

**State:** Virginia **Filing Company:** American General Life Insurance Company  
**TOI/Sub-TOI:** LTC Annual Rate Report/LTCINLM  
**Product Name:** AGL Individual LTC Insurance  
**Project Name/Number:** AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

## Filing at a Glance

Company: American General Life Insurance Company  
Product Name: AGL Individual LTC Insurance  
State: Virginia  
TOI: LTC Annual Rate Report  
Sub-TOI: LTCINLM  
Filing Type: LTC Annual Rate Report  
Date Submitted: 09/30/2022  
SERFF Tr Num: LTCG-133413796  
SERFF Status: Closed-Filed  
State Tr Num: LTCG-133413796  
State Status: Filed  
Co Tr Num: AGL 2022 ARC 08000-VA

Effective  
Date Requested:  
Author(s): Melissa Rajsic-McLaughlin, Lisa L. Bauer  
Reviewer(s): Ian Patterson (primary), Bill Dismore  
Disposition Date: 12/20/2022  
Disposition Status: Filed  
Effective Date:

**State:** Virginia **Filing Company:** American General Life Insurance Company  
**TOI/Sub-TOI:** LTC Annual Rate Report/LTCINLM  
**Product Name:** AGL Individual LTC Insurance  
**Project Name/Number:** AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

## General Information

Project Name: AGL 2022 Annual Rate Report 08000-VA  
 Project Number: AGL 2022 ARC 08000-VA  
 Requested Filing Mode: Informational

Explanation for Combination/Other:  
 Submission Type: New Submission  
 Overall Rate Impact:

Deemer Date:  
 Submitted By: Lisa L. Bauer

Filing Description:

Status of Filing in Domicile:  
 Date Approved in Domicile:  
 Domicile Status Comments: Texas, the company's state of domicile, does not require annual rate reports.  
 Market Type: Individual  
 Individual Market Type:  
 Filing Status Changed: 12/20/2022  
 State Status Changed: 12/20/2022  
 Created By: Lisa L. Bauer  
 Corresponding Filing Tracking Number:  
 State TOI: LTC Annual Rate Report 2022

**State:** Virginia **Filing Company:** American General Life Insurance Company  
**TOI/Sub-TOI:** LTC Annual Rate Report/LTCINLM  
**Product Name:** AGL Individual LTC Insurance  
**Project Name/Number:** AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

September 30, 2022

Virginia Bureau of Insurance  
Attn: Life and Health Rate Review Section  
Re: AMERICAN GENERAL LIFE INSURANCE COMPANY  
FEIN # 25-0598210 NAIC # 60488  
INDIVIDUAL ACCIDENT AND HEALTH INSURANCE  
Annual Rate Report for Individual Long Term Care  
Policy Form 08000-VA – Long Term Care Insurance Policy  
Rider Form 08002 – 3%/5% Compound Inflation Rider for Life  
Rider Form 08003 – 3%/5% Age Graded Compound Inflation Rider for Life  
Rider Form 08004 – 3%/5% Age Graded Premium to 65 Compound Inflation  
Rider for Life  
Rider Form 08005 – Joint Survivor Benefit Rider  
Rider Form 08006 – Joint Waiver of Premium Rider  
Rider Form 08007-VA – Nonforfeiture Benefit Rider  
Rider Form 08008 – Paid up Premium Rider  
Rider Form 08009 – Restoration of Benefits Rider  
Rider Form 08010 – Return of Premium at Death Benefit Rider  
Rider Form 08011 – Shared Care Benefit Rider  
Rider Form 08012 – Waiver of Elimination Period for Home and  
Community Care Benefits Rider

Dear Sir or Madam:

On behalf of American General Life Insurance Company (AGL), we at LTCG are submitting an annual rate filing for American General Life Insurance Company's existing Long Term Care policy form 08000-VA. The purpose of this filing is to satisfy the annual filing requirements required by 14VAC 5-200-125. Since all of the policies were issued on or after October 1, 2003, and these plans are no longer marketed, Form LTCINLM applies and has been submitted on the Rate/Rule Schedule tab. A letter from AGL authorizing LTCG to make this rate filing on behalf of AGL is attached.

Due to the limited size of this block we would like to request that the Virginia Bureau of Insurance no longer require us to provide annual certifications. In my opinion: the premium rate schedule is sufficient to cover anticipated costs under best estimate assumptions and the premium rate schedule is reasonably expected to be sustainable over the life of the policy with no future premium increases anticipated. If the Bureau of Insurance has no objections, we will no longer provide Annual Rate Certifications, but will continue to monitor this block of business internally.

We trust that you will find our filing to be in order. If you have any questions or would like to discuss any of the materials included in this submission, please feel free to call me on my direct line at (952) 826-7232. You may also send an email to [kirill.grin@ltcg.com](mailto:kirill.grin@ltcg.com).

Respectfully submitted,

Kirill Grin, ASA, MAAA  
Senior Actuarial Analyst  
LTCG  
Acting as a Consultant to

**State:** Virginia **Filing Company:** American General Life Insurance Company  
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**Project Name/Number:** AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

American General Life Insurance Company

## Company and Contact

### Filing Contact Information

Lisa L. Bauer, Administrative Assistant      Lisa.Bauer@ltcg.com  
 1210 Northbrook Drive, Suite 100      262-219-4141 [Phone]  
 Treose, PA 19053

### Filing Company Information

(This filing was made by a third party - longtermcaregroup)

American General Life Insurance Company	CoCode: 60488	State of Domicile: Texas
2727-A Allen Parkway	Group Code: 12	Company Type: Life and Health
Houston, TX 77019	Group Name:	State ID Number:
(713) 831-3150 ext. [Phone]	FEIN Number: 25-0598210	

