Genworth's **360°LifeView**[SM] Underwriting

With the Genworth Financial companies' 360° LifeView[SM] Underwriting you can expect:

- More personalized evaluations
- More competitive offers
- More consistent decisions
- Quicker turnaround
- Fewer requirements

Genworth® Financial

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360°LifeView℠

Underwriting

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Making the Right Offer the First Time

With 360° LifeView,℠ we use a clear consistent underwriting methodology that focuses on the most meaningful risk factors to make our best offer the first time.

Clear Consistent Communication

Our goal is to provide better customer service and ensure a higher placement ratio through focused communication that helps you understand our competitive position. Our strategy to improve the information you receive at every step of the application process is unfolding rapidly.

Fewer Requirements

We have reduced the number of requirements in several areas, this helps simplify and speed up the underwriting process. For example, we no longer automatically require an APS for all hypertension cases. Check out our modified Age and Amount Guidelines.

360° LifeView℠ Points

Introducing 360° LifeView Points, a proprietary credit/debit program that may improve your client's rating by one rate class. You don't have to ask for it—our underwriters will automatically use it to evaluate your Standard or better risk clients. 360° LifeView Points strengthens our leadership position in the Standard and better space, enabling more consistent, mortality based underwriting decisions and giving you the most accurate decision the first time.

Competitive Positioning

Target Market

Your clients who fall into our targeted market will receive our most competitive offers.

- Up to $5MM in life insurance
- ≤ Age 75
- Preferred Best No Nicotine Use – Table 4 (mild/moderate impairment)

Top 12 Competitive Spots

Medical Risks

Mild forms of some medical conditions may be available for Preferred Best No Nicotine Use if there are no adverse features and they meet the following descriptions:

1. **Build**: ages 0-64 with BMI ≤ 30 and ages 65+ with BMI ≤ 33
2. **Total Cholesterol**: treated or untreated total cholesterol between 150-300
3. **Blood Pressure**: treated or untreated
4. **Depression**: ages 30-60, mild cases with documented stability of symptoms and work/family lifestyle
5. **Anxiety**: mild cases
6. **Sleep Apnea**: mild treated disease that has resolved or stabilized
7. **Ulcerative Colitis**: mild local disease well followed and stable for at least 3 years
8. **Asthma**: mild, stable asthma controlled with inhaled medications for at least 5 years
9. **Arthritis**: osteoarthritis or mild inflammatory arthritis controlled for at least 5 years
10. **Gestational Diabetes**: remote history in only one pregnancy with normal ongoing blood glucose levels and no family history of diabetes

Non-Medical Risks

11. **Aviation**: Preferred No Nicotine Use is available for Private Pilots pleasure flying only: Instrument Flight Rating licensed, 26-150 hours per year
12. **Recreational Scuba Diving**: Preferred Best No Nicotine Use available to depths of 100 feet, no caves, wrecks, retrievals, ice, search and rescue

Uninsurable Conditions

Applications for clients with any of the following impairments should not be written.

Issue	Timeline
Abdominal aortic aneurysm corrected surgically	Within past 6 months
Alcoholism treatment (detoxification and/or inpatient alcohol program)	Within past 2 years or history of treatment and currently using or used within last year
Alzheimer's disease/dementia	At any time
Bankruptcy (personal), Chapter 7	Not discharged
Cancer treated with chemotherapy or radiation therapy	Currently
Cirrhosis of the liver	At any time
Illegal drug use (other than marijuana)	Within 3 years
DUI/DWI (more than one)	Within 5 years
Gastric/intestinal bypass	Within 1 year
Heart attack	Within 6 months
Heart bypass surgery (CABG)	Within 3 months
HIV positive	At any time
Kidney failure/disease, on dialysis	Currently
Lung disorder, on oxygen	Currently
Mental disorder requiring hospitalization	Within 1 year
Organ transplant pending or received	Within 1 year
Probation/parole	Currently serving
Pregnant with complications (i.e. toxemia, eclampsia, pre-eclampsia)	Currently
Suicide attempt	Within 2 years
Stroke (CVA)	Within 1 year
Valve replacement	Within 1 year

This list is not all-inclusive, as other medical conditions and timelines could result in an additional underwriting charge or decline of coverage. If your client has a medical condition not listed here, please refer to the "Impairments Guide" section for further information.

Age and Amount Guidelines

The listing on the next page outlines the required tests our underwriters will need based on your client's age and requested coverage amount. It is important to get your client's age and coverage amounts as soon as possible.

For all ages, underwriters will determine if the medical information received is sufficient to make an informed decision and they may require additional medical information on a case-by-case basis.

