.28	869.65	1,262.48	1,144.95	1,356.50	1,242.35
78	1,057.67	956.92	1,366.57	1,242.35	1,463.93	1,339.70
79	1,158.39	1,054.33	1,477.35	1,343.06	1,568.03	1,427.01
80	1,272.53	1,161.76	1,588.18	1,447.13	1,682.19	1,527.73
81	1,393.43	1,279.27	1,715.75	1,557.96	1,803.06	1,635.17
82	1,534.46	1,410.23	1,860.15	1,692.26	1,944.07	1,756.08
83	1,688.92	1,547.90	2,021.31	1,843.36	2,095.19	1,893.75
84	1,863.51	1,712.41	2,216.04	2,017.96	2,273.15	2,061.60
85	2,031.39	1,866.86	2,417.51	2,195.92	2,481.32	2,242.92
86	2,216.04	2,034.76	2,635.77	2,394.01	2,702.91	2,444.37
87	2,417.51	2,219.43	2,874.17	2,608.90	2,948.01	2,662.61
88	2,635.77	2,420.87	3,136.03	2,843.93	3,209.92	2,904.41
89	2,874.17	2,639.11	3,414.75	3,102.49	3,498.66	3,166.27
90	3,136.03	2,877.51	3,720.28	3,384.53	3,814.28	3,448.30
91	3,414.75	3,139.41	4,056.06	3,686.70	4,160.12	3,760.61
92	3,720.28	3,418.11	4,425.41	4,022.47	4,532.85	4,099.70
93	4,056.06	3,727.02	4,821.58	4,381.76	4,939.11	4,469.02
94	4,425.41	4,059.41	5,254.75	4,774.60	5,382.33	4,868.60

**Appendix B**

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Joint  
6 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	93.99	83.95	134.30	124.23	194.74	177.94
25-29	100.72	93.99	147.74	134.30	204.83	194.74
30-34	107.43	100.72	154.44	147.74	224.98	204.83
35-39	110.77	107.43	171.23	154.44	241.75	224.98
40-45	124.23	110.77	184.68	171.23	258.52	241.75
46	127.57	117.51	188.02	174.60	261.90	245.11
47	130.95	120.89	194.74	177.94	271.97	248.48
48	134.30	120.89	194.74	177.94	275.32	251.85
49	134.30	120.89	194.74	181.34	278.67	255.17
50	137.67	124.23	198.12	184.68	278.67	255.17
51	137.67	124.23	201.47	188.02	282.02	258.52
52	141.01	127.57	208.18	194.74	285.40	268.60
53	154.44	130.95	221.61	201.47	295.46	275.32
54	161.16	137.67	235.06	218.26	305.56	282.02
55	161.16	147.74	248.48	228.33	322.35	288.75
56	171.23	154.44	261.90	241.75	332.41	305.56
57	184.68	167.89	282.02	258.52	352.57	325.69
58	208.18	177.94	302.18	278.67	372.69	335.77
59	218.26	194.74	325.69	295.46	399.56	362.63
60	228.33	208.18	345.84	315.61	426.41	386.15
61	248.48	228.33	372.69	335.77	456.65	413.01
62	282.02	241.75	402.93	365.97	483.50	439.85
63	288.75	265.24	426.41	392.86	517.08	470.06
64	305.56	282.02	460.00	419.74	543.95	496.92
65	325.69	298.83	490.24	449.91	580.89	530.51
66	352.57	322.35	530.51	486.85	614.45	560.75
67	382.77	352.57	574.18	527.16	661.47	601.01
68	426.41	389.50	627.88	577.53	718.53	658.08
69	476.78	433.13	691.67	631.25	789.03	721.91
70	530.51	486.85	758.82	698.41	866.27	792.41
71	597.66	540.59	842.76	772.25	953.58	872.99
72	668.18	611.09	933.42	852.86	1,050.94	963.64
73	748.77	678.26	1,034.15	943.49	1,151.66	1,061.03
74	836.06	758.82	1,141.60	1,044.23	1,269.18	1,165.10
75	933.42	842.76	1,259.14	1,148.32	1,396.79	1,275.89
76	1,044.23	933.42	1,383.36	1,265.83	1,521.01	1,396.79
77	1,155.03	1,044.23	1,524.39	1,393.43	1,665.40	1,527.73
78	1,272.53	1,148.32	1,658.68	1,521.01	1,799.69	1,651.95
79	1,386.72	1,255.76	1,796.35	1,651.95	1,934.01	1,776.19
80	1,510.94	1,373.28	1,947.44	1,789.62	2,081.76	1,907.15
81	1,651.95	1,504.24	2,111.95	1,944.07	2,239.57	2,054.89
82	1,816.49	1,655.34	2,296.64	2,111.95	2,417.51	2,216.04
83	2,001.16	1,823.18	2,504.82	2,306.70	2,618.96	2,400.73
84	2,222.77	2,017.96	2,746.56	2,531.68	2,847.29	2,612.24
85	2,424.25	2,199.26	2,991.68	2,756.65	3,105.84	2,843.93
86	2,642.45	2,400.73	3,260.29	3,008.46	3,387.88	3,102.49
87	2,880.85	2,615.60	3,552.40	3,277.06	3,693.44	3,384.53
88	3,139.41	2,847.29	3,874.73	3,572.55	4,025.83	3,690.05
89	3,418.11	3,105.84	4,220.57	3,894.87	4,388.45	4,019.12
90	3,727.02	3,387.88	4,603.37	4,247.45	4,781.31	4,381.76
91	4,062.78	3,693.44	5,016.35	4,630.20	5,214.44	4,777.95
92	4,432.13	4,025.83	5,469.61	5,043.20	5,687.87	5,207.72
93	4,828.30	4,388.45	5,959.86	5,499.84	6,198.22	5,674.43
94	5,264.80	4,781.31	6,497.05	5,993.42	6,755.61	6,184.80

**Appendix B**

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Joint  
8 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	97.38	90.65	147.74	137.67	208.18	194.74
25-29	104.08	97.38	157.81	147.74	221.61	211.52
30-34	114.17	104.08	171.23	161.16	241.75	228.33
35-39	124.23	110.77	184.68	171.23	261.90	241.75
40-45	134.30	120.89	194.74	188.02	282.02	261.90
46	134.30	120.89	198.12	191.40	285.40	265.24
47	137.67	124.23	204.83	194.74	288.75	271.97
48	141.01	124.23	208.18	194.74	292.11	278.67
49	141.01	124.23	211.52	194.74	292.11	278.67
50	144.38	127.57	214.91	198.12	295.46	282.02
51	144.38	127.57	218.26	204.83	305.56	285.40
52	147.74	137.67	228.33	214.91	308.90	285.40
53	157.81	144.38	238.40	218.26	315.61	295.46
54	164.53	147.74	245.11	231.68	332.41	308.90
55	171.23	161.16	261.90	241.75	339.14	312.24
56	181.34	167.89	282.02	261.90	355.91	329.05
57	194.74	181.34	302.18	278.67	376.07	349.18
58	211.52	194.74	318.98	295.46	399.56	362.63
59	228.33	208.18	342.48	315.61	426.41	389.50
60	241.75	218.26	376.07	342.48	456.65	419.74
61	261.90	241.75	399.56	365.97	486.85	446.57
62	285.40	261.90	429.78	399.56	523.82	476.78
63	302.18	275.32	463.34	423.07	557.38	503.64
64	322.35	295.46	490.24	456.65	584.24	537.23
65	342.48	312.24	527.16	486.85	617.81	564.09
66	372.69	339.14	560.75	520.42	658.08	601.01
67	402.93	372.69	607.73	564.09	708.47	648.02
68	449.91	413.01	674.88	621.15	775.60	705.10
69	500.29	460.00	742.03	684.98	849.49	778.97
70	557.38	513.73	825.99	758.82	933.42	856.20
71	627.88	577.53	913.27	839.42	1,024.09	946.85
72	701.76	644.68	1,017.36	926.70	1,131.52	1,044.23
73	789.03	725.25	1,121.44	1,024.09	1,245.70	1,148.32
74	879.70	812.53	1,228.91	1,128.17	1,369.93	1,262.48
75	983.77	906.59	1,356.50	1,245.70	1,504.24	1,383.36
76	1,097.93	1,010.66	1,494.16	1,369.93	1,651.95	1,514.28
77	1,215.49	1,118.09	1,641.90	1,510.94	1,806.41	1,658.68
78	1,339.70	1,228.91	1,789.62	1,648.61	1,954.14	1,792.98
79	1,460.56	1,346.44	1,940.70	1,789.62	2,105.25	1,934.01
80	1,591.52	1,463.93	2,108.60	1,944.07	2,269.76	2,085.10
81	1,739.28	1,601.57	2,296.64	2,118.68	2,440.99	2,249.64
82	1,910.53	1,759.43	2,498.10	2,310.07	2,624.45	2,434.32
83	2,105.25	1,937.35	2,729.77	2,524.94	2,867.44	2,642.45
84	2,340.28	2,152.26	2,988.29	2,766.74	3,122.61	2,874.17
85	2,551.83	2,343.66	3,260.29	3,015.18	3,401.33	3,136.03
86	2,780.12	2,558.53	3,552.40	3,287.15	3,706.84	3,418.11
87	3,031.96	2,790.21	3,871.38	3,582.61	4,039.27	3,727.02
88	3,303.92	3,042.04	4,220.57	3,908.33	4,405.25	4,059.41
89	3,599.42	3,317.36	4,600.01	4,260.87	4,804.79	4,425.41
90	3,921.75	3,612.83	5,012.99	4,643.63	5,234.61	4,821.58
91	4,277.68	3,938.55	5,462.90	5,060.00	5,708.02	5,258.10
92	4,663.76	4,291.07	5,953.14	5,513.28	6,221.72	5,731.53
93	5,083.50	4,677.20	6,487.00	6,006.86	6,782.47	6,248.61
94	5,540.12	5,096.94	7,074.59	6,547.43	7,393.56	6,805.95

**Appendix B**

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7030 et al  
Annual Premiums per \$10 Daily Benefit