**State:** Virginia **Filing Company:** American General Life Insurance Company  
**TOI/Sub-TOI:** LTC Annual Rate Report/LTCINLM  
**Product Name:** AGL Individual LTC Insurance  
**Project Name/Number:** AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

## Filing Fees

### State Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

SERFF Tracking #:

LTCG-133413796

State Tracking #:

LTCG-133413796

Company Tracking #:

AGL 2022 ARC 08000-VA

State:

Virginia

Filing Company:

American General Life Insurance Company

TOI/Sub-TOI:

LTC Annual Rate Report/LTCINLM

Product Name:

AGL Individual LTC Insurance

Project Name/Number:

AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Bill Dismore	12/20/2022	12/20/2022

### Objection Letters and Response Letters

#### Objection Letters

Status	Created By	Created On	Date Submitted
Info has been requested from company	Ian Patterson	12/16/2022	12/16/2022
Info has been requested from company	Ian Patterson	12/07/2022	12/07/2022

#### Response Letters

Responded By	Created On	Date Submitted
Lisa L. Bauer	12/20/2022	12/20/2022
Lisa L. Bauer	12/16/2022	12/16/2022

SERFF Tracking #:

LTCG-133413796

State Tracking #:

LTCG-133413796

Company Tracking #:

AGL 2022 ARC 08000-VA

**State:** Virginia **Filing Company:** American General Life Insurance Company  
**TOI/Sub-TOI:** LTC Annual Rate Report/LTCINLM  
**Product Name:** AGL Individual LTC Insurance  
**Project Name/Number:** AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

## Disposition

Disposition Date: 12/20/2022

Effective Date:

Status: Filed

Comment:

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):
American General Life Insurance Company	0.000%	0.000%	\$0	7	\$14,598	0.000%	0.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Rate	LTCINLM	Filed	Yes
Supporting Document	Actuarial Memorandum	Received & Acknowledged	Yes
Supporting Document	Product Checklist		No
Supporting Document	LTC Annual Report Instructions		No
Supporting Document	Third Party Authorization Letter	Received & Acknowledged	Yes
Supporting Document	Rate Sheets	Received & Acknowledged	Yes
Supporting Document	Cover Letter	Received & Acknowledged	Yes
Supporting Document	Response to Objection 20221207	Received & Acknowledged	Yes
Supporting Document	Response to Objection 20221216	Received & Acknowledged	Yes

**State:** Virginia **Filing Company:** American General Life Insurance Company  
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**Project Name/Number:** AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

## Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	12/16/2022
Submitted Date	12/16/2022
Respond By Date	12/30/2022

Dear Lisa L. Bauer,

### **Introduction:**

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

### **Objection 1**

- Response to Objection 20221207 (Supporting Document)

Comments: An exemption from future annual rate reports may be requested for any form or forms for which the company provides written certification that it will not increase premiums in the future.

Please provide such certification as stated above for exemption from future rate reports.

### **Conclusion:**

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

Please respond by the "Respond By Date:" above. If an extension is required, you must submit your request prior to that date. An extension may be requested for up to 30 days. Failure to respond will result in the filing being closed.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Sincerely,  
Ian Patterson



**State:** Virginia **Filing Company:** American General Life Insurance Company  
**TOI/Sub-TOI:** LTC Annual Rate Report/LTCINLM  
**Product Name:** AGL Individual LTC Insurance  
**Project Name/Number:** AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

## Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	12/07/2022
Submitted Date	12/07/2022
Respond By Date	12/21/2022

Dear Lisa L. Bauer,

### **Introduction:**

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

### **Objection 1**

- Cover Letter (Supporting Document)

Comments: Please advise if the company is willing to convert the policy from guaranteed renewable to non-cancelable. If the company agrees to this then annual rate reports will no longer be required.

### **Conclusion:**

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

Please respond by the "Respond By Date:" above. If an extension is required, you must submit your request prior to that date. An extension may be requested for up to 30 days. Failure to respond will result in the filing being closed.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Sincerely,  
Ian Patterson

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**Project Name/Number:** AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

## Response Letter

Response Letter Status Submitted to State  
 Response Letter Date 12/20/2022  
 Submitted Date 12/20/2022

Dear Ian Patterson,

### Introduction:

Thank you for your letter dated 12/16/2022.

### Response 1

#### Comments:

Please see the attached response.

### Related Objection 1

Applies To:

- Response to Objection 20221207 (Supporting Document)

Comments: An exemption from future annual rate reports may be requested for any form or forms for which the company provides written certification that it will not increase premiums in the future.

Please provide such certification as stated above for exemption from future rate reports.

### Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

### Supporting Document Schedule Item Changes

<b>Satisfied - Item:</b>	Response to Objection 20221216
<b>Comments:</b>	
<b>Attachment(s):</b>	AGL ARC 08000 VA Obj 20221216 Response.pdf

### Conclusion:

Thank you.

Sincerely,

Lisa L. Bauer

SERFF Tracking #:

LTCG-133413796

State Tracking #:

LTCG-133413796

Company Tracking #:

AGL 2022 ARC 08000-VA

State:

Virginia

Filing Company:

American General Life Insurance Company

TOI/Sub-TOI:

LTC Annual Rate Report/LTCINLM

Product Name:

AGL Individual LTC Insurance

Project Name/Number:

AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	12/16/2022
Submitted Date	12/16/2022

Dear Ian Patterson,

### Introduction:

Thank you for your letter dated 12/7/2022.

### Response 1

#### Comments:

Please see the attached response.

### Related Objection 1

Applies To:

- Cover Letter (Supporting Document)

Comments: Please advise if the company is willing to convert the policy from guaranteed renewable to non-cancelable. If the company agrees to this then annual rate reports will no longer be required.

### Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	Response to Objection 20221207
Comments:	
Attachment(s):	AGL ARC 08000 VA Obj 20221207 Response.pdf

### Conclusion:

Sincerely,

Lisa L. Bauer

State: Virginia Filing Company: American General Life Insurance Company  
 TOI/Sub-TOI: LTC Annual Rate Report/LTCINLM  
 Product Name: AGL Individual LTC Insurance  
 Project Name/Number: AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

### Rate Information

Rate data applies to filing.

Filing Method:  
 Rate Change Type: %  
 Overall Percentage of Last Rate Revision: %  
 Effective Date of Last Rate Revision:  
 Filing Method of Last Filing:  
 SERFF Tracking Number of Last Filing:

### 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):
American General Life Insurance Company	0.000%	0.000%	\$0	7	\$14,598	0.000%	0.000%

**SERFF Tracking #:**

LTCG-133413796

**State Tracking #:**

LTCG-133413796

**Company Tracking #:**

AGL 2022 ARC 08000-VA

**State:**

Virginia

**Filing Company:**

American General Life Insurance Company

**TOI/Sub-TOI:**

LTC Annual Rate Report/LTCINLM

**Product Name:**

AGL Individual LTC Insurance

**Project Name/Number:**

AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

## Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		LTCINLM	08000-VA, 08002, 08003, 08004, 08005, 08006, 08007-VA, 08008, 08009, 08010, 08011, 08012	Other	Previous State Filing Number: LTCG-132999881 Rate Action Other Explanation:	AGL VA 08000 Form LTCINLM_Post RS.pdf,

**Annual Rate Report for Long-Term Care Insurance**  
**American General Life Insurance Company Policy Form Series 08000**  
**Issued On or After October 1, 2003 that is No Longer Marketed**  
**Reporting Period 1/1/2021 – 12/31/2021**

Company Name	American General Life Insurance Company
Company NAIC Number	60488
Form Number(s)	08000-VA, 08002, 08003, 08004, 08005, 08006, 08007-VA, 08008, 08009, 08010, 08011, 08012
Issue Date(s)	March 26, 2012 – August 1, 2012
SERFF Filing Number	LTCG-133413796
Prior SERFF Filing Number(s)	LTCG-132999881, LTCG-132552847, LTCG-132001177, LTCG-131564479, LTCG-125665478, LTCG-130624503, LTCG-131087594

I, Kirill Grin, am a member of the American Academy of Actuaries. I meet the Academy's qualification standards for rendering this opinion and am familiar with the requirements for filing and reviewing long-term care insurance premiums.

In my opinion: the premium rate schedule is sufficient to cover anticipated costs under best estimate assumptions and the premium rate schedule is reasonably expected to be sustainable over the life of the policy with no future premium increases anticipated. Based on my review of recent experience of the policy involved, in my opinion, no rate action is necessary as a result of this analysis.

In forming my opinion, I have used actuarial assumptions and actuarial methods and such tests of the actuarial calculations as I considered necessary. The details of my review are included in the attached actuarial memorandum that provides the historical experience and the expected future and lifetime loss ratios based on the original pricing assumptions; and a description of the assumptions used in the projections.

Sincerely,



Kirill Grin, ASA, MAAA  
Senior Actuarial Analyst  
LTCG  
1210 Northbrook Drive, Suite 100  
Trevose, PA 19053  
952-826-7232

September 30, 2022

LTCINLM

SERFF Tracking #:

LTCG-133413796

State Tracking #:

LTCG-133413796

Company Tracking #:

AGL 2022 ARC 08000-VA

State:

Virginia

Filing Company:

American General Life Insurance Company

TOI/Sub-TOI:

LTC Annual Rate Report/LTCINLM

Product Name:

AGL Individual LTC Insurance

Project Name/Number:

AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

## Supporting Document Schedules

<b>Satisfied - Item:</b>	Actuarial Memorandum
<b>Comments:</b>	
<b>Attachment(s):</b>	AGL VA ARC 08000 Memorandum.pdf AGL VA 08000 Exhibit A.pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	12/07/2022

<b>Satisfied - Item:</b>	Third Party Authorization Letter
<b>Comments:</b>	
<b>Attachment(s):</b>	AGL LTCG Auth 2022.pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	12/07/2022

<b>Satisfied - Item:</b>	Rate Sheets
<b>Comments:</b>	
<b>Attachment(s):</b>	AG VA 08000 Current Rate Sheets.pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	12/07/2022

<b>Satisfied - Item:</b>	Cover Letter
<b>Comments:</b>	
<b>Attachment(s):</b>	AGL VA 08000 Cover Letter.pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	12/07/2022

<b>Satisfied - Item:</b>	Response to Objection 20221207
<b>Comments:</b>	
<b>Attachment(s):</b>	AGL ARC 08000 VA Obj 20221207 Response.pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	12/16/2022

<b>Satisfied - Item:</b>	Response to Objection 20221216
<b>Comments:</b>	
<b>Attachment(s):</b>	AGL ARC 08000 VA Obj 20221216 Response.pdf
<b>Item Status:</b>	Received & Acknowledged

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**SERFF Tracking #:** LTCG-133413796      **State Tracking #:** LTCG-133413796      **Company Tracking #:** AGL 2022 ARC 08000-VA

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**State:** Virginia      **Filing Company:** American General Life Insurance Company  
**TOI/Sub-TOI:** LTC Annual Rate Report/LTCINLM  
**Product Name:** AGL Individual LTC Insurance  
**Project Name/Number:** AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA

<b>Status Date:</b>	12/20/2022
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**American General Life Insurance Company**

**Annual Premium Rate Report**

**For Individual Long Term Care Policy Form Series 08000**

**1. PURPOSE OF REPORT**

This is a rate report filing for American General Life Insurance Company's existing Long Term Care Policy Form Series 08000. The purpose of this report is to satisfy the requirements of 14VAC5-200-125 which requires that premium rates for all long-term care insurance policies be reported to the commission annually. This rate report is not intended to be used for any other purposes.