List of Approved Vendors

Paramedical Exams	
American Para Professional Systems (APPS)	800 635.1677
Examination Management Services, Inc. (EMSI)	800 872.3674
ExamOne	800 768.2056
Hooper Holmes (Portamedic)	866 335.5575
Superior Mobile Medics	800 898.3926
Attending Physician's Statement (APS)	
Genworth underwriters will order an APS as necessary, and will use one of the following:	
Examination Management Services, Inc. (EMSI)	888 399.2741
ExamOne	800 768.2056
Express Imaging	888 846.8804
Hooper Holmes	800 999.1079
J & H Copy Services	714 921.0102
Mediconnect	800 489.8554
Western Field Investigations (WFI)	800 999.9589
Laboratory Services	
(Genworth orders all)	
Clinical Reference Lab (CRL)	
ExamOne (LabOne)	
Hooper Holmes (Heritage Lab)	
Inspections	
(Genworth orders all)	
Examination Management Services, Inc. (EMSI)	
ExamOne	
HooperHolmes	
Motor Vehicle Reports	
(Genworth orders all)	
ChoicePoint	

Age and Amount Guidelines

(Age defined by nearest birthday)

Ages	0-17	18-39	40-49	50-59	60-70	71+
$0 to $99,999	Non-Med	Paramed HOS SMAC	Paramed HOS SMAC	Paramed HOS SMAC	Paramed HOS SMAC EKG	Paramed HOS SMAC EKG
$100,000 to $299,999	Non-Med	Paramed HOS SMAC	Paramed HOS SMAC	Paramed HOS SMAC	Paramed HOS SMAC EKG APS[1]	Paramed HOS SMAC EKG APS[1]
$300,000 to $500,000	Non-Med	Paramed HOS SMAC	Paramed HOS SMAC	Paramed HOS SMAC EKG	Paramed HOS SMAC EKG APS[1]	Paramed HOS SMAC EKG APS[1]
$500,001 to $1,000,000	Paramed HOS APS	Paramed HOS SMAC	Paramed HOS SMAC	Paramed HOS SMAC EKG	Paramed HOS SMAC EKG APS[1] IR (65+, $1M)	Paramed HOS SMAC[1] EKG APS[1] IR at $1M
$1,000,001 to $2,000,000	Paramed HOS APS	Paramed HOS SMAC	Paramed HOS SMAC EKG	Paramed HOS SMAC EKG	Paramed HOS SMAC EKG APS[1] IR (65+)	Paramed HOS SMAC EKG APS[1] IR
$2,000,001 to $3,000,000	Paramed HOS APS DBS IR at $3M	Paramed HOS SMAC IR at $3M	Paramed HOS SMAC EKG IR at $3M	Paramed HOS SMAC EKG IR at $3M	Paramed HOS SMAC EKG APS[1] IR (65+)	Paramed HOS SMAC EKG APS[1] IR
$3,000,001 to $5,000,000	Paramed HOS APS DBS IR	Paramed HOS SMAC APS IR	Paramed HOS SMAC EKG APS IR	Paramed HOS SMAC EKG APS IR	Paramed HOS SMAC EKG APS[1] IR	Paramed HOS SMAC EKG APS[1] IR
$5,000,001 to $10,000,000	Paramed HOS APS DBS IR	MD exam HOS SMAC EKG APS IR	MD exam HOS SMAC EKG APS IR	MD exam HOS SMAC Treadmill[2] APS IR	MD exam HOS SMAC Treadmill[2] APS[1] IR	MD exam HOS SMAC EKG APS[1] IR
$10,000,001 and Up	Paramed HOS APS DBS IR	MD exam HOS SMAC EKG APS IR	MD exam HOS SMAC Treadmill[2] APS IR	MD exam HOS SMAC Treadmill[2] APS IR	MD exam HOS SMAC Treadmill[2] APS[1] IR	MD exam HOS SMAC EKG APS[1] IR

Definitions

APS: Attending Physician's Statement
DBS: Dried Blood Spot
EKG: Electrocardiogram
HOS: Home Office Specimen
SMAC: Blood Profile
IR: Inspection Report

[1] For ages 65 and over, the APS must include evidence that the proposed insured visited his/her personal care physician in the 18 months immediately before the date of the application Part I or II, whichever is later.

[2] For persons with known coronary artery disease, treadmill stress test is NOT required. For these persons, requirements include a resting EKG, all other age and amount requirements and an APS that includes full cardiac records. Treadmills on the Survivorship Universal Life (SUL) insurance products will be based on one-half the total face amount requested.

Underwriting Class Criteria Ages 0 - 64

All applicants must meet specific criteria to qualify for these underwriting classes. Meeting these criteria is not a guarantee that an applicant will qualify for a specific class.

Build Chart: Male & Female **Ages 0 - 64**				
Height (ft/in)	**Height (inches)**	**WEIGHT**		
		Preferred Best	**Preferred**	**Select / Standard**
4'10"	58″	143	158	167
4'11"	59″	148	163	173
5'0"	60″	153	168	179
5'1"	61″	158	174	185
5'2"	62″	164	180	191
5'3"	63″	169	186	197
5'4"	64″	174	192	204
5'5"	65″	180	198	210
5'6"	66″	186	204	216
5'7"	67″	191	211	223
5'8"	68″	197	216	230
5'9"	69″	203	223	236
5'10"	70″	209	229	243
5'11"	71″	215	236	250
6'0"	72″	221	242	258
6"1"	73″	227	250	265
6'2"	74″	233	256	272
6'3"	75″	240	264	279
6'4"	76″	246	271	287
6'5"	77″	253	278	295
6'6"	78″	259	285	302
6'7"	79″	266	292	310
6'8"	80″	273	300	318
6'9"	81″	280	307	326
6'10"	82″	286	315	334
6'11"	83″	294	323	343
Maximum BMI (Body Mass Index)		30	33	35