Joint  
12 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	50 EP	100 EP	50 EP	100 EP	50 EP	100 EP
18-24	117.51	110.77	171.23	161.16	241.75	228.33
25-29	124.23	117.51	184.68	171.23	261.90	245.11
30-34	137.67	127.57	201.47	184.68	282.02	265.24
35-39	144.38	137.67	218.26	201.47	305.56	285.40
40-45	161.16	147.74	235.06	218.26	329.05	308.90
46	161.16	151.10	241.75	221.61	332.41	312.24
47	164.53	157.81	245.11	224.98	339.14	315.61
48	167.89	157.81	248.48	231.68	345.84	325.69
49	171.23	161.16	255.17	235.06	349.18	325.69
50	171.23	161.16	258.52	238.40	352.57	329.05
51	174.60	161.16	265.24	245.11	355.91	332.41
52	181.34	164.53	268.60	251.85	369.35	345.84
53	184.68	171.23	285.40	265.24	379.41	352.57
54	194.74	181.34	302.18	282.02	396.20	369.35
55	208.18	194.74	322.35	302.18	409.65	382.77
56	221.61	204.83	339.14	315.61	429.78	399.56
57	235.06	218.26	362.63	339.14	456.65	423.07
58	251.85	235.06	392.86	362.63	480.14	449.91
59	268.60	251.85	419.74	396.20	513.73	476.78
60	288.75	265.24	449.91	419.74	547.31	510.36
61	312.24	288.75	480.14	449.91	587.60	543.95
62	335.77	308.90	517.08	480.14	624.51	584.24
63	359.28	332.41	543.95	513.73	668.18	621.15
64	389.50	359.28	580.89	540.59	711.83	661.47
65	416.35	386.15	611.09	570.81	755.49	701.76
66	449.91	416.35	651.39	607.73	805.82	752.15
67	490.24	453.27	708.47	661.47	866.27	805.82
68	547.31	507.02	789.03	735.33	946.85	883.08
69	607.73	564.09	879.70	819.27	1,034.15	956.92
70	671.52	627.88	983.77	916.66	1,128.17	1,047.60
71	755.49	701.76	1,101.31	1,024.09	1,235.61	1,144.95
72	849.49	789.03	1,225.56	1,141.60	1,359.84	1,259.14
73	950.19	876.35	1,353.13	1,255.76	1,490.79	1,383.36
74	1,057.67	980.43	1,494.16	1,383.36	1,641.90	1,524.39
75	1,178.54	1,087.91	1,645.24	1,527.73	1,803.06	1,675.48
76	1,309.48	1,205.40	1,806.41	1,675.48	1,970.93	1,833.28
77	1,447.13	1,339.70	1,977.65	1,839.98	2,152.26	2,004.52
78	1,581.45	1,460.56	2,155.60	2,004.52	2,320.14	2,165.68
79	1,715.75	1,591.52	2,333.56	2,172.41	2,498.10	2,330.20
80	1,856.77	1,722.49	2,524.94	2,357.09	2,682.77	2,501.44
81	2,021.31	1,880.29	2,733.15	2,551.83	2,880.85	2,689.50
82	2,209.33	2,058.25	2,974.89	2,783.48	3,109.17	2,904.41
83	2,427.60	2,259.71	3,246.87	3,035.32	3,364.36	3,142.75
84	2,689.50	2,501.44	3,559.11	3,330.78	3,659.85	3,421.47
85	2,934.60	2,726.42	3,878.10	3,629.61	3,985.55	3,727.02
86	3,196.49	2,974.89	4,230.66	3,955.32	4,341.44	4,062.78
87	3,485.24	3,243.50	4,610.09	4,314.59	4,734.30	4,428.76
88	3,797.50	3,532.25	5,023.04	4,704.09	5,160.71	4,828.30
89	4,140.00	3,851.24	5,476.35	5,127.12	5,624.09	5,261.45
90	4,512.68	4,197.08	5,973.27	5,583.79	6,131.09	5,734.88
91	4,915.61	4,576.49	6,510.50	6,087.43	6,685.09	6,251.96
92	5,362.18	4,989.46	7,094.73	6,634.72	7,286.11	6,816.02
93	5,842.31	5,439.43	7,732.67	7,232.39	7,940.87	7,433.87
94	6,369.48	5,926.27	8,431.08	7,883.78	8,652.68	8,102.03

Appendix B

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7032 et al  
Annual Premiums per \$10 Daily Benefit

2 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	20 EP	100 EP	20 EP	100 EP	20 EP	100 EP
18-24	40.27	30.24	67.17	50.39	87.28	63.80
25-29	47.01	33.58	77.25	57.07	97.38	70.51
30-34	53.73	40.27	90.65	67.17	114.17	80.60
35-39	63.80	43.67	100.72	77.25	127.57	93.99
40-45	70.51	50.39	117.51	90.65	147.74	107.43
46	70.51	53.73	124.23	97.38	151.10	117.51
47	73.89	53.73	127.57	97.38	161.16	120.89
48	73.89	53.73	127.57	97.38	161.16	120.89
49	73.89	53.73	127.57	97.38	164.53	124.23
50	77.25	57.07	130.95	100.72	167.89	137.67
51	77.25	57.07	141.01	104.08	171.23	141.01
52	87.28	67.17	144.38	107.43	184.68	144.38
53	90.65	70.51	147.74	114.17	188.02	147.74
54	90.65	70.51	151.10	117.51	194.74	147.74
55	97.38	77.25	164.53	124.23	211.52	164.53
56	107.43	80.60	177.94	130.95	235.06	171.23
57	117.51	93.99	191.40	147.74	245.11	191.40
58	130.95	100.72	204.83	161.16	265.24	204.83
59	144.38	107.43	228.33	177.94	288.75	221.61
60	164.53	120.89	258.52	194.74	322.35	245.11
61	174.60	137.67	275.32	211.52	345.84	271.97
62	194.74	151.10	312.24	241.75	392.86	302.18
63	221.61	164.53	342.48	251.85	433.13	318.98
64	251.85	184.68	389.50	288.75	490.24	362.63
65	271.97	201.47	416.35	308.90	530.51	389.50
66	302.18	221.61	460.00	335.77	577.53	419.74
67	332.41	241.75	490.24	355.91	617.81	443.19
68	362.63	268.60	537.23	396.20	671.52	490.24
69	396.20	292.11	577.53	419.74	725.25	527.16
70	429.78	318.98	617.81	463.34	768.90	574.18
71	470.06	349.18	674.88	493.58	829.33	611.09
72	510.36	379.41	728.64	537.23	883.08	651.39
73	557.38	416.35	775.60	584.24	933.42	701.76
74	611.09	460.00	846.14	634.59	1,000.58	748.77
75	674.88	493.58	930.05	684.98	1,074.45	795.75
76	745.43	550.65	1,014.00	748.77	1,165.10	856.20
77	825.99	614.45	1,114.73	829.33	1,249.07	933.42
78	906.59	678.26	1,212.11	903.23	1,346.44	1,003.94
79	993.87	738.69	1,316.20	977.08	1,437.07	1,087.91
80	1,087.91	805.82	1,413.58	1,050.94	1,537.81	1,165.10
81	1,188.61	883.08	1,531.08	1,138.23	1,658.68	1,259.14
82	1,292.67	963.64	1,638.53	1,222.17	1,779.57	1,356.50
83	1,413.58	1,050.94	1,776.19	1,319.57	1,917.25	1,457.22
84	1,537.81	1,148.32	1,907.15	1,427.01	2,064.98	1,564.67
85	1,615.02	1,205.40	2,004.52	1,497.51	2,169.04	1,645.24
86	1,695.61	1,265.83	2,105.25	1,571.40	2,276.49	1,725.85
87	1,779.57	1,329.64	2,209.33	1,648.61	2,390.67	1,813.15
88	1,870.20	1,396.79	2,320.14	1,732.57	2,508.16	1,903.79
89	1,964.24	1,467.28	2,434.32	1,819.84	2,635.77	1,997.82
90	2,061.60	1,541.18	2,558.53	1,910.53	2,766.74	2,098.55
91	2,165.68	1,618.38	2,686.12	2,004.52	2,904.41	2,202.65
92	2,273.15	1,698.98	2,820.44	2,105.25	3,048.76	2,313.42
93	2,387.27	1,782.91	2,961.45	2,212.70	3,203.20	2,427.60
94	2,504.82	1,870.20	3,109.17	2,323.50	3,361.02	2,551.83

**Appendix B**

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7032 et al  
Annual Premiums per \$10 Daily Benefit

3 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	20 EP	100 EP	20 EP	100 EP	20 EP	100 EP
18-24	43.67	33.58	77.25	57.07	97.38	70.51
25-29	50.39	40.27	90.65	67.17	114.17	80.60
30-34	57.07	43.67	104.08	77.25	127.57	93.99
35-39	67.17	50.39	120.89	90.65	147.74	107.43
40-45	77.25	57.07	141.01	100.72	171.23	124.23
46	87.28	63.80	144.38	104.08	184.68	137.67
47	87.28	63.80	147.74	114.17	188.02	141.01
48	90.65	63.80	151.10	114.17	194.74	141.01
49	90.65	67.17	151.10	117.51	194.74	144.38
50	93.99	67.17	161.16	117.51	198.12	144.38
51	97.38	73.89	164.53	120.89	204.83	161.16
52	97.38	73.89	167.89	124.23	214.91	164.53
53	107.43	77.25	174.60	127.57	224.98	171.23
54	114.17	77.25	184.68	137.67	228.33	171.23
55	117.51	87.28	194.74	144.38	248.48	184.68
56	127.57	93.99	211.52	161.16	268.60	198.12
57	141.01	104.08	221.61	167.89	288.75	218.26
58	151.10	114.17	248.48	184.68	315.61	235.06
59	171.23	124.23	268.60	201.47	345.84	251.85
60	188.02	144.38	292.11	224.98	372.69	285.40
61	204.83	164.53	325.69	258.52	409.65	312.24
62	224.98	174.60	355.91	271.97	446.57	342.48
63	258.52	201.47	406.29	318.98	510.36	396.20
64	285.40	218.26	443.19	339.14	560.75	429.78
65	312.24	248.48	483.50	382.77	604.35	480.14
66	339.14	265.24	510.36	396.20	637.94	496.92
67	372.69	288.75	557.38	429.78	701.76	540.59
68	416.35	325.69	611.09	483.50	762.17	607.73
69	463.34	359.28	674.88	520.42	836.06	651.39
70	507.02	392.86	738.69	567.45	916.66	705.10
71	554.02	423.07	795.75	611.09	973.72	752.15
72	614.45	480.14	876.35	678.26	1,061.03	819.27
73	684.98	537.23	963.64	752.15	1,158.39	903.23
74	752.15	584.24	1,044.23	819.27	1,232.27	963.64
75	832.70	641.31	1,151.66	886.44	1,333.00	1,030.81
76	923.37	708.47	1,255.76	966.98	1,440.43	1,104.65
77	1,040.89	809.19	1,406.85	1,091.26	1,584.84	1,232.27
78	1,161.76	899.87	1,541.18	1,195.34	1,719.12	1,329.64
79	1,249.07	977.08	1,651.95	1,292.67	1,819.84	1,420.29
80	1,356.50	1,050.94	1,759.43	1,366.57	1,940.70	1,507.58
81	1,457.22	1,134.89	1,880.29	1,463.93	2,064.98	1,608.31
82	1,568.03	1,218.83	2,001.16	1,561.31	2,205.99	1,712.41
83	1,672.12	1,299.40	2,118.68	1,651.95	2,326.86	1,809.78
84	1,769.47	1,369.93	2,229.49	1,732.57	2,437.65	1,900.43
85	1,856.77	1,440.43	2,340.28	1,819.84	2,558.53	1,994.43
86	1,950.79	1,510.94	2,457.77	1,910.53	2,689.50	2,095.19
87	2,048.18	1,588.18	2,578.68	2,007.86	2,823.78	2,199.26
88	2,148.88	1,665.40	2,709.62	2,105.25	2,964.79	2,310.07
89	2,256.36	1,749.34	2,843.93	2,212.70	3,112.54	2,424.25
90	2,370.50	1,836.64	2,984.94	2,323.50	3,267.03	2,548.46
91	2,488.01	1,930.67	3,136.03	2,437.65	3,431.53	2,676.04
92	2,612.24	2,024.66	3,290.49	2,561.91	3,602.76	2,807.00
93	2,743.21	2,125.39	3,455.03	2,689.50	3,784.07	2,948.01
94	2,880.85	2,232.84	3,629.61	2,823.78	3,972.10	3,095.77

**Appendix B**

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7032 et al  
Annual Premiums per \$10 Daily Benefit