**2. SCOPE OF REPORT**

This report applies to the Company's Long Term Care policy and rider forms summarized below:

- Policy Form 08000-VA – Long Term Care Insurance Policy
- Rider Form 08002 – 3%/5% Compound Inflation Rider for Life
- Rider Form 08003 – 3%/5% Age Graded Compound Inflation Rider for Life
- Rider Form 08004 – 3%/5% Age Graded Premium to 65 Compound Inflation Rider for Life
- Rider Form 08005 – Joint Survivor Benefit Rider
- Rider Form 08006 – Joint Waiver of Premium Rider
- Rider Form 08007-VA – Nonforfeiture Benefit Rider
- Rider Form 08008 – Paid up Premium Rider
- Rider Form 08009 – Restoration of Benefits Rider
- Rider Form 08010 – Return of Premium at Death Benefit Rider
- Rider Form 08011 – Shared Care Benefit Rider
- Rider Form 08012 – Waiver of Elimination Period for Home and Community Care Benefits Rider

As of December 31, 2021, there were 7 policies in force that were issued in the state of Virginia. The average annualized premium for the premium paying policyholders is \$2,085.

The company has not filed for any rate increases on this block of business.

As required by 14VAC5-200-125, for policies issued on or after October 1, 2003 and that are no longer marketed, a complete analysis and review of the premium rates has been completed using nationwide experience as of December 31, 2021. The projected lifetime loss ratio for this business is 45.2%.

## American General Life Insurance Company

### Annual Premium Rate Report For Individual Long Term Care Policy Form Series 08000

#### 3. RATE INCREASE HISTORY

There have been no rate increases requested.

#### 4. PROJECTION ASSUMPTIONS

**Interest** – The effective annual rate of interest assumed for accumulating historical experience and for discounting projected future experience is 5.75% which is consistent with the interest rate used in the original filing.

**Morbidity** – Claim costs reflect industry long term care experience, experience of business administered by LTCG, numerous studies of non-insurance data and judgment. Sample claim costs are shown below:

<b>Sample Claim Costs by Attained Age Without Inflation Protection 90 Day Elimination Period</b>				
<b>Attained Age</b>	<b>Lifetime Max: \$100,000 Monthly Max: \$3,000</b>		<b>Lifetime Max: \$250,000 Monthly Max: \$3,000</b>	
	<b>Male</b>	<b>Female</b>	<b>Male</b>	<b>Female</b>
52	\$35.60	\$33.35	\$64.20	\$61.56
62	73.59	71.02	132.73	131.10
72	227.55	276.87	364.70	473.67
82	1,623.15	2,060.37	2,453.12	3,380.83
92	5,377.91	5,537.51	6,580.37	6,830.51

Claim costs are adjusted to reflect:

- Underwriting and issue criteria
- Reduced exposure for insureds already on claim
- Waiver of premium benefits
- Actual charges that are less than the monthly maximum benefit

The original pricing assumed the same morbidity.

**American General Life Insurance Company**  
**Annual Premium Rate Report**  
**For Individual Long Term Care Policy Form Series 08000**

**Lapse Rates –**

<b>Lapse Rates by Issue Age and Policy Duration</b>				
<b>Policy Duration</b>	<b>Issue Age Range</b>			
	<b>0-54</b>	<b>55-64</b>	<b>65-74</b>	<b>75+</b>
1	9.0%	4.0%	4.0%	6.0%
2	7.0%	3.5%	3.0%	5.0%
3	5.0%	2.5%	2.0%	3.5%
4	3.0%	1.5%	1.0%	2.5%
5	2.5%	1.0%	1.0%	2.0%
6	2.0%	1.0%	1.0%	1.5%
7	1.5%	1.0%	1.0%	1.5%
8-20	1.5%	1.0%	1.0%	1.0%
21+	1.0%	1.0%	1.0%	1.0%

Lapse rates for policies with the Paid-Up Premium Rider are equal to half of the lapse rates above during premium payment years, and zero thereafter. Lapse rates are increased to reflect claimants that exhaust the lifetime maximums.

The original pricing assumed the same lapse rates.

**Mortality Rates** – 1994 Group Annuitant Mortality with the following select factors applied.

<b>Mortality Adjustments</b>	
<b>Policy Duration</b>	<b>Factor</b>
1	0.30
2	0.40
3	0.50
4	0.55
5	0.60
6	0.65
7	0.70
8	0.73
9	0.75
10	0.77
11	0.79
12	0.81
13	0.83
14+	0.85

**American General Life Insurance Company**

**Annual Premium Rate Report**  
**For Individual Long Term Care Policy Form Series 08000**

In addition, mortality rates are increased to reflect claimants that die on claim.

The original pricing assumed the same mortality.

**5. MINIMUM REQUIRED LIFETIME LOSS RATIO**

The minimum required lifetime loss ratio for these forms is 60%.

**6. LIFETIME EXPERIENCE**

Nationwide historical, future and lifetime experience is displayed in the table below. Historical experience is from 2/1/2010 through 12/31/2021 and includes claim payments through 12/31/2021. Future experience has been projected for forty years using the best estimate assumptions described in Section 4.

<b>Policy Form Series 08000</b>			
<b>Lifetime Experience</b>			
<b>Experience Period</b>	<b>Earned Premium</b>	<b>Incurred Claims</b>	<b>Loss Ratio</b>
<b>Historical</b>	\$10,118,947	\$751,278	7.4%
<b>Future</b>	\$4,973,839	\$6,077,636	122.2%
<b>Lifetime</b>	\$15,092,785	\$6,828,914	45.2%

**7. CREDIBILITY**

Lifetime experience is also displayed in Exhibit A. Nationwide experience is not credible. There are only 234 policies inforce nationwide.