Underwriting Class Criteria Ages 0 - 64

Condition	Preferred Best		Preferred	Select	Standard
Nicotine No use of nicotine or nicotine substitutes	In last 5 years		In last 3 years	In last 2 years	In last 12 months
	Occasional cigar use is considered non-nicotine if 12 or less per year and current nicotine test is negative				
Alcohol/Substance Abuse No history of or treatment for alcohol or substance abuse	Ever		In last 10 years	In last 7 years	In last 7 years
Aviation	Flat extra premium (available in most cases) or exclusion rider.				
Blood Pressure Treated or untreated, current and past readings cannot exceed:	Age 0-50	135/85	140/90	145/90	150/90
	Age 51-64	140/85	145/90	150/90	155/90
Cancer History Includes all cancers except basal cell carcinoma	Not available if any cancer history		Not available if any cancer history	Not available if any cancer history	May be available based on specific cancer history
Total Cholesterol Treated or untreated	Underwriting review is required if cholesterol is lower than 150 or greater than 300				
Cholesterol/HDL Ratio cannot exceed:	Female	4.0	5.0	6.0	7.0
	Male	4.5	5.5	6.5	7.5
Driving History No DWI, DUI, reckless driving, license revocation or suspensions	In last 5 years		In last 5 years	In last 3 years	In last 2 years
Family History	No coronary artery disease or cancer disease (except basal cell carcinoma) in either parent before age 60		No coronary artery disease or cancer death in either parent before age 60	Not more than one coronary artery disease death in parents before age 60	Not more than one coronary artery disease death in parents before age 60
Hazardous Occupation or Avocation	Coverage available (in most cases); however may require flat extra premium				
Personal History	No diseases, disorders or activities that would result in substandard mortality				

Underwriting Class Criteria Ages 65 & Older

All applicants must meet specific criteria to qualify for these underwriting classes. Meeting these criteria is not a guarantee that an applicant will qualify for a specific class.

We will also review functional state (including exercise capacity and mobility), weight change and nutritional status, cognition, social connectivity and level of independent living.

Build Chart: Male & Female **Ages 65+**					
Height (ft/in)	**Height (inch)**	**Min. Weight**	**WEIGHT**		
			Preferred Best	**Preferred**	**Select / Standard**
4'10"	58″	86	158	167	177
4'11"	59″	89	163	173	183
5'0"	60″	92	168	179	189
5'1"	61″	95	174	185	195
5'2"	62″	98	180	191	202
5'3"	63″	101	186	197	208
5'4"	64″	105	192	204	215
5'5"	65″	108	198	210	222
5'6"	66″	111	204	216	229
5'7"	67″	115	211	223	236
5'8"	68″	118	216	230	243
5'9"	69″	122	223	236	250
5'10"	70″	125	229	243	257
5'11"	71″	129	236	250	265
6'0"	72″	132	242	258	272
6"1"	73″	136	250	265	280
6'2"	74″	140	256	272	287
6'3"	75″	144	264	279	295
6'4"	76″	148	271	287	304
6'5"	77″	151	278	295	312
6'6"	78″	155	285	302	320
6'7"	79″	159	292	310	328
6'8"	80″	164	300	318	336
6'9"	81″	168	307	326	345
6'10"	82″	172	315	334	354
6'11"	83″	176	323	343	362

Maximum BMI (Body Mass Index)	33	35	37
Minimum BMI (Body Mass Index)	18	18	18

Underwriting Class Criteria Ages 65 & Older

Condition	Preferred Best	Preferred	Select	Standard
Nicotine No use of nicotine or nicotine substitutes	In last 5 years	In last 3 years	In last 2 years	In last 12 months
	Occasional cigar use is considered non-nicotine if 12 or less per year and current nicotine test is negative			
Alcohol/Substance Abuse No history of or treatment for alcohol or substance abuse	Ever	In last 10 years	In last 7 years	In last 7 years
Aviation	Ages 65-70 flat extra premium available, ages 71+ require Aviation Exclusion Rider			
Blood Pressure Treated or untreated, current and past readings cannot exceed:	145/90	150/90	155/90	160/90
Cancer History Includes all cancers except basal cell carcinoma	Not available if any cancer history	Not available if any cancer history	Not available if any cancer history	May be available based on specific cancer history
Total Cholesterol Treated or untreated	Underwriting review is required if cholesterol is lower than 150 or greater than 300			
Cholesterol/HDL Ratio cannot exceed:	Female 4.0	5.0	6.0	7.0
	Male 4.5	5.5	6.5	7.5
Driving History No DWI, DUI, reckless driving, license revocation or suspensions	In last 5 years	In last 5 years	In last 3 years	In last 2 years
Family History No family history limitation if age 75 or older	Ages 65-74: No cancer disease (except basal cell carcinoma) in either parent before age 60	Ages 65-74: No cancer death in either parent before age 60	No family history limitation	No family history limitation
Hazardous Occupation or Avocation	Coverage available (in most cases); however may require flat extra premium			
Personal History	No diseases, disorders or activities that would result in substandard mortality			

Impairments Guide

You can give your clients a more accurate quote if you preview the possible underwriting class that may be available to them, as well as alert them to additional information that may be needed if a listed impairment applies to them.