4 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	20 EP	100 EP	20 EP	100 EP	20 EP	100 EP
18-24	50.39	40.27	90.65	67.17	114.17	80.60
25-29	57.07	43.67	104.08	77.25	127.57	93.99
30-34	67.17	50.39	120.89	90.65	147.74	107.43
35-39	77.25	57.07	141.01	100.72	171.23	124.23
40-45	90.65	67.17	161.16	117.51	198.12	144.38
46	93.99	70.51	164.53	120.89	204.83	151.10
47	97.38	70.51	167.89	120.89	214.91	154.44
48	97.38	70.51	167.89	124.23	214.91	154.44
49	97.38	73.89	171.23	130.95	218.26	161.16
50	104.08	73.89	177.94	130.95	221.61	161.16
51	107.43	80.60	184.68	141.01	241.75	174.60
52	114.17	80.60	188.02	141.01	248.48	177.94
53	117.51	87.28	194.74	144.38	248.48	184.68
54	124.23	90.65	201.47	147.74	258.52	191.40
55	130.95	97.38	218.26	161.16	285.40	204.83
56	144.38	107.43	238.40	174.60	298.83	224.98
57	154.44	117.51	248.48	191.40	318.98	241.75
58	171.23	127.57	275.32	201.47	345.84	258.52
59	188.02	137.67	298.83	218.26	382.77	275.32
60	211.52	161.16	325.69	251.85	413.01	315.61
61	228.33	184.68	365.97	288.75	460.00	362.63
62	258.52	194.74	406.29	308.90	496.92	399.56
63	285.40	224.98	443.19	349.18	560.75	443.19
64	315.61	241.75	490.24	379.41	624.51	480.14
65	349.18	282.02	537.23	423.07	674.88	537.23
66	372.69	292.11	567.45	446.57	715.19	560.75
67	416.35	322.35	617.81	480.14	778.97	601.01
68	460.00	362.63	678.26	533.85	846.14	671.52
69	510.36	396.20	748.77	580.89	933.42	725.25
70	564.09	436.47	822.63	634.59	1,020.74	789.03
71	617.81	480.14	886.44	684.98	1,094.59	846.14
72	684.98	530.51	970.36	752.15	1,175.18	909.93
73	758.82	590.92	1,061.03	832.70	1,269.18	997.22
74	832.70	654.74	1,161.76	909.93	1,369.93	1,074.45
75	930.05	721.91	1,285.99	993.87	1,487.45	1,148.32
76	1,037.53	799.14	1,406.85	1,087.91	1,621.75	1,245.70
77	1,158.39	899.87	1,561.31	1,215.49	1,759.43	1,366.57
78	1,282.61	993.87	1,705.69	1,319.57	1,897.09	1,470.66
79	1,390.08	1,094.59	1,839.98	1,440.43	2,014.59	1,574.75
80	1,517.67	1,191.99	1,977.65	1,547.90	2,152.26	1,678.83
81	1,658.68	1,292.67	2,145.53	1,665.40	2,310.07	1,786.25
82	1,803.06	1,410.23	2,289.93	1,786.25	2,467.87	1,913.87
83	1,974.29	1,534.46	2,484.67	1,937.35	2,652.55	2,048.18
84	2,138.82	1,662.02	2,655.90	2,061.60	2,830.51	2,189.19
85	2,246.28	1,745.99	2,790.21	2,162.32	2,971.52	2,299.99
86	2,357.09	1,833.28	2,927.90	2,273.15	3,122.61	2,414.17
87	2,474.58	1,923.93	3,075.63	2,383.93	3,277.06	2,535.03
88	2,598.85	2,021.31	3,230.08	2,504.82	3,441.60	2,659.26
89	2,729.77	2,122.02	3,391.26	2,629.03	3,612.83	2,793.57
90	2,864.08	2,229.49	3,559.11	2,760.01	3,794.15	2,934.60
91	3,008.46	2,340.28	3,737.08	2,897.68	3,985.55	3,078.98
92	3,159.53	2,457.77	3,925.11	3,045.41	4,183.62	3,233.44
93	3,317.36	2,578.68	4,119.83	3,196.49	4,391.81	3,394.60
94	3,481.86	2,709.62	4,328.03	3,357.66	4,613.43	3,565.83

**Appendix B**

Genworth Life Insurance Company  
29% Increase to Current-Year Premiums

Form 7032 et al  
Annual Premiums per \$10 Daily Benefit

6 Year Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	20 EP	100 EP	20 EP	100 EP	20 EP	100 EP
18-24	63.80	47.01	114.17	87.28	144.38	104.08
25-29	70.51	53.73	127.57	97.38	167.89	120.89
30-34	80.60	63.80	147.74	114.17	191.40	141.01
35-39	93.99	70.51	171.23	127.57	218.26	161.16
40-45	107.43	80.60	198.12	147.74	248.48	184.68
46	117.51	90.65	204.83	154.44	261.90	194.74
47	117.51	90.65	211.52	154.44	265.24	194.74
48	120.89	90.65	214.91	161.16	268.60	198.12
49	120.89	93.99	214.91	164.53	271.97	201.47
50	127.57	93.99	221.61	164.53	275.32	204.83
51	130.95	97.38	228.33	174.60	292.11	218.26
52	141.01	100.72	238.40	177.94	302.18	224.98
53	144.38	104.08	245.11	184.68	312.24	235.06
54	151.10	114.17	258.52	191.40	325.69	245.11
55	167.89	124.23	275.32	211.52	359.28	268.60
56	177.94	137.67	302.18	228.33	386.15	295.46
57	194.74	147.74	322.35	248.48	413.01	315.61
58	214.91	164.53	355.91	265.24	446.57	342.48
59	238.40	174.60	386.15	288.75	490.24	365.97
60	265.24	201.47	419.74	332.41	533.85	416.35
61	288.75	235.06	470.06	382.77	590.92	476.78
62	322.35	248.48	527.16	399.56	648.02	530.51
63	359.28	288.75	577.53	463.34	728.64	584.24
64	399.56	312.24	637.94	496.92	809.19	631.25
65	443.19	359.28	698.41	560.75	876.35	708.47
66	480.14	379.41	738.69	590.92	933.42	745.43
67	530.51	416.35	809.19	637.94	1,017.36	799.14
68	580.89	470.06	883.08	711.83	1,101.31	886.44
69	651.39	510.36	977.08	772.25	1,218.83	956.92
70	721.91	564.09	1,074.45	846.14	1,333.00	1,047.60
71	785.69	617.81	1,161.76	909.93	1,427.01	1,121.44
72	869.65	681.60	1,265.83	1,000.58	1,534.46	1,212.11
73	963.64	762.17	1,386.72	1,104.65	1,658.68	1,322.91
74	1,061.03	846.14	1,514.28	1,208.77	1,786.25	1,427.01
75	1,175.18	926.70	1,675.48	1,316.20	1,940.70	1,527.73
76	1,312.85	1,027.43	1,839.98	1,440.43	2,111.95	1,655.34
77	1,463.93	1,161.76	2,038.10	1,611.67	2,293.27	1,816.49
78	1,625.10	1,275.89	2,222.77	1,752.70	2,474.58	1,954.14
79	1,762.79	1,406.85	2,400.73	1,913.87	2,622.32	2,088.48
80	1,927.32	1,534.46	2,582.05	2,054.89	2,793.57	2,219.43
81	2,101.89	1,665.40	2,800.27	2,212.70	2,984.94	2,357.09
82	2,286.54	1,816.49	2,991.68	2,370.50	3,183.08	2,514.89
83	2,504.82	1,977.65	3,243.50	2,565.27	3,411.38	2,692.84
84	2,709.62	2,138.82	3,465.09	2,733.15	3,636.33	2,867.44
85	2,847.29	2,246.28	3,639.68	2,870.79	3,821.01	3,008.46
86	2,988.29	2,357.09	3,821.01	3,015.18	4,009.04	3,159.53
87	3,139.41	2,474.58	4,012.40	3,166.27	4,210.51	3,317.36
88	3,293.85	2,598.85	4,213.86	3,324.08	4,422.03	3,485.24
89	3,458.37	2,729.77	4,425.41	3,488.60	4,643.63	3,659.85
90	3,632.99	2,864.08	4,646.99	3,663.20	4,875.34	3,841.16
91	3,814.28	3,008.46	4,878.68	3,847.88	5,120.45	4,032.54
92	4,005.68	3,159.53	5,120.45	4,039.27	5,375.61	4,234.01
93	4,203.77	3,317.36	5,378.96	4,240.75	5,644.19	4,445.55
94	4,415.33	3,481.86	5,647.58	4,452.25	5,926.27	4,670.50

**Appendix B**

Genworth Life Insurance Company  
43% Increase to Current-Year Premiums

Form 7032 et al  
Annual Premiums per \$10 Daily Benefit

Lifetime Benefit Period

Age	No Benefit Increase Option		Simple Benefit Increase Option		Compound Benefit Increase Option	
	20 EP	100 EP	20 EP	100 EP	20 EP	100 EP
18-24	88.36	67.32	164.11	126.21	210.38	155.66
25-29	101.00	79.95	189.35	147.25	244.03	180.92
30-34	117.79	88.36	218.79	164.11	277.72	210.38
35-39	134.63	101.00	252.45	189.35	323.97	239.83
40-45	155.66	117.79	294.55	218.79	370.24	273.50
46	172.52	130.42	307.16	235.62	391.28	294.55
47	172.52	130.42	311.37	235.62	395.51	294.55
48	176.69	130.42	323.97	239.83	403.93	302.95
49	176.69	134.63	323.97	244.03	408.14	307.16
50	185.14	134.63	328.17	244.03	416.54	311.37
51	189.35	143.06	340.80	256.69	429.16	328.17
52	206.18	151.47	357.64	269.31	450.22	340.80
53	210.38	155.66	366.05	277.72	467.04	353.41
54	222.99	172.52	387.10	286.13	492.29	370.24
55	248.28	185.14	420.78	323.97	542.76	408.14
56	265.06	206.18	458.60	353.41	584.83	458.60
57	286.13	222.99	492.29	378.69	635.35	488.10
58	323.97	248.28	542.76	408.14	690.03	530.16
59	357.64	269.31	589.05	450.22	753.14	572.21
60	395.51	307.16	643.76	509.14	820.48	643.76
61	433.38	353.41	723.72	589.05	908.82	736.32
62	488.10	374.46	803.62	618.52	988.76	820.48
63	542.76	437.58	887.79	719.52	1,123.41	908.82
64	605.89	475.45	984.57	774.17	1,245.44	980.35
65	669.00	546.95	1,072.93	875.19	1,350.65	1,102.37
66	727.91	576.43	1,140.25	917.26	1,443.17	1,157.10
67	799.43	635.35	1,249.62	997.17	1,565.22	1,245.44
68	879.38	723.72	1,363.26	1,110.80	1,704.05	1,384.27
69	988.76	782.58	1,514.73	1,199.14	1,884.97	1,493.69
70	1,093.96	866.75	1,657.76	1,316.96	2,053.28	1,636.72
71	1,194.95	946.70	1,796.62	1,422.14	2,200.58	1,750.35
72	1,312.75	1,043.49	1,956.50	1,561.03	2,373.07	1,893.41
73	1,460.00	1,169.68	2,141.65	1,720.89	2,566.62	2,070.10
74	1,607.28	1,291.72	2,343.60	1,884.97	2,764.36	2,225.80
75	1,779.81	1,413.73	2,587.66	2,053.28	2,995.79	2,385.68
76	1,990.19	1,577.85	2,844.27	2,251.03	3,260.84	2,583.42
77	2,221.56	1,775.62	3,147.26	2,520.30	3,542.74	2,835.88
78	2,461.42	1,956.50	3,437.58	2,739.11	3,820.45	3,050.48
79	2,676.00	2,154.27	3,711.05	2,983.17	4,047.69	3,260.84
80	2,924.22	2,347.82	3,992.96	3,210.36	4,295.91	3,454.39
81	3,193.53	2,553.98	4,325.32	3,454.39	4,581.99	3,664.78
82	3,467.04	2,776.97	4,628.31	3,702.61	4,876.53	3,904.59
83	3,795.21	3,029.43	5,015.41	4,005.57	5,225.73	4,178.09
84	4,114.98	3,273.43	5,360.44	4,266.46	5,570.81	4,443.17
85	4,321.13	3,437.58	5,625.48	4,481.06	5,848.47	4,661.94
86	4,535.72	3,610.05	5,907.39	4,704.04	6,138.80	4,897.58
87	4,762.93	3,791.00	6,201.94	4,939.66	6,445.95	5,141.64
88	5,002.74	3,980.33	6,513.26	5,183.66	6,769.93	5,398.25
89	5,251.02	4,178.09	6,841.46	5,444.55	7,106.53	5,667.55
90	5,511.88	4,388.44	7,182.29	5,718.04	7,464.19	5,953.68
91	5,789.58	4,607.27	7,539.90	6,004.14	7,834.43	6,248.18
92	6,079.89	4,838.66	7,918.58	6,302.90	8,229.94	6,563.77
93	6,382.83	5,078.50	8,314.09	6,618.47	8,638.06	6,891.96
94	6,702.60	5,335.19	8,730.66	6,946.65	9,071.46	7,232.77