The premium rate schedule continues to be sufficient to cover anticipated costs under best estimate assumptions.

**8. ACTUARIAL CERTIFICATION**

I hereby certify to the best of my knowledge and judgment, the entire rate report filing submitted herein is in compliance with all applicable laws of this state, the rules of the Department of Insurance, and Actuarial Standard of Practice Number 8 as adopted by the Actuarial Standards Board. In my opinion, the rates are adequate. Rates nationwide are not excessive or unfairly discriminatory.

Respectfully submitted,



Kirill Grin, ASA, MAAA  
 Senior Actuarial Analyst, LTCG

September 30, 2022

**American General Life Insurance Company**  
**Annual Premium Rate Report**  
**For Individual Long Term Care Policy Form Series 08000**

Attachments:

Exhibit A – Lifetime Experience  
Annual Rate Report - LTCINLM  
Current Rate Sheets

## American General Life Insurance Company

## Policy Form 08000

## Lifetime Experience (Nationwide)

<u>Year</u>	<u>Earned Premiums</u>	<u>Incurred Claims<sup>1</sup></u>	<u>Loss Ratio</u>
2010	59,666	0	0.0%
2011	293,064	0	0.0%
2012	584,953	0	0.0%
2013	781,877	0	0.0%
2014	743,475	0	0.0%
2015	724,212	0	0.0%
2016	794,448	0	0.0%
2017	706,614	0	0.0%
2018	704,615	0	0.0%
2019	689,541	0	0.0%
2020	670,773	597,507	89.1%
2021	666,141	98,705	14.8%
Accumulated @ 5.75%	10,118,947	751,278	7.4%
2022	603,831	159,686	26.4%
2023	576,738	177,988	30.9%
2024	549,936	196,594	35.7%
2025	523,532	219,192	41.9%
2026	497,656	245,603	49.4%
2027	472,199	274,231	58.1%
2028	447,059	304,574	68.1%
2029	422,160	337,460	79.9%
2030	397,453	374,782	94.3%
2031	357,288	414,530	116.0%
2032	334,186	452,443	135.4%
2033	311,414	486,305	156.2%
2034	263,786	517,430	196.2%
2035	242,664	550,692	226.9%
2036	222,062	584,413	263.2%
2037	202,108	612,969	303.3%
2038	182,941	631,688	345.3%
2039	156,877	641,736	409.1%
2040	139,825	650,966	465.6%
2041	123,809	657,719	531.2%
2042	108,855	656,126	602.8%
2043	95,030	640,917	674.4%
2044	78,181	615,706	787.5%
2045	66,857	588,823	880.7%
2046	56,686	560,383	988.6%
2047	47,629	527,342	1107.2%
2048	39,656	486,617	1227.1%
2049	32,715	441,396	1349.2%
2050	26,749	397,685	1486.7%
2051	21,672	356,301	1644.1%
2052	17,394	316,207	1817.9%
2053	13,826	275,729	1994.3%
2054	10,885	236,394	2171.7%
2055	8,494	200,946	2365.7%
2056	6,573	169,495	2578.7%
2057	5,043	141,501	2805.9%
2058	3,833	116,276	3033.2%
2059	2,888	94,181	3261.6%
2060	2,158	75,636	3505.3%
2061	1,600	60,316	3768.6%
Present Value @ 5.75%	4,973,839	6,077,636	122.2%
Lifetime @ 5.75%	15,092,785	6,828,914	45.2%

<sup>1</sup> Projected future earned premiums and incurred claims are based on assumptions as shown in Section 4 of the actuarial memorandum.



American General Life  
Insurance Company  
2727-A Allen Parkway  
Houston, TX 77019  
www.aig.com

Leo W. Grace  
Vice President  
State Filings and Regulatory  
Relations  
Consumer Insurance  
T 832 215 7347  
leo.grace@aglife.com

December 3, 2021

Dear Insurance Commissioner:

This letter authorizes the Long Term Care Group, Inc. (LTCG) to make various policy form filings, including premium rate filings on behalf of American General Life Insurance Company.

This authorization will remain in full force and effect until the earlier of (a) your receipt of a written notification from American General Life Insurance Company expressly terminating this authorization; or (b) 31<sup>st</sup> of December 2022.

Please feel free to contact me directly should you have any questions concerning this authorization, c/o American General Life Insurance Company, 2727-A Allen Parkway, Mail Stop 2-C1, Houston, TX, 77019.

Sincerely,

A handwritten signature in black ink that reads "Leo W. Grace". The signature is written in a cursive style with a large initial "L".

Leo W. Grace

**American General Life Insurance Company**  
**Long Term Care Insurance Policy Form 08000**  
**Single Standard Annual Rates**  
**Per \$1,000 of Monthly Maximum**  
**By Issue Age and Benefit Duration (in years)**