Key points to keep in mind:

- The severity of medical conditions varies among individuals and individuals may have multiple impairments.
- Underwriters will review the functional state of applicants age 65 or older. This includes their cognition, mobility and exercise capacity, weight change and nutritional status, social connectivity and level of independent living.
- If medical testing has been advised but not yet completed, the case will be declined.
- Underwriters' offers depend on the merits of each case.

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed to Evaluate Underwriting	Possible Underwriting Decision	
			Best Class Available for Non-nicotine Users*	Decline Probable
Alcohol Abuse History and Treatment		MVR Alcohol use supplement	Individual consideration Preferred may be available if recovered for more than 10 years	Alcoholism treated within 2 years OR Past history of treatment for alcoholism and used alcohol within 2 years OR Currently taking Antabuse® or other anti-drinking medication
Alzheimer's Disease				Decline
Aneurysm, Aortic	Required for all cases		Depends on extent of disease and recovery Individual consideration	Surgical correction of abdominal aortic aneurysm within 6 months
Angina	Refer to Heart Disease			

*Current nicotine use may increase the rating or result in a decline.

Impairments Guide

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed to Evaluate Underwriting	Possible Underwriting Decision	
			Best Class Available for Non-nicotine Users*	Decline Probable
Asthma*	Required if: • Hospitalized within 1 year • Oral steroid used continually for more than 1 month in last year	Onset age Frequency, dates of attacks Emergency room or hospitalization dates Treatment Home oxygen use Smoking history	Preferred may be available if: • Stable mild disease • No hospitalizations • No other lung conditions	Using oxygen routinely in the last month Unstable poor control Severe disease Frequent hospitalizations Intubation within 2 years
Blood Disorder	Required if: • Male with anemia • All platelet disorders (e.g. thrombocytopenia, ITP, thrombocytosis) • Bone marrow biopsy • Polycythemia • Hemochromatosis	Diagnosis Blood counts and investigations Pathology reports from bone marrow biopsy	Varies by diagnosis and severity	
Bronchitis*	Required if: • Chronic bronchitis (more than 3 bouts per year) • Hospitalized within 1 year		Preferred available	Using oxygen routinely in last month
Build Chart Check height. If weight equals or exceeds chart limits, APS required.	5′0″ – 212 5′1″ – 219 5′2″ – 226 5′3″ – 233	5′4″ – 241 5′5″ – 248 5′6″ – 256 5′7″ – 264	5′8″ – 272 5′9″ – 280 5′10″– 288 5′11″– 296	6′0″ – 305 6′1″ – 313 6′2″ – 322 6′3″ – 331	6′4″ – 340 6′5″ – 349 6′6″ – 358 6′7″ – 367	6′8″ – 376 6′9″ – 386 6′10″– 395 6′11″– 405
Cancer*	Not required if: • Basal cell carcinoma Required for all other cases	All records (surgery, oncology, pathology and recent follow up) Type of cancer, stage, grade and recurrence Treatment types with dates completed	Individual consideration Preferred classes may be available for basal/squamous cell of the skin Standard is the best class for non-skin cancers	Treatment with chemotherapy or radiation within 1 year Depends on cancer type and stage

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Impairments Guide

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed to Evaluate Underwriting	Possible Underwriting Decision	
			Best Class Available for Non-nicotine Users*	Decline Probable
Chest Pain*	Required if: • Currently being treated with nitroglycerine, Coumadin®, Plavix® • Had cardiac events and procedures (e.g. coronary artery bypass, angioplasty (PTCA))	All investigations for chest pain that required urgent medical care or were considered cardiac in nature	Varies by cause and severity of underlying impairment	Heart attack (MI) within 6 months Coronary artery bypass within 3 months
Chronic Lung Disease*	Required if: • Chronic bronchitis • COPD (chronic obstructive pulmonary disease) • Emphysema • Sarcoidosis	Type of lung disorder Pulmonary function test results Chest x-ray or CT reports Treatment Smoking history	Varies by cause and severity of underlying impairment	Using oxygen routinely in the past month
Cirrhosis				Decline
Clotting Disorders	Required for all bleeding / clotting disorders: • Hemophilia • Factor VIII or IX deficiency • Factor V Leiden • Von Willebrand's disease • Prothrombin mutation • Antithrombin deficiency • Protein C or S deficiency	Details of bleeding or clotting history Investigations Hospitalizations Treatments	Varies by condition and control Standard may be available	