## Appendix C

### Genworth Life Insurance Company Current-Year Premiums

Form: 7030

#### Annual Premiums per \$10 Daily Benefit

Issue Age	Individual	Shared
18-24	64.60	59.82
25-29	71.78	67.00
30-34	76.57	71.78
35-39	81.35	76.57
40-44	86.14	78.96
45	86.14	78.96
46	90.92	83.75
47	93.32	86.14
48	93.32	86.14
49	93.32	86.14
50	95.71	88.53
51	98.10	88.53
52	98.10	90.92
53	100.50	93.32
54	105.28	98.10
55	112.46	105.28
56	119.64	110.07
57	129.21	119.64
58	136.39	126.82
59	148.35	138.78
60	160.31	148.35
61	174.67	162.71
62	186.63	172.28
63	203.38	189.03
64	215.35	200.99
65	229.70	212.95
66	246.45	229.70
67	270.38	251.24
68	299.09	277.56
69	332.59	308.66
70	373.27	346.95
71	416.34	385.23
72	468.98	435.48
73	521.62	483.33
74	581.44	540.76
75	648.43	600.58
76	717.82	665.18
77	801.57	744.14
78	880.53	818.32
79	964.27	894.88
80	1,055.20	978.63
81	1,155.69	1,071.95
82	1,270.54	1,179.62
83	1,399.75	1,299.26
84	1,550.50	1,438.04
85	1,689.27	1,567.24
86	1,842.41	1,710.81
87	2,007.51	1,863.94
88	2,186.96	2,029.04
89	2,385.56	2,213.28
90	2,600.91	2,414.27
91	2,835.40	2,632.01
92	3,091.42	2,868.90
93	3,368.98	3,127.31
94	3,672.86	3,407.26

State: Pennsylvania

Filing Company:

Genworth Life Insurance Company

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: 2018 PCS II\_IFA Round 5

Project Name/Number: 2018 PCS II\_IFA Round 5/2018 PCS II\_IFA Round 5

## Supporting Document Schedules

<b>Satisfied - Item:</b>	Transmittal Letter (A&H)
<b>Comments:</b>	
<b>Attachment(s):</b>	PA PCS II Cover Letter 20180810.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Actuarial Certification (A&H)
<b>Comments:</b>	The certification is in the Actuarial Memorandum
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Advertisements (A&H)
<b>Bypass Reason:</b>	N/A to this filing.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Authorization to File (A&H)
<b>Bypass Reason:</b>	N/A to this filing.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Insert Page Explanation (A&H)
<b>Bypass Reason:</b>	N/A to this filing.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Rate Table (A&H)
<b>Bypass Reason:</b>	The Rate Tables are attached to the Rate/Rule Schedule tab.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

State: Pennsylvania

Filing Company:

Genworth Life Insurance Company

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: 2018 PCS II\_IFA Round 5

Project Name/Number: 2018 PCS II\_IFA Round 5/2018 PCS II\_IFA Round 5

<b>Bypassed - Item:</b>	Replacement Form with Highlighted Changes (A&H)
<b>Bypass Reason:</b>	N/A to this filing.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Reserve Calculation (A&H)
<b>Bypass Reason:</b>	Any applicable reserve calculations are included in the actuarial memorandum and/or supplements.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Variability Explanation (A&H)
<b>Comments:</b>	
<b>Attachment(s):</b>	SOV_7030END-SPO_PA.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Actuarial Memorandum (Public)
<b>Comments:</b>	
<b>Attachment(s):</b>	PA PCS II Public Actuarial Memo 20180810.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Sample Schedule Page
<b>Comments:</b>	
<b>Attachment(s):</b>	Schedule_SPO_Sample_PA.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Sample Policyholder Letter
<b>Comments:</b>	
<b>Attachment(s):</b>	PA PCS II SPO Policyholder Letter 20180810.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

**SERFF Tracking #:**

GEFA-131601681

**State Tracking #:**

GEFA-131601681

**Company Tracking #:**

2018 PCS II\_IFA ROUND 5

**State:**

Pennsylvania

**Filing Company:**

Genworth Life Insurance Company

**TOI/Sub-TOI:**

LTC03I Individual Long Term Care/LTC03I.001 Qualified

**Product Name:**

2018 PCS II\_IFA Round 5

**Project Name/Number:**

2018 PCS II\_IFA Round 5/2018 PCS II\_IFA Round 5

<b>Satisfied - Item:</b>	Flesch Score
<b>Comments:</b>	
<b>Attachment(s):</b>	Flesch Score_7030END.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

August 10, 2018

Pennsylvania Department of Insurance

RE: Genworth Life Insurance Company (GLIC)  
Company NAIC No: 70025  
SERFF Tracking No: GEFA-131601681  
Policy Forms: 7030 et al, 7032 et al

The referenced filing is a Long Term Care (LTC) rate schedule change request submitted for your review.

In this filing, GLIC requests a premium rate increase of 43% for lifetime benefits and 29% for limited benefits on the above-mentioned policy forms. In the submitted actuarial memorandum, we include detailed rate increase justification and we demonstrate that this premium rate increase satisfies Long Term Care regulatory requirements of Pennsylvania.

GLIC will offer insureds affected by the premium increase several options to change their benefits in order to maintain a premium rate level reasonably similar to what they were paying prior to the rate increase. The benefit and rate combinations are consistent with the rate tables approved by the Department.

The following electronic items are included in this submission:

- This Cover Letter;
- Confidential and Public Actuarial Memorandum;
- Stable Premium Option Policyholder Letter;
- Stable Premium Option Endorsement;
- Status of Filing;
- Stable Premium Option Rate Tables; and
- Current and Proposed Rate Schedules.

Any applicable fees will be submitted as an EFT payment via SERFF.

The contact person for this filing is:

Michael Johnson, FSA, MAAA  
Assistant Vice President & Actuary  
Genworth Life Insurance Company  
6620 W Broad Street  
Richmond, VA 23230  
Phone: 804-922-5262  
Michael.Johnson2@genworth.com

Thank you for your assistance in reviewing this filing.

Respectfully,



Jamala Murray Arland, FSA, MAAA  
Vice President & Actuary, LTC Inforce Actuarial  
Genworth Life Insurance Company

**CERTIFICATION OF VARIABILITY**  
**July 25, 2018**

RE: 7030END-SPO PA 1017 – Stable Premium Option Endorsement  
7030 Schedule

**Language that appears in the documents contained in this filing may vary as described herein.**

For all documents, information contained in brackets is intended to vary, either in accordance with the following general guidelines, or within the specific parameters stated below for the document containing variable language. NOTE: Where language in the policy form is being replaced the endorsement will contain the new language and the language that is being deleted. The policy is not being reissued.

**GENERAL GUIDELINES**

We may vary the names and/or titles of officers that appear on any of the documents. We may vary the barcodes, address and telephone numbers, website, and business hours for the company.

Individual information, such as names, ages, numbers, descriptions of coverage, coverage limits, amounts and timeframes, premium amounts, page numbers and dates etc., including bracketed [ ] information will be completed with information appropriate to the specific insured (within the parameters contemplated by our rate filing) as described below.

We certify that the ranges bracketed will be as follows:

7030END-SPO PA 1017 Stable Premium Option Endorsement

- Endorsement effective date will be either the policy anniversary date or the monthiversary following the policyholder's election of the Stable Premium Option depending on when the election takes place.
- For Compound 1% Benefit Increases, the entire section of the second bullet within the brackets does not appear if the policyholder previously had No BIO.
- If a policy had Equal Benefit Increases, the phrase "*the Equal Benefit Increases Inflation Protection Rider is renamed to be the Compound Benefit Increases Inflation Protection Rider and*" appears.
- If a policy had Compound or Equal Benefit Increases, the appropriate benefit will print when referencing the name of the rider.
- Based on the selection of the policyholder either the 'Elimination Period' language or the 'Elimination Period and Coinsurance' language will display on the attached endorsement. The 'Elimination Period' language includes everything in the bracketed section under the Elimination Period header. The 'Elimination Period and Coinsurance' language includes the word Coinsurance in the same header, as well as the bracketed section after the bolded word 'OR'
- If a policyholder elects the coinsurance option and does not already have a 100-day Elimination Period, the following statement appears: "As shown on the accompanying updated Schedule, the Elimination Period is changed to be 100 days for the Long Term Care Facility Benefit."

7030 – Schedule

- "Elimination Period (For the Long Term Care Facility Benefit)" will be 100 days if the Coinsurance option is elected and 180 days if the Extended Elimination Period option is elected.
- The "Elimination Period (For the Home Care Benefit)" row will appear if the Extended Elimination Period option is elected. The value for the elimination period will be 90.
- The "Coinsurance applied to Long Term Care Facility & Home Care Benefit expenses up to the Daily Payment Maximum" row will appear if the Coinsurance option is elected. The value for the

- coinsurance amount will be 90%.
- Value for the Lifetime Maximum Benefit will be 1095 (3 years) x the Daily Payment Maximum if individual and 2190 (6 years) x the Daily Payment Maximum if shared.
- The current description of the Benefit Increases will be replaced with the Compound 1% Benefit Increases language below. The words “and Rider” appear if the policyholder already had a Benefit Increases Rider
  - COMPOUND 1% BENEFIT INCREASES – See Attached Endorsement [and Rider]
- In the Annual Premiums Section, the SPO premiums will be shown in the Basic Policy Coverage Section and the Inflation Protection row would not appear.

We hereby certify the final form issued to the consumer will not contain brackets denoting variable text. The use of variable text will be administered in a uniform and non-discriminatory manner and will not result in unfair discrimination. Only text included in this Statement will be allowed to be used on the referenced forms received by consumers.

For Genworth Life Insurance Company



---

Paul Loveland, Vice President Product Compliance

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

**Policy Forms 7030 et al, 7032 et al**

**1. Scope of this Filing**

This filing applies to the referenced policy forms issued in Pennsylvania between August 1998 and February 2004. These forms are also referred to by Genworth Life Insurance Company (“GLIC”) as PCS II and are no longer being sold.

For all the policies issued in Pennsylvania to which the current filing applies, the following table shows the number of exposed lives by policies issued and policies inforce as of December 31, 2017.

	<b>Lifetime Benefit</b>	<b>Limited Benefit</b>	<b>Total</b>
<b>Issued Policies</b>	2,555	7,941	10,496
<b>Inforce Policies</b>	1,629	3,973	5,602

**2. Purpose of this Filing**

This actuarial memorandum has been prepared to request and support the approval of a premium rate increase in your state.

We demonstrate that the proposed premium rate increase satisfies the minimum requirements of Pennsylvania. This actuarial memorandum may not be suitable for other purposes.

**2.1 Multi-Year Rate Action Plan**

GLIC’s 2017 Cash Flow Testing (CFT) includes an assumption for future rate increases for PCS II based upon a cumulative premium rate increase of 149% over the next three to six years for policyholders with lifetime benefits (72% in 2017 and 45% in 2020) and 95% over the next three to six years for policyholders with limited benefits (55% in 2017 and 26% in 2020). This assumption regarding future PCS II premium rate increases is part of GLIC’s Multi-Year Rate Action Plan (MYRAP). The premium rate increase provision for 2017 CFT has changed compared to the 2016 CFT due to updates in data and assumptions.