Issue Age	Benefit Duration (in years) = (Lifetime Maximum/Monthly Maximum) / 12								
	2.08	2.78	3.70	4.17	5.56	6.94	8.33	11.11	13.89
Under 30	130	139	156	166	188	194	199	206	211
30	132	141	158	169	191	198	203	210	215
31	134	143	161	172	195	202	208	215	220
32	136	146	164	175	199	206	212	219	224
33	138	148	167	178	203	211	216	224	229
34	140	150	170	182	206	215	221	229	234
35	142	153	173	185	210	219	225	233	239
36	144	156	176	188	214	223	230	238	244
37	146	158	179	192	219	228	235	243	250
38	146	159	181	193	220	230	237	246	252
39	146	160	182	194	222	232	239	249	255
40	147	161	183	196	224	234	242	251	258
41	147	161	184	197	226	237	244	254	261
42	147	162	186	199	228	239	247	257	264
43	149	164	188	201	231	242	250	260	268
44	150	166	190	204	234	245	253	264	271
45	151	168	193	206	236	248	257	268	275
46	153	170	195	209	239	252	260	272	279
47	154	172	198	211	242	255	264	275	283
48	157	176	201	215	246	259	268	280	288
49	159	179	205	219	250	263	273	285	293
50	162	182	208	222	253	267	277	290	298
51	164	186	212	226	257	272	282	294	303
52	167	190	216	230	261	276	286	299	308
53	175	199	226	240	271	287	298	311	320
54	183	209	236	250	282	298	309	324	333
55	191	219	247	261	293	310	322	336	346
56	200	229	258	273	304	322	334	350	360
57	209	241	270	284	316	335	347	363	374
58	220	254	286	302	337	357	370	387	398
59	231	267	303	321	359	381	395	413	424
60	243	282	321	340	383	406	421	440	452
61	256	297	340	361	409	433	449	469	482
62	269	313	360	384	436	461	479	499	513
63	294	342	394	420	477	505	524	546	561
64	322	374	431	460	522	553	574	598	614
65	352	409	471	503	572	605	628	654	672
66	384	447	516	550	626	663	687	716	735
67	420	489	564	602	686	726	752	783	804
68	468	544	627	670	763	807	836	869	892
69	522	605	698	745	848	896	928	965	989
70	581	674	776	828	943	996	1,031	1,071	1,097
71	647	749	863	921	1,049	1,107	1,145	1,189	1,217
72	721	834	959	1,024	1,167	1,230	1,272	1,320	1,351
73	816	942	1,084	1,158	1,321	1,391	1,437	1,489	1,523
74	923	1,065	1,226	1,310	1,494	1,573	1,623	1,680	1,718
75	1,045	1,204	1,386	1,482	1,691	1,779	1,833	1,896	1,938
76	1,183	1,361	1,567	1,676	1,914	2,011	2,071	2,139	2,185
77	1,338	1,538	1,771	1,896	2,166	2,274	2,340	2,413	2,465
78	1,474	1,702	1,964	2,101	2,396	2,517	2,591	2,670	2,727
79	1,624	1,884	2,177	2,328	2,651	2,787	2,868	2,954	3,017
80	1,789	2,085	2,414	2,580	2,932	3,085	3,176	3,268	3,338
81	1,971	2,307	2,677	2,859	3,244	3,415	3,517	3,616	3,693
82	2,171	2,553	2,969	3,168	3,588	3,781	3,894	4,001	4,086
83	2,392	2,826	3,292	3,510	3,970	4,185	4,312	4,426	4,520
84	2,635	3,127	3,650	3,890	4,391	4,633	4,774	4,897	5,001



**American General Life Insurance Company  
Long Term Care Insurance Policy Form Series 08000**

**Rating Factors**

**Restoration of Benefits Factors (08009) –**

<b>Benefit Amount</b>	<b>Premium Factor</b>
2.00-2.42	1.10
2.43-3.23	1.09
3.24-3.97	1.08
3.98-6.44	1.06
6.45+	1.05

**Shared Care Factors (08011) –**

<b>Shared Benefit Amount</b>	<b>Premium Factor</b>
2.00-3.24	1.25
3.25-3.74	1.24
3.75-3.98	1.23
3.99-4.35	1.20
4.36-4.59	1.18
4.60-4.87	1.17
4.88-5.10	1.15
5.11-5.38	1.14
5.39-5.81	1.12
5.82-6.45	1.11
6.46-6.80	1.10
6.81-7.35	1.09
7.36-8.07	1.08
8.08-9.72	1.07
9.73-13.19	1.06
13.20+	1.05

**Waiver of Elimination Period for Home Care Factors (08012) –**

<b>Elimination Period (Days)</b>	<b>Premium Factor</b>
30	1.06
90	1.11
180	1.16
365	1.20

**Nonforfeiture Factor (08007) – 1.15**

**American General Life Insurance Company**  
**Long Term Care Insurance Policy Form Series 08000**

**Rating Factors**

Issue Age	Level Premium (08002)		Graded Premium for Life (08003)		Graded Premium to Age 65 (08004)	
	5%	3%	5%	3%	5%	3%
Under 30	2.58	1.57	1.08	1.03	1.31	1.15
30	2.55	1.56	1.08	1.03	1.32	1.15
31	2.53	1.56	1.08	1.03	1.32	1.15
32	2.50	1.55	1.08	1.03	1.32	1.15
33	2.47	1.54	1.08	1.03	1.32	1.15
34	2.45	1.54	1.08	1.03	1.32	1.15
35	2.42	1.53	1.08	1.03	1.33	1.15
36	2.40	1.53	1.08	1.03	1.33	1.15
37	2.37	1.52	1.08	1.03	1.33	1.15
38	2.37	1.53	1.08	1.03	1.35	1.16
39	2.36	1.53	1.09	1.03	1.37	1.17
40	2.36	1.54	1.09	1.04	1.38	1.17
41	2.35	1.54	1.10	1.04	1.40	1.18
42	2.35	1.55	1.10	1.04	1.42	1.19
43	2.35	1.56	1.11	1.04	1.44	1.20
44	2.35	1.57	1.11	1.05	1.46	1.21
45	2.35	1.58	1.12	1.05	1.49	1.22
46	2.35	1.59	1.12	1.06	1.51	1.23
47	2.35	1.60	1.13	1.06	1.53	1.24
48	2.35	1.61	1.15	1.07	1.55	1.25
49	2.34	1.61	1.17	1.08	1.57	1.27
50	2.34	1.62	1.19	1.09	1.60	1.28
51	2.33	1.62	1.22	1.10	1.62	1.30
52	2.33	1.63	1.24	1.11	1.64	1.31
53	2.30	1.62	1.25	1.12	1.65	1.32
54	2.27	1.62	1.26	1.12	1.66	1.33
55	2.24	1.61	1.26	1.13	1.67	1.33
56	2.22	1.61	1.27	1.13	1.68	1.34
57	2.19	1.60	1.28	1.14	1.69	1.35
58	2.15	1.59	1.27	1.14	1.72	1.37
59	2.11	1.58	1.26	1.13	1.75	1.39
60	2.07	1.56	1.25	1.13	1.78	1.41
61	2.04	1.55	1.24	1.12	1.81	1.44
62	2.00	1.54	1.23	1.12	1.84	1.46
63	1.95	1.51	1.22	1.11	1.86	1.47
64	1.89	1.48	1.21	1.11	1.89	1.48
65	1.84	1.45	1.19	1.10	NA	NA
66	1.79	1.42	1.18	1.10	NA	NA
67	1.74	1.39	1.17	1.09	NA	NA
68	1.70	1.38	1.15	1.08	NA	NA
69	1.67	1.36	1.13	1.07	NA	NA
70	1.64	1.35	1.11	1.06	NA	NA
71	1.60	1.33	1.09	1.05	NA	NA
72	1.57	1.32	1.07	1.04	NA	NA
73	1.54	1.30	1.07	1.04	NA	NA
74	1.51	1.29	1.07	1.04	NA	NA
75	1.48	1.27	1.06	1.03	NA	NA
76	1.46	1.26	1.06	1.03	NA	NA
77	1.43	1.24	1.06	1.03	NA	NA
78	1.42	1.23	1.06	1.03	NA	NA
79	1.41	1.23	1.06	1.03	NA	NA
80	1.39	1.22	1.06	1.03	NA	NA
81	1.38	1.22	1.06	1.03	NA	NA
82	1.37	1.21	1.06	1.03	NA	NA
83	1.36	1.20	1.06	1.03	NA	NA
84	1.35	1.20	1.06	1.03	NA	NA