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Impairments Guide

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed to Evaluate Underwriting	Possible Underwriting Decision	
			Best Class Available for Non-nicotine Users*	Decline Probable
Colitis/Ileitis **(Crohn's Disease, Regional Enteritis, Ulcerative Colitis, Ulcerative Proctitis)**	Required if: • Crohn's disease (regional enteritis) • Ulcerative colitis	Age when diagnosed Extent of disease Frequency of attacks Most recent exacerbation Treatment	Varies by condition and control Preferred may be available for ulcerative proctitis Standard may be available for others	Severe attack within 1 year Surgery within 6 months
Coughing up blood	Required for all cases		Ratings based on cause	
Dementia (Includes Alzheimer's Disease)				Decline
Depression	Required if: • Bipolar disorder (manic depression) • Attempted suicide more than 2 years ago • Currently seeing a psychiatrist or psychologist	A phone interview may be requested for cases in which an APS is not required	Preferred may be available depending on severity and recovery (no current medications)	Depends on severity and control Hospitalized for psychiatric reason within 1 year Suicide attempt within 2 years With alcohol/drug abuse or treatment
Diabetes	Required for all cases	Type of diabetes Age when diagnosed Treatment and details of control	Varies by severity and control Standard may be available if over age 50 with optimal control and no complications	Pregnant and has gestational diabetes
Dizziness/Fainting	Not required	Details required for all applicants age 65 and over	Rated for cause	
Drug Abuse History and Treatment	Required for all cases (other than marijuana)	MVR Drug use Supplement	Individual consideration Preferred may be available if recovered for more than 10 years	Used illegal drugs (other than marijuana) within 3 years
Epilepsy/Seizures	Required if took medication for epilepsy/ seizures within 5 years	Type of seizure Frequency of attacks Date of last seizure Treatment	Standard may be available	Petit mal (absence seizures) diagnosed within 6 months Grand mal (tonic-clonic) diagnosed within 1 year

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Impairments Guide

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed to Evaluate Underwriting	Possible Underwriting Decision	
			Best Class Available for Non-nicotine Users*	Decline Probable
Gastric Bypass Surgery	Required if: Surgery/procedure was done within 1-3 years	Pre-operative and current weights Any complications from surgery	Independent consideration	Gastric bypass surgery within 1 year
Gastro-Intestinal Bleeding	Not required if bleeding was caused by hemorrhoids Required for all others if bleeding within 3 years		Rated for cause	
Headaches	Required if: • Hospitalized within 1 year • Disability due to headaches is disclosed		Rated for cause Many may be eligible for Preferred	
Heart Disease – Angina, Angioplasty, Bypass (Coronary Artery Disease, Coronary Bypass - CABG)	Required for all cases	All cardiac history, consultations, tests and treatments	Standard may be available	Uninvestigated unstable angina Angioplasty surgery less than 1 month ago CABG less than 3 months ago Heart attack (MI) within 6 months
Arrhythmia/ Palpations	Required for all cases	All cardiac history, consultations, tests and treatments	Varies by cause and control Preferred may be available if well controlled or recovered	Depends on severity and presence of other conditions
Heart Attack/ Myocardial Infarction (MI)	Required for all cases	All cardiac history, consultations, tests and treatments	Depends on severity Table 2 may be available	Depends on severity and presence of other conditions Heart attack (MI) within 6 months
Murmur, Mitral Valve Prolapse (MVP), Valve Surgery	Not required if MVP without any other valve problem Required for all other cases	All cardiac history, consultations, tests and treatments	Preferred may be available if no other heart conditions	Heart valve surgery within 1 year
Hepatitis A, B and C	Required if Hepatitis C	Hepatitis screening tests will be included in the insurance lab tests for all those with a history of Hepatitis	Preferred may be available if fully recovered from Hepatitis A or B If fully recovered from Hepatitis C, Table 2 is best available	Depends on severity

*Current nicotine use may increase the rating or result in a decline.

Impairments Guide

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed to Evaluate Underwriting	Possible Underwriting Decision	
			Best Class Available for Non-nicotine Users*	Decline Probable
Hypertension / High Blood Pressure	Not required or required at underwriting discretion only: • Nonsmokers ages < 56 face amounts < $1,000,001 Required for all other		Rate classes vary by blood pressure levels See: FOR AGES 0-64 Page 7 FOR AGES 65+ Page 9	Uncontrolled blood pressure Associated with serious cardiovascular disease High blood pressure and currently pregnant
HIV (Human Immunodeficiency Virus)				Decline
Kidney Disease/Disorder	Not required if: • Kidney stone • Kidney infection Required for all others		Preferred may be available for kidney stones, infections and simple cysts	Kidney failure On dialysis Kidney transplant pending or received within 1 year Polycystic disease
Lupus (SLE)	Required for all cases	Type of lupus (discoid or systemic) Organs involved Treatment	Standard may be available for mildest cases	Depends on severity Systemic lupus with multiple organs involved
Mental Illness	Required if: • Suicide attempt more than 2 years ago • Currently seeing a psychiatrist/ psychologist • Bipolar/manic depression • Schizophrenia	Date of diagnosis Treatment Response to treatment Recurrence Current status Stability/control	Varies by cause and severity	Hospitalized for psychiatric reason within 1 year Suicide attempt within 2 years
Multiple Sclerosis (MS)	Required for all cases	Age at diagnosis Course of disease Response to treatment	Standard may be available for very stable, long-term disease	Depends on severity Rapidly progressive disease
Muscular Dystrophy	Required for all cases		Varies by condition and severity	
Neurological Disorders	Required for all cases		Varies by condition and severity	

*Current nicotine use may increase the rating or result in a decline.