Consistent with the basis of the future premium rate increases assumed in 2017 CFT, GLIC’s goal is to continue to pursue a cumulative rate increase of 149% for lifetime benefits and 95% for limited benefits. GLIC submitted an initial nationwide filing for 72% lifetime/55% limited in 2017, with plans for submitting future filings for 45% lifetime/26% limited in 2020.

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

## **2.2 Proposed Premium Rate Increase**

In this filing, GLIC requests a premium rate increase of 43% for policies with lifetime benefit periods and 29% for policies with limited benefit periods. The proposed rate increase includes the balance of the rate increase requested in our 2017 filing (SERFF #GEFA-131152778) scheduled in the first year of the Multi-Year Rate Action Plan.

The one-time actuarial equivalent rate increases to the 149% and 95% planned through 2020 for policyholders with lifetime and limited benefits are 76% and 43%, respectively. These rate increases account for the portion of the rate increase of round one of MYRAP already approved by your state. GLIC is indifferent between accepting the one-time rate increases or the phased rate increase schedule over the next three to six years.

## **3. Justification of the Premium Rate Increase**

In determining the need for a premium rate increase, GLIC considered the following:

- a) Claim termination rate assumptions were lowered in 2014 and again in 2016, resulting in two rounds of significant strengthening of the Disabled Life Reserves (DLR) on existing claimants with a corresponding magnified effect in the projections. Claimants are expected to stay on claim longer and, therefore, use more of their available benefits than was previously assumed.
- b) The benefit utilization assumptions and methodology materially changed in 2014, which contributed to the significant increase in the DLR on existing claims and had a corresponding effect in the projections. Claimants are expected to use a higher portion of their Daily Payment Maximum than was previously assumed.
- c) More policyholders are surviving to claim than was previously assumed. Increased future earned premiums, driven by the lower than expected termination assumptions, are not sufficient to offset increased future incurred claims. The exhibits within this filing use the updated assumptions.
- d) Incidence rates were developed with benefit period as a new explanatory variable. Policies with a lifetime benefit period have higher incidence rates than non-lifetime policies. Since lifetime claims are longer than non-lifetime claims, total claim costs are higher, justifying a larger premium rate increase.

## **4. Marketing Method and Underwriting Description**

Policies were primarily sold by captive agents that were provided leads from mass mailing responses.

The underwriting process included an assessment of functional and cognitive abilities at issue ages considered by GLIC to be appropriate. Various underwriting tools were used in accordance with our underwriting requirements, including an application, medical records, an attending physician's statement, telephone interview and/or face-to-face assessment.

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

**5. Description of Benefits**

These comprehensive long term care insurance policy forms:

- Are federally tax qualified, individually underwritten policies.
- Reimburse expenses incurred by the insured(s) subject to the amount of coverage purchased. Home health care expenses may be subject to the prevailing expense limit.
- Allow for premium payments to be waived during facility stays, after the elimination period has been satisfied. For form 7030, this benefit could apply to home care benefits as well if certain requirements have been met.
- May include a survivorship benefit which waives future premium payments upon the death of one spouse if both spouses are insured, have the survivorship benefit, and have met certain requirements.
- Optional nonforfeiture benefit and restoration of benefit riders may have been offered.
- Form 7030 can cover either one individual or two married people. The joint policy, covering two married people, operates like two individual policies except that the two insureds draw from one shared benefit period under the policy.
- These forms have benefit eligibility requirements which involve ADL (Activities of Daily Living) deficiencies or cognitive impairment.

Applicants selected the following at issue:

- Daily Payment Maximum (DPM);
- Benefit Period; and
- Elimination Period.

These forms may also include simple benefit increase or compound benefit increase options which are selected at issue:

- The simple benefit increase option will increase the original daily maximum by 5% each year starting with the second policy year and continuing for the life of the policy, unless terminated earlier by the insured.
- The compound benefit increase option will increase the prior year's daily maximum by 5% each year starting with the second policy year and continuing for the life of the policy, unless terminated earlier by the insured.

**6. Alternatives to the Proposed Rate Increase**

GLIC will offer insureds impacted by rate filings several options for mitigating the impact. As with prior rate increases, they can change any number of benefit features or coverage limits in order to maintain reasonably equivalent pre- and post-rate increase premium levels, or some other premium level that best fits their needs. The available benefit and rate combinations are consistent with the combinations presented in the rate tables approved by the Department as part of the original filing. Several custom/individualized options will be provided in the policyholder notification letter. In addition, policyholders will have the ability to call a dedicated team of customer service representatives that can assist with providing customized quotes for any number of other benefit adjustments.

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

*Reduced Benefit Options.* To balance coverage and cost considerations, GLIC will offer policyholders, subject to rate increases on their long term care policies, customized options to adjust their benefits, including (where available):

1. Reduction in Daily Payment Maximum;
2. Reduction in Benefit Period;
3. Reduction or elimination of the Benefit Increase Option;
4. Increases in Elimination Period; and
5. Elimination of policy riders.

If a policyholder elects to reduce or eliminate the Benefit Increase option, they would retain any prior increases to their daily or monthly payment maximums.

Our policyholders also can consider adjustments to one, or multiple combinations, of these benefit features to identify the optimal balance of coverage and cost based on their specific needs.

*Stable Premium Option (SPO).* The option features the following:

1. A rate guarantee until at least 2028,
2. A three-year benefit period (six-year benefit period for Shared policies),
3. Retention of prior benefit increases in the Daily Payment Maximum,
4. 1% compound benefit increase going forward, and
5. A choice of (1) a longer elimination period (180 day for facility / 90 day for home care) or (2) 10% coinsurance combined with elimination periods comparable to those of most current policyholders (100 day for facility / 0 day for home care).

The combination of the benefits presented with this option is supported by a 2016 PricewaterhouseCoopers study of industry data which found that the average duration for an LTC event is about three years, and that approximately 75%-80% of all LTC events cost less than \$250,000<sup>1</sup>. Under this new option, policyholders will have a three-year benefit period (six years for Shared policies), and the estimated median benefit pool, if all policyholders elected this option, would be approximately \$276,701 with continued growth at 1% compound.

Rate tables for this new option are included in Appendix C.

*Other options.* GLIC will continue to offer the applicable nonforfeiture option to each policyholder. Policyholders that are eligible for the Contingent Nonforfeiture Option will be presented with that as an option in their notification letter. Policyholders that have a nonforfeiture (NFO) rider with their policy, may elect that option. For those policyholders that do not have either the Contingent Nonforfeiture or NFO rider available, GLIC will continue to offer its Optional Limited Benefit, which provides a paid-up benefit equal to the total of premium paid, less any claims paid.

---

<sup>1</sup> *The formal cost of long-term care services: How can society meet a growing need?* The referenced study, initially made available in October 2016, is based on data for the time period 2000-2015 and reports figures in 2016 dollars.

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

**7. Premiums**

**7.1 Renewability and Applicability**

These policies are guaranteed renewable for life, subject to policy terms and conditions. This filing is applicable to the base rates and associated riders of all inforce policies referenced in Section 1 of this actuarial memorandum.

**7.2 Area Factors**

Geographic area factors are not used in rating these policies.

**7.3 Premium Classes**

Premium rates are unisex, level (with the exception of approved rate increases) and payable for life. Premiums vary by issue age, daily payment maximum, benefit period, elimination period, benefit increase option, and any applicable riders selected.

**7.4 Modalization Rules**

The following table shows the modal factors that are applied to the annual premium for policies, and the percentage of insureds selecting each premium mode on a nationwide basis.

Premium Mode	Modal Factor	State Distribution		Nationwide Distribution	
		Lifetime	Limited	Lifetime	Limited
<b>Annual</b>	1.00	53.7%	46.4%	49.3%	43.2%
<b>Semi-Annual</b>	0.51	11.2%	11.2%	9.6%	10.3%
<b>Quarterly</b>	0.26	15.7%	19.0%	14.3%	16.5%
<b>Monthly</b>	0.09	19.5%	23.3%	26.9%	30.0%

Current rate tables reflecting any prior approved rate increase have been included in Appendix A. Corresponding rate tables reflecting any prior approved and the proposed rate increase have been included in Appendix B, attached separately. Please note that actual rates implemented may vary slightly from those set forth in Appendices A and B due to implementation rounding algorithms.

**7.5 History of Previous Rate Revisions**

A 11% rate increase for policies with lifetime benefits and a 11% rate increase for policies with limited benefits was accepted in Pennsylvania on 7/1/2008

A 18% rate increase for policies with lifetime benefits and a 18% rate increase for policies with limited benefits was accepted in Pennsylvania on 5/27/2011

A 20% rate increase for policies with lifetime benefits and a 20% rate increase for policies with limited benefits was accepted in Pennsylvania on 3/8/2013 (SERFF #GEFA-128749577)

A 20% rate increase for policies with lifetime benefits and a 20% rate increase for policies with limited benefits was accepted in Pennsylvania on 12/29/2014 (SERFF #GEFA-129733638)

A 30% rate increase for policies with lifetime benefits and a 15% rate increase for policies with limited benefits was accepted in Pennsylvania on 4/26/2016 (SERFF #GEFA-130373044)

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

A 20% rate increase for policies with lifetime benefits and a 20% rate increase for policies with limited benefits was accepted in Pennsylvania on 12/5/2017 (SERFF #GEFA-131152778)

A cumulative rate increase of 194% for policies with lifetime benefits and of 160% for policies with limited benefits has been approved in your state.

**7.6 Proposed Effective Date**

This rate increase will apply to policies on their anniversary date, following a minimum 60-day policyholder notification period.

**8. Actuarial Assumptions**

Redacted pursuant to Section 16, below.

**9. Development of the Proposed Rate Increase**

In developing the proposed premium rate increase, the following has been considered:

- a) Although this block was priced under the Loss Ratio Regulation, GLIC is not attempting to achieve a 60% loss ratio over the life of the block; in fact, the lifetime loss ratio even after approval and implementation of this rate action will be substantially higher. This self-limited lifetime loss ratio does not imply that it represents either acceptable measures of profitability or minimum thresholds for future rate increase filings;
- b) Lifetime projections of earned premiums and incurred claims reflecting all the prior approved rate increases in Pennsylvania are set forth in Exhibits Ia, Ib and Ic. Lifetime projections of earned premiums and incurred claims reflecting all the prior approved rate increases in Pennsylvania and the proposed rate increase are set forth in Exhibits IIa, IIb and IIc;
- c) In order to ensure maximum credibility, exhibits are based on GLIC nationwide experience through December 31, 2017, for all the forms similar to the ones affected by this filing. Projected earned premiums and incurred claims are based on the assumptions described in Section 8 of this actuarial memorandum;
- d) The nationwide premium has been restated at Pennsylvania level, only reflecting your state's approved rate increases, in order to avoid subsidization among states;
- e) The proposed rate increase has been assumed to be implemented on Dec 1, 2019, in the projections; and
- f) Historical and projected earned premiums and incurred claims include provisions for waiver of premium.

**10. Active Life Reserves and Claim Liability Reserves**

Active life reserves have not been used in this rate increase analysis. Claim reserves as of December 31, 2017, have been discounted to the date of incurral of each respective claim and included in historical incurred claims. Incurred but not reported reserve balances as of December 31, 2017, have been allocated to a calendar year of incurral and included in historic incurred claims. Discounting occurs at 4.0%.

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

**11. Trend Assumptions**

As this is not medical insurance, we have not included any explicit medical cost trends in the projections.

**12. Future Rate Increases**

GLIC intends to file for 45% lifetime/26% limited in 2020, in addition to any balance of the amounts requested but not approved on any rate increase filings made in Pennsylvania. The rate increase amounts to request in future filings pursuant to the Multi-Year Rate Action Plan are subject to change based on experience updates.