**American General Life Insurance Company**  
**Long Term Care Insurance Policy Form Series 08000**

**Rating Factors**

Issue Age	Joint Survivor (08005)		Joint Waiver of Premium (08006)	Paid Up Premium (08008)		Return of Premium (08010)
	Without Inflation	With Inflation		Without Inflation	With Inflation	
Under 30	1.07	1.11	1.01	1.75	2.31	1.35
30	1.07	1.12	1.01	1.81	2.30	1.35
31	1.08	1.12	1.01	1.87	2.30	1.35
32	1.08	1.12	1.01	1.93	2.30	1.35
33	1.08	1.12	1.01	2.00	2.30	1.35
34	1.09	1.12	1.01	2.06	2.30	1.35
35	1.09	1.13	1.01	2.13	2.29	1.35
36	1.10	1.13	1.01	2.21	2.29	1.35
37	1.10	1.13	1.01	2.28	2.29	1.35
38	1.10	1.13	1.01	2.33	2.31	1.36
39	1.11	1.13	1.01	2.38	2.34	1.37
40	1.11	1.14	1.01	2.43	2.36	1.38
41	1.12	1.14	1.01	2.48	2.39	1.39
42	1.12	1.14	1.01	2.53	2.41	1.40
43	1.12	1.14	1.01	2.56	2.44	1.41
44	1.12	1.14	1.01	2.59	2.47	1.42
45	1.13	1.14	1.01	2.61	2.49	1.43
46	1.13	1.14	1.01	2.64	2.52	1.44
47	1.13	1.145	1.01	2.67	2.55	1.45
48	1.13	1.145	1.01	2.69	2.60	1.47
49	1.13	1.145	1.01	2.71	2.65	1.49
50	1.13	1.145	1.01	2.74	2.71	1.51
51	1.13	1.145	1.01	2.76	2.76	1.53
52	1.13	1.145	1.01	2.78	2.82	1.55
53	1.13	1.14	1.01	2.76	2.83	1.57
54	1.13	1.14	1.01	2.75	2.85	1.59
55	1.13	1.14	1.02	2.73	2.86	1.61
56	1.13	1.14	1.02	2.72	2.88	1.63
57	1.13	1.14	1.02	2.70	2.89	1.65
58	1.13	1.14	1.02	2.61	2.80	1.69
59	1.13	1.14	1.02	2.53	2.71	1.73
60	1.13	1.14	1.02	2.45	2.62	1.77
61	1.13	1.14	1.02	2.37	2.54	1.81
62	1.13	1.14	1.02	2.30	2.46	1.85
63	1.12	1.14	1.02	2.23	2.37	1.89
64	1.12	1.13	1.02	2.17	2.28	1.93
65	1.11	1.13	1.03	2.11	2.20	NA
66	1.11	1.12	1.03	2.05	2.12	NA
67	1.10	1.12	1.03	1.99	2.04	NA
68	1.10	1.11	1.03	1.93	1.98	NA
69	1.10	1.11	1.04	1.86	1.91	NA
70	1.10	1.10	1.04	1.80	1.85	NA
71	1.10	1.10	1.05	1.75	1.80	NA
72	1.10	1.09	1.05	1.69	1.74	NA
73	1.09	1.09	1.06	1.64	1.68	NA

**American General Life Insurance Company  
Long Term Care Insurance Policy Form Series 08000**

**Rating Factors**

Issue Age	Joint Survivor (08005)		Joint Waiver of Premium (08006)	Paid Up Premium (08008)		Return of Premium (08010)
	Without Inflation	With Inflation		Without Inflation	With Inflation	
74	1.09	1.08	1.07	1.59	1.63	NA
75	1.08	1.08	1.07	1.54	1.57	NA
76	1.08	1.08	1.08	1.50	1.52	NA
77	1.07	1.075	1.09	1.45	1.47	NA
78	1.07	1.075	1.10	1.42	1.43	NA
79	1.07	1.075	1.11	1.38	1.40	NA
80	1.07	1.075	1.13	1.35	1.36	NA
81	1.07	1.075	1.14	1.32	1.32	NA
82	1.07	1.075	1.15	1.29	1.29	NA
83	1.07	1.075	1.16	1.26	1.26	NA
84	1.07	1.075	1.17	1.23	1.22	NA