Impairments Guide

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed to Evaluate Underwriting	Possible Underwriting Decision	
			Best Class Available for Non-nicotine Users*	Decline Probable
Organ Transplant	Required for all cases		Kidney transplant recipients are rated at very high substandard rates Most other organ transplant recipients are uninsurable	On a transplant list or awaiting a transplant Received a transplant within 1 year
Pancreatitis	Required if: • Had active pancreatitis 6 months - 5 years before application		Varies by underlying cause, severity, recurrence pattern and recovery Standard may be available	Active pancreatitis within 6 months Associated with alcohol or substance abuse
Paralysis	Not required if: • Bell's Palsy Required for all others	Cause of paralysis (disease or injury) Degree of injury and recovery Functional impairment Impairment of organs	Preferred may be available for Bell's Palsy, if fully recovered Others are rated according to severity with mild to high substandard rates	Paraplegia diagnosed within 6 months Quadriplegia
Parkinson's Disease	Required for all cases	Age at diagnosis Progression of disease Severity of disease Presence of dementia	Varies by age and severity Standard rates may be available for mild disease with onset at age 59 and older	Depends on severity Rapidly progressive disease Dementia is present
Peripheral Vascular Disease*	Not required if: • Varicose veins Required for all others	Degree of involvement Treatment Response to treatment Presence of risk factors and other conditions	Varies by severity and associated vascular conditions	
Pituitary Disorder	Required for all cases		Varies by condition and severity	
Pregnancy	Not required if: • Normal pregnancy			Any complication of pregnancy (e.g. gestational diabetes, toxemia, eclampsia, pre-eclampsia)

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Impairments Guide

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed to Evaluate Underwriting	Possible Underwriting Decision	
			Best Class Available for Non-nicotine Users*	Decline Probable
Prostate Disorder	Required if: • Prostate cancer • PIN (prostate interepithelial neoplasia) • Prostate biopsy within 2 years	PSA test records All pathology and treatment records PSA testing will also be done during underwriting	Standard is best available for prostate cancer and PIN Preferred may be available for others	
Rheumatoid Arthritis (RA)	Not required if: • Only has osteoarthritis • Arthritis is treated with NSAIDS (non-steroidal anti-inflammatories) only Required for all others	Number of joints affected Severity Treatment Response to treatment Organs involved	Standard may be available	Depends on severity Extensive organ involvement (e.g. lungs, heart and joints) Severe disabling disease
Seizures / Convulsions / Epilepsy	Refer to Epilepsy / Seizures			
Shortness of Breath	Not required		Rated for cause	
Skin Disorder	Required if: • Melanoma • Psoriasis with arthritis (psoriatic arthritis)		Rated for cause	
Sleep Apnea*	Required from: • Diagnosing physician and/or treatment center if within 1 year All others at underwriting discretion	Sleep studies before and after treatment Treatment type Response to treatment Order Motor Vehicle Report	Preferred may be available for well controlled mild cases	Uncontrolled severe cases Multiple motor vehicle accidents Suspended driver's license due to sleep apnea
Stroke* **CVA (Cerebral Vascular Accident)** **CVD (Cerebral Vascular Disease)** **TIA (Transient Ischemia Attack or mini stroke)**	Required for all cases	Age at diagnosis Severity of stroke Residual impairment Risk factor control Co-existing diseases Recurrent episodes	Standard may be available if fully recovered or if TIA	Depending on cause, severity and recovery Stroke (CVA) within 1 year TIA, brain aneurysm or A-V malformation within 6 months
Sugar, Protein or Blood in Urine	Not required		Underwrite for cause	

*Current nicotine use may increase the rating or result in a decline.

Impairments Guide

Medical Risks				
Health Situation/ Medical History	APS Requirement (not required if probable decline)	Information Needed to Evaluate Underwriting	Possible Underwriting Decision	
			Best Class Available for Non-nicotine Users*	Decline Probable
Suicide Attempt	Required if suicide attempt occurred more than 2 years ago		Rate for underlying cause, severity and response to treatment	Suicide attempt within 2 years
Thyroid Disorder	Not required			
Tuberculosis (TB)	Required if: • Treatment completed within 1 year • TB not confined to lungs		Standard available for fully recovered cases	Currently being treated for TB
Tumor, Mass, Lump	Not required for: • Basal cell carcinoma Required for: • All brain tumors/ cancers • All cancers, malignant tumors	Diagnosis of condition Pathology reports of all biopsies Results of all tests Diagnoses	Rate for cause	Treated with chemotherapy or radiation within 1 year
Ulcer/Gastritis	Required for: • Bleeding ulcer within 1 year • Barrett's Esophagus	Diagnosis of condition Pathology reports of all biopsies Results of all tests	Rate for cause and severity	

*Current nicotine use may increase the rating or result in a decline.