**13. State Average Annual Premium Based on Exposed Lives**

	<b>Lifetime Benefit</b>	<b>Limited Benefit</b>
<b>Before Proposed Rate Increase</b>	\$4,043	\$2,770
<b>After Proposed Rate Increase</b>	\$5,781	\$3,573

**14. State and GLIC Nationwide Distribution of Business as of December 31, 2017 (Based on Exposed Lives)**

Redacted pursuant to Section 16, below.

**15. State and GLIC Nationwide Exposed Lives and Annualized Premium**

	<b>State</b>		<b>Nationwide</b>	
	<b>Lifetime</b>	<b>Limited</b>	<b>Lifetime</b>	<b>Limited</b>
<b>Number of Exposed Lives</b>	1,629	3,973	49,239	102,989
<b>Inforce Annualized Premium</b>	\$6,586,679	\$11,004,181	\$159,825,356	\$251,769,526

**16. Confidentiality**

Pursuant to 65 P.S. § 67.101 et seq. (the "Right-to-Know Law"), Genworth Life Insurance Company ("GLIC") respectfully requests that the following sections to be treated as confidential and not subject to disclosure.

Section 8 of the Actuarial Memorandum (entitled, "Actuarial Assumptions"),

Section 14 of the Actuarial Memorandum (entitled, "State and GLIC Nationwide Distribution of Business as of December 31, 2017 (Based on Exposed Lives)"),

Exhibit Ia of the Actuarial Memorandum (entitled, "PCS II Policy Forms - Nationwide Experience Projection All Benefit Periods - with Pennsylvania Approved Rate Increase\*"),

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

Exhibit Ib of the Actuarial Memorandum (entitled, "PCS II Policy Forms - Nationwide Experience Projection Lifetime Benefit Period - with Pennsylvania Approved Rate Increase\*"),

Exhibit Ic of the Actuarial Memorandum (entitled, "PCS II Policy Forms - Nationwide Experience Projection Limited Benefit Period - with Pennsylvania Approved Rate Increase\*"),

Exhibit IIa of the Actuarial Memorandum (entitled, "PCS II Policy Forms - Nationwide Experience Projection All Benefit Periods - with Requested 43%/29% Rate Increase\*"),

Exhibit IIb of the Actuarial Memorandum (entitled, "PCS II Policy Forms - Nationwide Experience Projection Lifetime Benefit Period - with Requested 43% Rate Increase\*"),

Exhibit IIc of the Actuarial Memorandum (entitled, "PCS II Policy Forms - Nationwide Experience Projection Limited Benefit Period - with Requested 29% Rate Increase\*"),

The materials sought to be maintained as confidential are referred to as the "GLIC Confidential Materials" herein.

The GLIC Confidential Materials are being filed in connection with GLIC's request for a rate increase on certain long term care insurance products. However, these materials contain GLIC's confidential trade secrets, and/or other confidential proprietary information, including but not limited to actuarial formulas, statistics and/or assumptions, which are not generally known to, or ascertainable by proper means by, persons or entities other than GLIC who could obtain economic value from their disclosure or use.

65 P.S. § 67.101(a) sets forth Pennsylvania's general rule that a public record should generally be available for inspection by members of the public. However, under 65 P.S. § 67.708(b)(11), "trade secrets" and "confidential proprietary information" are explicitly excluded from the list of records that are subject to public disclosure under the Right-to-Know Law. Specifically, § 67.708(b)(11) states as follows:

(b) Exceptions: Except as provided in subsections (c) and (d) [neither of which apply here], the following are exempt from access by a requester under this act:

(11) A record that constitutes or reveals a trade secret or confidential proprietary information.

In turn, 65 P.S. § 67.102 (the "Definitions" section of the Right-to-Know Law) defines the term "trade secret," in pertinent part, as follows:

Information, including a formula, drawing, pattern, compilation, including a customer list, program, device, method, technique or process that:

(1) derives independent economic value, actual or potential, from not being generally known to and not being readily ascertainable by proper means by other persons who can obtain economic value from its disclosure or use; and

(2) is the subject of efforts that are reasonable under the circumstances to maintain its secrecy.

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

Section 67.102 defines the term “confidential proprietary information” as follows:

Commercial or financial information received by an agency: (1) which is privileged or confidential; and (2) the disclosure of which would cause substantial harm to the competitive position of the person that submitted the information.

Pennsylvania's insurance laws recognize the confidential nature of actuarial reports, work papers, and other materials supporting an actuarial opinion, and provide that they are not subject to disclosure under the Right-to-Know Law. See 40 P.S. § 443(d)(1)(i).

The GLIC Confidential Materials fall squarely within the disclosure exemptions for “trade secrets” and “confidential proprietary information” embodied within § 67.708(b)(11). In *Christopher M's Hand Poured Fudge, Inc. v. Hennon*, 699 A.2d 1272 (Pa. Super. Ct. 1997), Pennsylvania's Superior Court set forth six factors that courts can consider in determining whether information qualifies as a trade secret, including:

(1) the extent to which the information is known outside the owner's business; (2) the extent to which it is known by employees and others involved in the owner's business; (3) the extent of measures taken by the owner to guard the secrecy of the information; (4) the value of the information to the owner and to his competitors; (5) the amount of effort or money expended by the owner in developing the information; and (6) the ease or difficulty with which the information could be properly acquired or duplicated by others.

*Id.* at 1275. Each of these factors, along with the “substantial harm” element of the “confidential proprietary information” definition weighs heavily in favor of maintaining the confidentiality of the GLIC Confidential Materials.

GLIC and its predecessors have been providing long-term care insurance coverage to policyholders for more than 35 years. GLIC's lengthy experience in the long-term care insurance business has placed it in a unique position in the long-term care insurance marketplace, in that no other long-term care insurance carrier has as much experience in that line of business as GLIC and its predecessors. Because GLIC has been marketing long-term care insurance products longer than its competitors, it has been able to accumulate experience-related data that its competitors have not been able to gather. GLIC takes active measures to maintain the secrecy of the information in the GLIC Confidential Materials. Among other measures, GLIC obtains non-disclosure agreements with potential reinsurers before providing those potential reinsurers with any experience-related data. Furthermore, access to the data is limited and available only to employees of GLIC who are deemed likely to need the information in the course of their duties; those employees are subject to non-disclosure agreements under which they agree not to share the information except in furtherance of the business of GLIC.

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

The GLIC Confidential Materials discuss, among other things, GLIC's assumptions in pricing certain long-term care insurance products, GLIC's proprietary persistency and incurred claims data, and GLIC's policy demographics. In addition to pricing long-term care insurance products, GLIC's extensive data also allows it to effectively manage its policies, by enabling it to accurately set reserves and conduct reliable asset tests. None of this information is available to GLIC's competitors or to the public generally, and it is plainly protectable under the statutes discussed above. See *Giurintano v. Dep't of Gen. Servs.*, 20 A.3d 613, 615-17 & n.5 (Pa. Commw. Ct. 2011) (holding that the identities of interpreters hired by state contractor were excluded from public disclosure under 65 P.S. §67.708(b)(11) because the contractor (a) kept their identities confidential "to protect its investment," (b) the interpreters were "business assets," and (c) disclosing the identities "would cause substantial harm to the [contractor's] competitive position in the industry").

GLIC's accumulation of data over its long duration in the long-term care insurance business has come at a substantial cost. For numerous years, GLIC had to price and manage policies without having the benefit of the extensive data and experience that it now possesses. GLIC endured substantial losses on many of those policies that did not perform as expected, and GLIC has incurred and will continue to incur billions of dollars of claims on these policies.

If the GLIC Confidential Materials are released to the public, GLIC would be deprived of its hard-earned competitive advantage, which would cause substantial harm to the company. GLIC's competitors could use GLIC's data and assumptions to price long-term care insurance policies as well as GLIC, without the work, time, expense, and (most significantly) the previous losses that GLIC incurred. If the GLIC Confidential Materials were disclosed, GLIC's competitors would be permitted to exploit GLIC's hard-earned, proprietary information for their own benefit, and to GLIC's competitive and economic disadvantage. See *Smith Butz, LLC v. Pa. Dep't of Env'tl. Prot.*, \_\_\_ A.3d \_\_\_, 2017 WL 1833472, at \*9 (Pa. Commw. Ct. 2017) (finding that records that would enable the company's competitors to copy valuable and proprietary business methods constituted confidential proprietary information and/or trade secrets). For these reasons, GLIC respectfully submits that the GLIC Confidential Materials are exempt from disclosure pursuant to 65 P.S. §67.708(b)(11), and requests that they be treated as confidential by the Pennsylvania Insurance Department.

This submission is the redacted, publicly-available version of GLIC's Actuarial Memorandum. A complete, confidential, unredacted version of GLIC's Actuarial Memorandum has been filed separately.

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

**17. Actuarial Certification**

I am an Associate of the Society of Actuaries and a Member of the American Academy of Actuaries, and I meet the American Academy of Actuaries' qualification standards for rendering this opinion and am familiar with the requirements for filing for increases in long-term care insurance premiums.

This memorandum has been prepared in conformity with all applicable Actuarial Standards of Practice, including ASOP No. 8, 18, 23, 25 and 41.

I have relied on historical cash flows and projections completed by GLIC's Inforce Actuarial Data, Modeling & Process Improvement team. All future projections included in this memorandum, while based on GLIC's best estimates, are uncertain and may not emerge as expected.

I have relied on the IFA Analytics Team for the pricing, methodology and design of the Stable Premium Option.

I have relied on statutory valuations as of December 31, 2017, for Claim Reserves (i.e., Disabled Life Reserves and Pending Claims reserves), Incurred But Not Reported reserves, and Dead But Not Reported reserves provided by GLIC's Long Term Care Valuation team.

I have also relied on assumptions developed by GLIC's Long Term Care Experience Studies team in collaboration with other GLIC actuaries. The assumptions present the actuary's best judgement and are consistent with the issuer's business plan at the time of the filing. Genworth's Assumptions Governance Committee has endorsed these assumptions and Genworth's Executive Council has reviewed and formally approved the assumptions.

I have reviewed and taken into consideration the policy design and coverage provided and GLIC's underwriting and claims adjudication processes.

I hereby certify that, to the best of my knowledge and judgment, this rate submission is in compliance with the applicable laws and regulations of your state when the original issued rates were first filed and accepted. In my opinion, the rates are not excessive or unfairly discriminatory.



---

Vanesa L. Barbera, A.S.A., M.A.A.A.  
Assistant Vice President & Actuary  
Genworth Life Insurance Company  
August 10, 2018

**Genworth Life Insurance Company**  
**Address: 6620 West Broad Street, Richmond, VA 23230**  
**Company NAIC No: 70025**

**Actuarial Memorandum**  
**August 2018**

**PUBLIC**

**Exhibit Ia: PCS II Policy Forms - Nationwide Experience Projection All Benefit Periods - with Pennsylvania Approved Rate Increase\***

Redacted pursuant to Section 16, above.

**Exhibit Ib: PCS II Policy Forms - Nationwide Experience Projection Lifetime Benefit Period - with Pennsylvania Approved Rate Increase\***

Redacted pursuant to Section 16, above.

**Exhibit Ic: PCS II Policy Forms - Nationwide Experience Projection Limited Benefit Period - with Pennsylvania Approved Rate Increase\***

Redacted pursuant to Section 16, above.

**Exhibit IIa: PCS II Policy Forms - Nationwide Experience Projection All Benefit Periods - with Requested 43%/29% Rate Increase\***

Redacted pursuant to Section 16, above.

**Exhibit IIb: PCS II Policy Forms - Nationwide Experience Projection Lifetime Benefit Period - with Requested 43% Rate Increase\***

Redacted pursuant to Section 16, above.