1210 Northbrook Drive  
Suite 100  
Trevose, PA 19053  
(877) 431-5824

September 30, 2022

Virginia Bureau of Insurance  
Attn: Life and Health Rate Review Section

Re: AMERICAN GENERAL LIFE INSURANCE COMPANY  
FEIN # 25-0598210 NAIC # 60488  
INDIVIDUAL ACCIDENT AND HEALTH INSURANCE  
Annual Rate Report for Individual Long Term Care

**Policy Form 08000-VA – Long Term Care Insurance Policy**  
**Rider Form 08002 – 3%/5% Compound Inflation Rider for Life**  
**Rider Form 08003 – 3%/5% Age Graded Compound Inflation Rider for Life**  
**Rider Form 08004 – 3%/5% Age Graded Premium to 65 Compound Inflation  
Rider for Life**  
**Rider Form 08005 – Joint Survivor Benefit Rider**  
**Rider Form 08006 – Joint Waiver of Premium Rider**  
**Rider Form 08007-VA – Nonforfeiture Benefit Rider**  
**Rider Form 08008 – Paid up Premium Rider**  
**Rider Form 08009 – Restoration of Benefits Rider**  
**Rider Form 08010 – Return of Premium at Death Benefit Rider**  
**Rider Form 08011 – Shared Care Benefit Rider**  
**Rider Form 08012 – Waiver of Elimination Period for Home and  
Community Care Benefits Rider**

Dear Sir or Madam:

On behalf of American General Life Insurance Company (AGL), we at LTCG are submitting an annual rate filing for American General Life Insurance Company's existing Long Term Care policy form 08000-VA. The purpose of this filing is to satisfy the annual filing requirements required by 14VAC 5-200-125. Since all of the policies were issued on or after October 1, 2003, and these plans are no longer marketed, Form LTCINLM applies and has been submitted on the Rate/Rule Schedule tab. A letter from AGL authorizing LTCG to make this rate filing on behalf of AGL is attached.

Due to the limited size of this block we would like to request that the Virginia Bureau of Insurance no longer require us to provide annual certifications. In my opinion: the premium rate schedule is sufficient to cover anticipated costs under best estimate assumptions and the premium rate schedule is reasonably expected to be sustainable over the life of the policy with no future premium increases anticipated. If the Bureau of Insurance has no objections, we will no longer provide Annual Rate Certifications, but will continue to monitor this block of business internally.

We trust that you will find our filing to be in order. If you have any questions or would like to discuss any of the materials included in this submission, please feel free to call me on my direct line at (952) 826-7232. You may also send an email to [kirill.grin@ltcg.com](mailto:kirill.grin@ltcg.com).

Respectfully submitted,



Kirill Grin, ASA, MAAA  
Senior Actuarial Analyst  
LTCG

Acting as a Consultant to  
American General Life Insurance Company



1210 Northbrook Drive  
Suite 100  
Trevose, PA 19053  
(877) 431-5824

December 16, 2022

Mr. Ian Patterson  
Virginia State Corporation Commission  
Bureau of Insurance  
Commonwealth of Virginia  
P.O. Box 1157  
Richmond, VA 23218

Re: Rate Revision for American General Life Insurance Company  
Project Name/Number: AGL 2022 Annual Rate Report 08000-VA/ALG 2022 ARC 08000-VA  
SERFF Tracking No: LTCG-133413796

Dear Mr. Patterson,

This letter is in response to your letter dated December 7, 2022. Your letter indicated you would like additional information. Specifically, you stated:

Objection 1 - Cover Letter (Supporting Document)

*Comments: Please advise if the company is willing to convert the policy from guaranteed renewable to non-cancelable. If the company agrees to this then annual rate reports will no longer be required.*

Converting these policies from guaranteed renewable to non-cancellable would require a significant operational effort, and it would very likely lead to confusion on the part of the policyholders generating excess customer service call volume. The company would prefer not to go that route, but it is willing to certify that no future rate increase action will be taken on the remaining inforce population. Please let us know if this is acceptable to waive future annual rate certification obligations.

Thank you for your assistance in reviewing this filing.

Sincerely,

Kirill Grin, ASA, MAAA  
Senior Actuarial Analyst  
LTCG  
Acting as a Consultant to  
American General Life Insurance Company



1210 Northbrook Drive  
Suite 100  
Trevose, PA 19053  
(877) 431-5824

December 20, 2022

Mr. Ian Patterson  
Virginia State Corporation Commission  
Bureau of Insurance  
Commonwealth of Virginia  
P.O. Box 1157  
Richmond, VA 23218

Re: Rate Revision for American General Life Insurance Company  
Project Name/Number: AGL 2022 Annual Rate Report 08000-VA/AGL 2022 ARC 08000-VA  
SERFF Tracking No: LTCG-133413796

Dear Mr. Patterson,

This letter is in response to your letter dated December 16, 2022. Your letter indicated you would like additional information. Specifically, you stated:

**Objection 1** - *Response to Objection 20221207 (Supporting Document)*

*Comments: An exemption from future annual rate reports may be requested for any form or forms for which the company provides written certification that it will not increase premiums in the future.*

*Please provide such certification as stated above for exemption from future rate reports.*

This letter services as a certificate that the Company will not increase policy form 08000-VA premiums for this block of business going forward. In turn, the Company requests that it will be exempt in providing future annual rate reports going forward.

Thank you for your assistance in reviewing this filing.

Sincerely,

Kirill Grin, ASA, MAAA  
Senior Actuarial Analyst  
LTCG  
Acting as a Consultant to  
American General Life Insurance Company