Impairments Guide

Non-Medical Risks			
Risk	Questionnaire	Possible Underwriting Decision	
		Best Class Available for Non-nicotine Users*	Decline Probable
Aviation (Private Piloting)	Aviation supplement	Flat extras apply for: • Student Pilots • Private Pilots with less than 26 hours flying time per year • Any piloting for business purposes • Any piloting 26-150 hours per year without an Instrument Flight Rating (IFR) • All piloting over 150 hours per year (even with IFR)	Aviation Exclusion Rider (AER) for: • History of alcohol/ substance abuse or treatment • History of driving under the influence or while intoxicated (DUI or DWI) • History of angina or arrhythmia • Bipolar disorder, major depression, psychosis • Coronary artery disease (CAD), heart attack, pacemaker, valve replacement • Insulin-dependent diabetes • Epilepsy/seizure disorder • Untreated sleep apnea • Stroke/transient ischemic attack (TIA) • Age 71+
Bankruptcy			Any bankruptcy that has not yet been discharged or payment plan confirmed
Driving History (Information also applies to nicotine users)		No DUI / DWI reckless driving, revoked or suspended license in the past: • 5 years, **Preferred Best, Preferred** • 3 years, **Select** • 2 years, **Standard**	More than one DUI/DWI in the past 5 years
Criminal Activity			If committed a major felony or more than 1 felony; if currently on parole or probation or if less than or equal to 1 year since discharge
Hazardous Occupation or Avocation	Supplements are needed for: • Climbing • Underwater diving • Sky sports: sky diving, hang gliding, ultra-light, hot-air ballooning • Motor sports	Coverage available, but flat extra premium may be required Scuba: Preferred Best may be available if recreational diving in less than 100 feet	
Resident Alien	Resident alien supplement		
Travel, Foreign	Foreign travel/residence supplement		

*Current nicotine use may increase the rating or result in a decline.

Financial Underwriting Guidelines

Financial underwriting is a key part of the underwriting process. Underwriting will be faster and smoother if you submit the case with a fully completed application, explanatory cover letter and documentation supporting the amount of insurance applied for. A good cover letter could help the underwriter understand the case, including:

- Reason for the insurance
- How the amount applied for was determined
- Total amount of insurance on the insured's life with all companies
- Pending applications
- Life insurance to be replaced
- Ownership and beneficiary designations

Please include illustrations used to help make the sale and financial statements that help demonstrate the need for insurance with your cover letter.

Our underwriters follow these guidelines. The facts of each case will determine how much coverage we offer. You may use these guidelines to help your clients decide how much coverage they need, and to determine the information we need in order to evaluate the case.

Personal

Purpose	Documentation	Coverage Amounts	
Income Replacement	Gross annual earned income How the insurance need was determined If the total amount of personal insurance pending and in force exceeds the calculated maximum, submit any or all of the following: • Reason(s) for the amount of coverage requested • Financial Supplement • Financial Needs Analysis • W-2 or Tax Returns	**Proposed Insured's Age**	**Maximum Factor**
		21 - 40	30 x income
		41 - 50	20 x income
		51 - 60	15 x income
		61 - 69	10 x income
		70 and over	5 x income
Spouse with No Earned Income	The income-earning spouse's gross annual earned income The total amount of personal insurance in force and pending on the income-earning spouse with the proposed insured as beneficiary If the requested coverage exceeds the coverage limits in these guidelines, you must submit a financial needs analysis	**$1,000,000 or less** The non-income earning spouse may qualify for an amount equal to the income-earning spouse's coverage **$1,000,001 - $5,000,000** *Age 70 and below:* The non-income earning spouse may qualify for $1,000,000 or 50% of the income earning spouse's coverage, whichever is greater, up to a maximum of $2,500,000 After that, coverage will be considered on an individual basis *Age 71 and above:* Coverage will be considered on an individual basis if the total amount exceeds $1,000,000	

Financial Underwriting Guidelines

Personal		
Purpose	**Documentation**	**Coverage Amounts**
Juvenile (minimum age: 15 days old; maximum age: 20 years old; must be dependent if over 18)	All children should be covered in equal amounts • Amount of insurance in force on the parents (or legal guardians) and siblings • Justification for the amount applied for if it exceeds coverage on either parent, legal guardian or siblings • If owner is the juvenile's legal guardian, provide a copy of the guardianship papers • If owner is someone other than a parent or legal guardian (e.g., grandparent), the parent or legal guardian with whom the juvenile resides must sign the application — Part I and any Part II non-medical application • *New York law also requires the amount of coverage in force on the life of the policy-owner, even if the policyowner is a trust*	Lesser of $250,000 or 50%* of amount of personal coverage on the parent or legal guardian with the least amount of insurance Amounts over $250,000 will be considered individually and may require facultative reinsurance * In New York, if the proposed insured is between ages 15 days and 4.5 years, the maximum amount is the lesser of $250,000 or 25% of the amount of personal coverage on the parent or legal guardian with the least amount of insurance
Debt Repayment	Amount of debt and remaining term of loan Copy of loan, mortgage or bank commitment letter Lines of Credit: bank or lending institution statement that documents the borrowing activity over the immediately preceding two-year period	Proposed insured can qualify for coverage up to 100% of the debt Coverage cannot exceed the difference between the amount of personal income replacement coverage already in force on the proposed insured and the maximum amount of personal income replacement coverage for which the proposed insured would qualify Lines of Credit may be insured if they have been used during the two years immediately preceding the application date
Estate Conservation	Total personal assets and liabilities, as well as current age	All cases are considered individually. Please contact your underwriter for assistance
Charitable Giving	Proposed insured's Schedule A and Form 8283 (non-cash gifts) attached to the 1040 return Receipts from a charity	**Application-only Maximum** $100,000 or 4 X gross annual earned income **Documented Maximum** $1,000,000 or 50 X average annual donation to any charity over the most recent 3-year period of giving