**Exhibit IIc: PCS II Policy Forms - Nationwide Experience Projection Limited Benefit Period - with Requested 29% Rate Increase\***

Redacted pursuant to Section 16, above.

**SCHEDULE**

**GENERAL ELECTRIC CAPITAL ASSURANCE COMPANY**

Policy Number: [UDG1234567]  
Name and Address of Policyholder:  
[John Alan Doe]  
[4321 Main Street]  
[Anytown, FL 32798]

Policy Effective Date: [March 1, 1998]  
Insured Spouse: [Mary Jane Doe] [None]

**POLICY COVERAGES**

Privileged Care Coordination Services.....	Included
Home Care Benefit.....	Included
Caregiver Training Benefit.....	Included
Equipment Benefit.....	Included
Supplementary Benefit.....	Included
Long Term Care Facility Benefit.....	Included
Bed Reservation Benefit.....	Included
Survivorship Benefit.....	Included
Waiver of Premium Benefit.....	Included

**COVERAGE LIMITS**

Elimination Period* (For the Long Term Care Facility Benefit).....	[100 Days][180 Days]
[Elimination Period* (For the Home Care Benefit).....	90 Days]
Daily Payment Maximum.....	[\$219.00]
Lifetime Payment Maximum.....	[\$239,805.00]
[Coinsurance applied to Long Term Care Facility & Home Care Benefit expenses up to the Daily Payment Maximum.....	90%]

\* These limits do not always apply – refer to the Benefit Provisions for details.

**INFLATION PROTECTION**

COMPOUND 1% BENEFIT INCREASES.....	See Attached Endorsement [and Rider]
[NONFORFEITURE BENEFIT.....	Effective with the Policy - See Attached Rider]
[RESTORATION OF BENEFITS.....	Effective as stated in the Rider - See Attached Rider]

**SCHEDULE (Continued)**

**GENERAL ELECTRIC CAPITAL ASSURANCE COMPANY**

Policy Number: UDG1234567

Name of Policyholder: John Alan Doe

**PREMIUM INFORMATION**

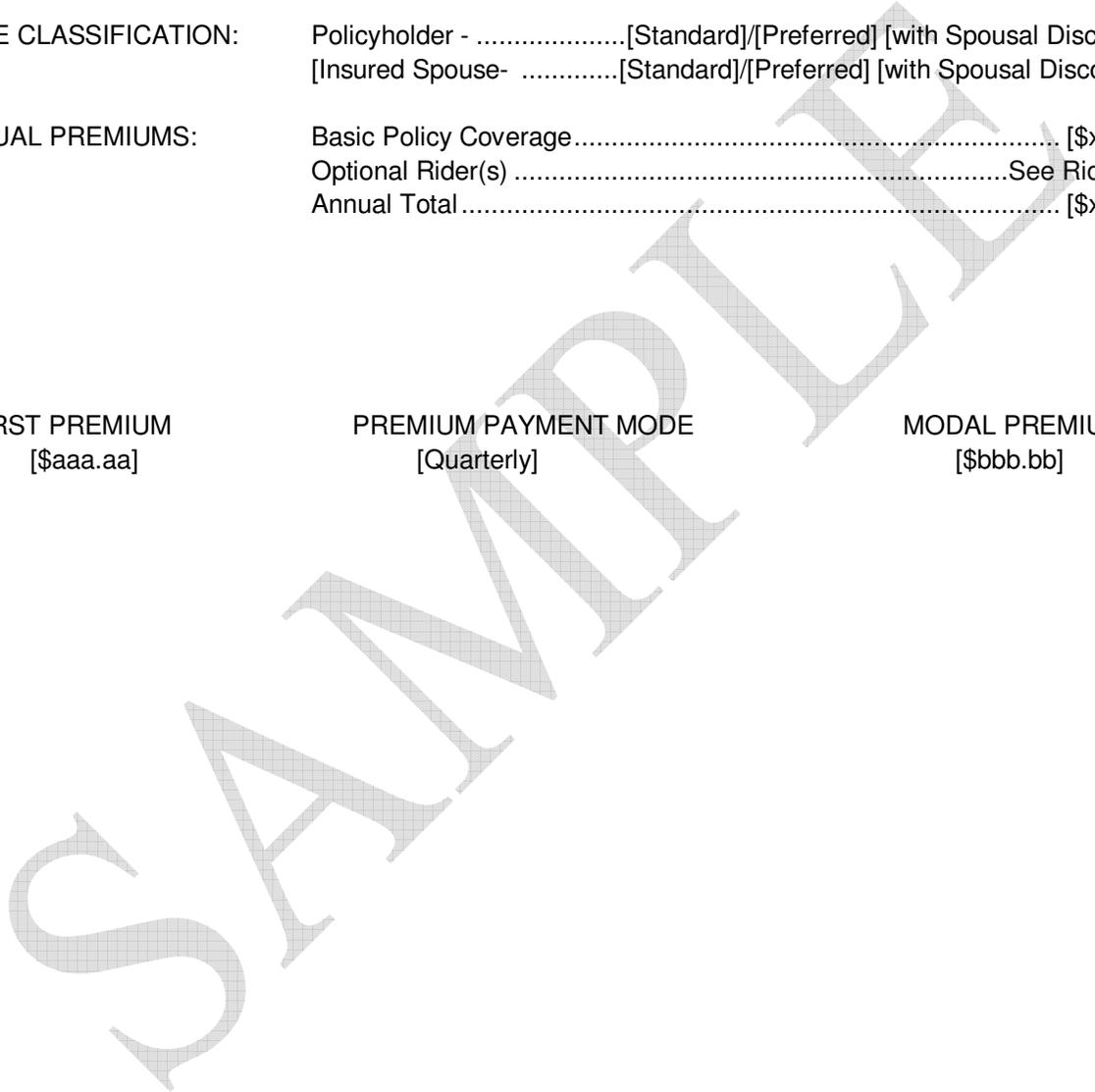
RATE CLASSIFICATION: Policyholder - .....[Standard]/[Preferred] [with Spousal Discount]  
[Insured Spouse- .....[Standard]/[Preferred] [with Spousal Discount]]

ANNUAL PREMIUMS: Basic Policy Coverage..... [\$xx.xx]  
Optional Rider(s) .....See Rider(s)  
Annual Total..... [\$xx.xx]

FIRST PREMIUM  
[\$aaa.aa]

PREMIUM PAYMENT MODE  
[Quarterly]

MODAL PREMIUM  
[\$bbb.bb]





[company name short]  
[company addr 1]  
[company addr2]  
[company city, st, zip]

**Important Change – Decision Required**

[mailing name1]  
[mailing name2]  
[address line 1]  
[address line 2]  
[address line 3]  
[address line 4]  
[address line 5]

The premium on your long term care insurance policy is increasing.

You have [4] options:

- 1 Keep your current coverage the same and pay the premium increase
- 2 Elect the Stable Premium option and avoid additional increases until at least [20xx]
- 3 [Review and Adjust your coverage to reduce your premiums]
- 4 <if nonfor available>{See Addendum for CNF, OLB, & NFO text }

Dear [Insured\_name1][and [insured name2]],

Thank you for choosing Genworth for your long term care insurance needs. We value your business and remain committed to providing quality service and being here when you need us the most.

This letter is to inform you that [<if not (Choice 2 & 2.1)>, as a result of higher than expected aggregate policyholder claims costs,] **the premium on your current long term care coverage will increase from [\$99,999.99] to [\$99,999.99] beginning on your next billing anniversary date, [Mmmm dd, yyyy].** [<if phased>**This increase will take place in a phased manner, over multiple years, as detailed on the enclosed option page.**] Please note that this increase is not due to a change in your health, age, or claims history.

[<if future increases planned>We plan to request [at least [99999%] in] additional premium increases over the next [6-8] years]. We appreciate that premium increases can be difficult for our policyholders. **To assist you, we are offering you several choices, including the new Stable Premium option that allows you to adjust your coverage to mitigate both the current and already planned future increases and lock in your new premium until at least [20xx].** We have also included other alternatives to consider as you evaluate your coverage needs. These options and your personalized information are outlined on the enclosed pages. We encourage you to discuss them with your financial advisor or a member of our Customer Service Team by calling [999 999.9999] before making a decision. For additional information regarding premium increases, please go to [Genworth.com/LTCpremiums].

Once again, thank you for being a Genworth policyholder.

Sincerely,

[Elena K. Edwards]  
[Senior Vice President]

P.S. This premium increase notice is not a bill [<if not EFT>—you will be billed separately]. Please take time to read the Important Information Regarding This Premium Increase included with this letter.

Underwritten by [company name long], [Lynchburg, VA]

**Long Term Care Insurance**

[Premium Increase Notice]  
[mm/dd/yyyy]  
[company name long]  
[Company Copyright]

**Insured:**

[Insured\_name1]  
[Insured\_name2]

**Policy Number:**

[policy\_number]

**Agent:**

[servicing agent name]  
[servicing agency name]  
[servicing\_agent\_address1]  
[servicing\_agent\_address2]  
[servicing\_agent\_address3]  
[servicing\_agent\_address4]  
[servicing\_agent\_address5]  
[servicing\_agent\_phone]

**Customer Service:**

**[999 999.9999]**

[company\_hours1]  
[company\_hours2]

**Fax:** [company\_fax]

**[[Genworth.com/LTCpremiums]**

**NOTE:** gray shading indicates print in blue font

**Addendum**

**For point #4 in top right:**

[<if CNF >Pay nothing more by electing the Contigent Nonforfeiture Benefit<or if OLB>Pay nothing more by electing the optional limited benefit <or if NFO>Pay nothing more by exercising your Non-Forfeiture rider]



# Coverage Options

Page [1] of [m]

Customer service:  
[company\_phone]  
[company address 1]  
[company city state zip]  
[company hours2]  
[company hours1]  
Fax: [company fax]

**<if values available>**  
**The median monthly cost of care provided in your area:**  
In Home Care [\$99,999.99] (Based on 44 hours/week)  
Assisted Living [\$99,999.99]  
Nursing Home [\$99,999.99]  
*Genworth [2017] Cost of Care Study*

Policyholder(s): [insured name2]  
[insured name2]  
Date: [mm/dd/yyyy]  
Policy number: [policy number]  
Premium before increase: [\$99,999.99] [annually]

Your options:	1 Keep current coverage	2 Elect Stable Premium option	3 Review & Adjust your coverage
If you are comfortable with your current level of coverage, pay the increased premium <b>&lt;not EFT&gt;</b> when you receive your next bill. If we don't hear from you by <b>October 1, 2017</b> <b>&lt;if phased&gt;</b> the first phase of this [999.9999%] increase will take effect.	If you would like to change your benefits to guarantee <b>no additional premium increases until at least [20xx]</b> , you may select [one of] the alternative[s] below. A detailed description of this option can be found in the enclosed sample endorsement.	See Addendum for text placed here.	
[Monthly maximum benefit]	Stable Premium [A] \$[5,400.00]	Stable Premium B \$[5,400.00]	Alternative [A<or>C] \$[5,400.00]
[Benefit period]	[4 years]	[3 years]	Alternative [B<or>D] \$[4,050.00]
[Inflation protection]	[Simple 5%]	Compound 1%	[3 years]
[Elimination period (days before benefits begin)]	[100 days Facility/ 0 days Home Care]	Compound 1% 180 days Facility/ 90 days Home Care	[Simple 5%]
[Coinsurance]	[None]	10%	[100 days Facility/ 0 days Home Care]
[Annual] premium [*]	[None]	None	[None]
[Annual] premium [**]	[None]	None	[None]
[Annual] premium [***]	None	None	None

**4** Pay nothing more

See Addendum for text placed here.

**<if phased> \*IMPORTANT:** This policy's premium increase is being phased in over multiple years; the increase schedule is listed on the reverse. The premiums quoted above reflect the final phase of this premium increase. The amount of this phased [annual] premium increase will vary depending on your selection above. Benefit amounts quoted above are as of [October 1, 2017].

You may have other ways to reduce your benefits than those shown above; contact the Customer Service team for additional quotes. More information on your options can be found in the enclosed [endorsement and] Important Information Regarding This Premium Increase. Please read all documents before making a decision. The options shown here are quotes and may change.

**You do not need to return this form if you are keeping your current coverage.** If changing your coverage to one of the options above, please check the blue box to indicate your choice, then sign and return this form by fax or mail [in the enclosed envelope] by: [Mmmmm dd, yyyy]

Policyholder Signature \_\_\_\_\_ Date \_\_\_\_\_  
**<if shared>** Policyholder Signature \_\_\_\_\_ Date \_\_\_\_\_

By signing, you represent and agree that (1) we are authorized to process the requested change to your policy, (2) the change will not be effective until reflected in a policy amendment we send to you, (3) the benefits and premiums quoted above are subject to confirmation and may change, and (4) you have read and understand the information on this form and the enclosed documents, including the Important Information Regarding This Premium Increase. {Note: If phased, premiums quoted on this page are the final phased premiums.}

<if phased premiums>

### Coverage Options

Page [2] of [m]

[insured name1]

[insured name2]

[mm/dd/yyyy]

[policy number]

Premium before increase: [\$99,999.99] [annually]

### Phased Premiums:

The amount of the phased [annual] rate increase will vary depending on your selection on the first page.

Date of phased increase	Keep current coverage:	Stable Premium [A]	Stable Premium B	Alternative [A<or>C]	Alternative [B<or>D]
[mm/dd/yyyy]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]
[mm/dd/yyyy]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]
[mm/dd/yyyy]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]
...	...	...	...	...	...
[mm/dd/yyyy]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]	[\$99,999.99]

### Addendum:

#### Instruction on Box #3:

<if any choices shown> If you are comfortable reducing your benefits, the alternative[s] below [is<or>are] designed to provide different levels of cost and coverage as you evaluate your current needs. <if no choices shown> If you are interested in other ways to adjust your coverage, you may be able to reduce your benefits and premiums. Please contact a member of our Customer Service Team at [company\_phone] to discuss your options.]

#### Instruction on Box #4

If you would like to stop paying premiums on your policy, you can choose the option at right. Please read the detailed description of the option in the enclosed <if CNF or OLB > endorsement and Important Information Regarding This Premium Increase. The benefit value is current as of the date of this notice; a final benefits value will be sent to you following your selection of this option.

# Genworth Important Information Regarding This Premium Increase

Genworth Life  
Genworth Life of New York  
Administrative Office:  
3100 Albert Lankford Drive  
Lynchburg, VA 24501

from Genworth Life Insurance Company and  
Genworth Life Insurance Company of New York\*

Page 1 of [m]

## About this premium increase

---

This premium increase is based on our expectation of aggregate future claims by our insureds. All policyholders in your class are receiving this rate increase and it is not due to a change in your individual health, age, claims history, or any other individual characteristic. We are implementing this increase in accordance with the laws and regulations of [issue state name] in which your policy was issued for delivery. States require insurance companies to notify them of a rate increase for long term care policies. Additionally, state regulation requires insurance carriers, like Genworth, to support rate increase requests with actuarial justification. For additional information regarding premium increases, please go to [\[Genworth.com/LTCpremiums\]](http://Genworth.com/LTCpremiums).

## Guaranteed renewable

---

Your long term care insurance coverage is guaranteed renewable, meaning that we cannot cancel or refuse to continue your coverage because of a change in your individual health or age. As long as you pay the required premium on time and have not used all your benefits, coverage will continue.

Guaranteed renewable does not mean that premiums are guaranteed to remain the same indefinitely. In accordance with the terms of your policy, we reserve the right to change premiums, and it is [possible<or>likely] that your premium will increase again in the future. However, if you elect the Stable Premium option, your new premium will not increase until at least [20xx].

## Benefits

---

The benefit values presented in the accompanying letter are approximate due to rounding. Covered benefits payable at the time of a claim will be calculated in accordance with your policy. Benefits are payable only when you meet the terms and conditions for receiving benefits under your policy.

## Considerations related to adjusting your coverage

---

All of the options available to you as alternatives to paying the full premium increase may not be of equal value. Some states require policyholders to maintain minimum benefit levels, which may reduce the options available. [<if partnership>If you have a Partnership policy, reducing your coverage may result in a loss of Partnership status, a change in your asset protection type and may reduce your overall protection.]

Your benefit period is the period of time that is used to calculate the lifetime payment maximum. Your coverage is based on this lifetime payment maximum, not a certain period of time. If your daily/monthly benefit amount and/or the benefit period are reduced, the maximum benefits payable under your policy will automatically be reduced because the policy maximum is a function of the daily benefit amount and the benefit period. In addition, other benefit amounts may be reduced. Changes to the daily/monthly maximum benefit and/or benefit increase option will change the related original benefit amounts and the amount of any benefit increase option increment. If you elect to drop or reduce your benefit increase option (if applicable), you will keep your increased daily/monthly maximum benefit and your premium will be adjusted accordingly. You may also reduce your daily/monthly maximum benefit and your premium will be further adjusted.

Any benefits paid or payable are deducted from the reduced policy maximum. If you have previously been on claim, adjusting your elimination period may not be appropriate. Reducing benefits while you are receiving policy benefits is generally not advisable.

If you can't pay further premiums you may have the option of stopping further payments and obtaining a benefit for long term care services approximately equal to the amount of premium paid, please refer to the Coverage Options page for further details.

[<if limited pay> Your policy has a limited number of premium payments required to become paid-up. That means if you pay all required premiums as they become due, this policy will be paid-up and no future premiums will be required including rate increases. Careful consideration should be given before selecting an option that stops further payments. Our customer service representatives would be happy to discuss this option with you.]

## <For those with unlimited benefits in states where different rate increase percentage approved for lifetime vs. limited> Moving from unlimited lifetime benefits to limited benefits

---

The rate increase percentage for policyholders with an unlimited lifetime benefit is higher because expected aggregate claims are disproportionately greater for these policyholders. When policyholders reduce their benefit period from an unlimited to limited benefit period (for example, from unlimited to a 5-year benefit period) the new premium would then be subject to the premium rate increase applicable to policies with the selected limited benefit period. Note: This section does not apply if you elect the Stable Premium option.

### Understanding the Stable Premium option

---

The Stable Premium option is designed to mitigate the impact of current and planned future increases by changing your benefits, while also guaranteeing that your new premium will not increase until at least [20xx]. **<if both versions>Both versions of** [t]his option will provide a one percent (1%) compound benefit increase going forward, and you will retain the daily/monthly benefits increased pursuant to your current benefit increase option (if any) prior to acceptance of this change. As part of the calculation of your new resulting premium, your premium will be adjusted in consideration of this retained benefit. There may be other options available to you to mitigate or offset the current premium increase, however only the Stable Premium option includes the additional benefit of having no further premium increases implemented on your policy until at least [20xx]. Please review all of the documents in this package, in particular the Coverage Options page and the sample endorsement, for more details regarding how your benefits and premium will change under the Stable Premium option.

Please note: By accepting any change in benefits you may have a lower dollar amount of benefits available for future claims. In accordance with your policy, if you have previously been on claim, benefits that have already been paid under your policy will count toward your new lifetime payment maximum. This will be shown on the updated schedule page that you will receive if you elect this option. Similarly, in accordance with your policy, any days which have already satisfied your Elimination Period will continue to satisfy your new Elimination Period under the Stable Premium option.

If you choose this option, you may change your decision in writing within 60 days of our written confirmation of your benefit changes under this option. After the 60 day period, you cannot revert back to the benefits you had prior to electing the Stable Premium option. The only benefit change that will be available to you going forward is a reduction to an available Daily Payment Maximum or dropping an applicable rider.

**<if NFO option>**

#### Select a Limited Benefit with No Further Premium Requirement

---

**<if OLB>You may elect an Optional Limited Benefit.** As a result of this premium increase, we are offering an Optional Limited Benefit. This endorsement allows you to elect a limited paid-up long term care insurance benefit, which is available up to 120 days after the next Billing Anniversary Date on which your rate increase is effective. This benefit provides a paid-up benefit with total coverage equal to the total premium paid, excluding waived premium, less any claims paid. A policy lapse at any time during the 120-day period following the due date of the increased premium will be deemed an election of this benefit.

**Please note:** This Endorsement could significantly reduce the policy benefits. Please review the Optional Limited Benefit Endorsement for more detailed information prior to making this election.

**<OR>**

**<if NFO Rider on Policy >**

**You may exercise the Non-Forfeiture Rider.** Your policy includes the Non-Forfeiture Rider which you may elect to exercise at any time. This Rider allows you to have a paid-up long term care insurance benefit as described in the Rider.

**Please note:** This rider could significantly reduce the policy benefit. Please review the Non-Forfeiture Rider in your [policy <or>certificate] for more detailed information prior to making this election.

**<OR>**

**<if CNF >**

**You may elect a Contingent Non-Forfeiture Benefit.** This rate increase qualifies you to receive a Contingent Non-Forfeiture Benefit which is available up to 120 days after the next Billing Anniversary Date on which your rate increase is effective. This endorsement allows you to reduce your policy benefits so the required premium payments are not increased and convert your coverage to a paid-up status with a shortened benefit period and reduced benefits plan. A policy lapse at any time during the 120-day period following the due date of the increased premium will be deemed an election of this benefit.

**Please note:** This Endorsement could significantly reduce the policy benefit. Please review the Contingent Non-Forfeiture Benefit Endorsement for more detailed information prior to making this election.

### Waiver of premium benefit

---

If you are currently receiving a Waiver of Premium benefit, you will not be required to pay the increased premium until the Waiver of Premium benefit no longer applies, as provided for in your policy. If your policy does not provide a Waiver of Premium benefit, you will be required to pay the increased premium, even if you are receiving policy benefits. Prior to paying your bill with the increased premium you may want to contact one of our Customer Service Representatives to discuss options you may have to reduce your premiums by changing your policy benefits.

### Payments by automatic withdrawal/third-party account/online banking

---

If you are using automatic withdrawals, the new required premium will be automatically deducted from your bank checking account. If you are using a third-party account or online banking to pay your premiums, please be sure to make the proper adjustments and arrangements for paying the new required premium amount.

**Time frame to reverse decision**

---

If you opt to reduce your benefits or cancel your coverage, your request to reverse any such decision must be in writing, signed by you, and received by us no more than 60 days after the date of our written confirmation of your reduction/cancellation.

**Rate increase history**

---

In accordance with the requirements of [issue state name] where your policy was issued for delivery, we are providing you with the history of previous rate increases that have been implemented on policies that were underwritten by Genworth companies.

**About Genworth**

---

Genworth companies began selling long term care insurance in 1974 and have been the largest provider of long term care insurance policies in the United States. It is important to note that Genworth regularly monitors the business performance of these policies and believes that its companies' reserves are adequate and appropriate at this time. To obtain information regarding Genworth company financial strength, please visit [\[genworth.com\]](http://genworth.com).

**FLESCH SCORE CERTIFICATION  
GENWORTH LIFE INSURANCE COMPANY**

We certify that to the best of our knowledge and belief, the Flesch score of the below-referenced form meets any readability requirements in effect in your state:

<b>Form Number</b>	<b>Description</b>	<b>Flesch Score</b>
7030END-SPO 1017	Stable Premium Option Endorsement (PCS II)	50

For Genworth Life Insurance Company,



By: \_\_\_\_\_  
Vice President, Product Compliance