Financial Underwriting Guidelines

Business		
Purpose	**Documentation**	**Coverage Amounts**
Debt Repayment	Amount of debt and remaining term of loan Copy of loan, mortgage or bank commitment letter Lines of Credit: bank or lending institution statement that documents the borrowing activity over the immediately preceding 2-year period Business financial statements If creditor is an individual, not a bank or lending institution, a copy of loan agreement	May qualify for coverage up to 100% of the debt Coverage will be considered on an individual basis if the requested amount exceeds the difference between the amount of key person insurance in force and pending and the maximum amount of key person coverage for which the proposed insured would qualify Lines of Credit may be insured if they have been used during the two years immediately preceding the application date Owner: Business must own the policy Policy term cannot exceed remaining term of the loan by more than 10 years
Buy-Sell **Business Continuation** **Business Succession**	Complete the Business portion of the Financial section of the application — Part I If other owners are not insured, provide reason Provide actual business values in the form of financial statements, notes to financial statements or other documentation If desired coverage amount exceeds the Financial Supplement Maximum, provide earnings statements for the business for at least the last three years	Owner and beneficiary must be the person or entity that will (or has the option to) buy the insured's interest in the business **Application-Only Maximum** $1,000,000 or percent ownership X market value of business **Financial Supplement Maximum** $5,000,000 or percent ownership X business' current net profit X 10
Key Person	Owner and beneficiary must be the business • Complete the Business portion of the Financial section of the application — Part I • Provide current wage amounts, not projections	5 -10 X annual wages (depending on involvement in the business operations and circumstances) Non-wage benefits may not exceed 30% of wages (regular salary and bonus)

Working with Genworth

Temporary Insurance Application and Agreement (TIAA)

We offer a user-friendly approach to temporary insurance requests. Temporary insurance is designed to cover your client during the underwriting process. Coverage begins the moment your client signs the TIAA paperwork and submits the required premium, provided the Application—Part I is complete and submitted with the original signed TIAA and all TIAA eligibility questions are correctly answered "no."

Here are a few important points to remember about temporary insurance:

- Lasts a maximum of 90 days.
- Ends 45 days after the start date if the required exams and tests are not completed and received by Genworth by that time.
- Ends the date the owner withdraws the application, refuses the policy or offer or the date we mail notice that the case is declined.
- Coverage available under a TIAA is the lesser of the amount applied for and $1,000,000 minus the amount of any insurance on the proposed insured's life in force with Genworth under any policies, conditional receipts or other temporary insurance agreements.

The policy will have the same date as the TIAA unless backdating is requested, and premium will be required from that date forward.

Reinsurance Limits (Ages 18-75)

Retain	Table H (8) or better	$5,000,000
Auto Bind and Retention Limits	Table H (8) or better	$40,000,000
Jumbo Limits	All rate classes	$65,000,000

Contact your underwriter for reinsurance information on other ages and rate classes.

Red Flag Medications

The following medications denote a significant underlying disease.
Do not submit an application if your client is taking any of the following medications:

Brand Name	Generic Name
Antabuse®	disulfiram
Aranesp®	darbepoetin alfa
Aricept®	donepezil hcl
Campral®	acamprosate calcium
Cognex®	tacrine
Depade®	naltrexone
Epogen®	epoetin alfa
Exelon®	rivastigmine
Flolan®	epoprostenol sodium
Namenda®	memantine
Procrit®	epoetin alfa
Razadyne®	galantamine hydrobromide
Remodulin®	treprostinil sodium
ReVia®	naltrexone
Suboxone®	buprenorphine / naloxone
Tracleer®	bosentan
Ventavis®	iloprost
Vivitrol®	naltrexone

IMPORTANT INFORMATION:

This life insurance field underwriting guide provides important information regarding Genworth's typical requirements for underwriting life insurance policies and the best classification, if any, usually available for applicants with certain medical conditions and physical and personal characteristics. Please note, Genworth reserves the right to request information that does not appear to be required in this guide. Similarly, underwriters will make an underwriting determination based on the entirety of the information provided to and received by Genworth, which may result in a determination that is more or less favorable than this guide would indicate. For additional information regarding Genworth's underwriting procedures, please contact your Genworth representative.

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