

SERFF Tracking Number: AEGJ-126375024 State: Arkansas
Filing Company: Transamerica Life Insurance Company State Tracking Number: 44022
Company Tracking Number: TLC FLYERS 0809
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: TLC Flyers
Project Name/Number: TLC Flyers/TLC Flyers 0809

Filing at a Glance

Company: Transamerica Life Insurance Company

Product Name: TLC Flyers SERFF Tr Num: AEGJ-126375024 State: Arkansas
TOI: LTC03I Individual Long Term Care SERFF Status: Closed-Filed State Tr Num: 44022
Sub-TOI: LTC03I.001 Qualified Co Tr Num: TLC FLYERS 0809 State Status: Closed
Filing Type: Advertisement Reviewer(s): Marie Bennett
Authors: Julie Maclin, Joan Shumaker, Pamm Davis, Patsy Holt Disposition Date: 11/25/2009
Date Submitted: 11/06/2009 Disposition Status: Filed
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: TLC Flyers Status of Filing in Domicile: Not Filed
Project Number: TLC Flyers 0809 Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments: Advertising not required to be filed in domicile.
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Group Market Size:
Overall Rate Impact: Group Market Type:
Filing Status Changed: 11/25/2009 Explanation for Other Group Market Type:
State Status Changed: 11/25/2009
Deemer Date: Created By: Joan Shumaker
Submitted By: Joan Shumaker Corresponding Filing Tracking Number:
Filing Description:
Please see cover letter on Supporting Documentation tab.

Company and Contact

Filing Contact Information

Julie Maclin, Senior Policy Analyst jmaclin@aegonusa.com
P.O. Box 93007 800-553-7600 [Phone] 3446 [Ext]
Hurst, TX 76053-3007 817-285-3394 [FAX]

Filing Company Information

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 Project Name/Number: TLC Flyers/TLC Flyers 0809
 Transamerica Life Insurance Company CoCode: 86231 State of Domicile: Iowa
 P O Box 93005 Group Code: 468 Company Type:
 Hurst, TX 76053-3005 Group Name: State ID Number:
 (800) 553-7600 ext. [Phone] FEIN Number: 39-0989781

Filing Fees

Fee Required? Yes
 Fee Amount: \$175.00
 Retaliatory? No
 Fee Explanation: 7 ads X \$25 each
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Transamerica Life Insurance Company	\$175.00	11/06/2009	31850026

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Marie Bennett	11/25/2009	11/25/2009

SERFF Tracking Number: *AEGJ-126375024* *State:* *Arkansas*
Filing Company: *Transamerica Life Insurance Company* *State Tracking Number:* *44022*
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Project Name/Number: *TLC Flyers/TLC Flyers 0809*

Disposition

Disposition Date: 11/25/2009

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Cover Letter		Yes
Supporting Document	Flyers Variables		Yes
Form	Alternative Pay Flyer		Yes
Form	Benefit Increase Flyer		Yes
Form	Elim Period Flyer		Yes
Form	Home Health Flyer		Yes
Form	Monthly Home Flyer		Yes
Form	Pool of Money Flyer		Yes
Form	Sp Discount Flyer		Yes

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Form Schedule

Lead Form Number: TLC APBF 0809

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	TLC APBF 0809	Advertising	Alternative Pay Flyer	Initial		0.000	TLC APBF 0809 filing.pdf
	TLC BIOF 0809	Advertising	Benefit Increase Flyer	Initial		0.000	TLC BIOF 0809 filing.pdf
	TLC EPF 0809	Advertising	Elim Period Flyer	Initial		0.000	TLC EPF 0809 filing.pdf
	TLC HHCF 0809	Advertising	Home Health Flyer	Initial		0.000	TLC HHCF 0809 filing.pdf
	TLC MHCF 0809	Advertising	Monthly Home Flyer	Initial		0.000	TLC MHCF 0809 filing.pdf
	TLC PMF 0809	Advertising	Pool of Money Flyer	Initial		0.000	TLC PMF 0809 filing.pdf
	TLC SDF 0809	Advertising	Sp Discount Flyer	Initial		0.000	TLC SDF 0809 filing.pdf



[TransCare Options®]

A Plan Designed for a Changing Future®

*When it comes time to use [TransCare Options®],
you can choose how to use your benefits.*

The Alternative Payment Benefit (APB)

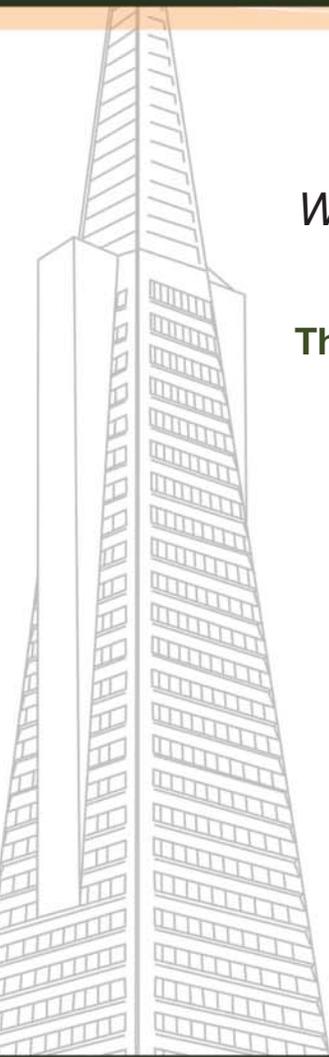
Take freedom of choice one step further with your [TransCare Options®] policy's Alternative Payment Benefit (APB). Once you qualify for benefits, the APB allows you to receive your benefit payments, without submitting receipts, in a lump sum each month.

The APB is paid directly to you. Each month, in lieu of all other benefits for care or services, the APB pays a benefit equal to 10 times the Maximum Daily Benefit or 1/3 your monthly benefit. For example, if your Maximum Daily Benefit is \$200, the APB pays you \$2,000 per month. **You may use the money any way you see fit.** Pay for care by a family member or you can receive care worldwide.

[You also don't have to wait for your money. The APB's 0-day Elimination Period means you are eligible from the first day of benefit eligibility. This benefit does not satisfy the Elimination Period that may apply to other benefits; however, it will help you through difficult times.]

Transamerica Life Insurance Company provides you with the flexibility to enhance your policy and help protect your assets from the high costs of long term care. With a wide range of choices, [TransCare Options®] allows you to combine benefits and create the best policy for you and your family.

The best way to help protect your future is to prepare. [Call your [insurance producer/agent] today/Call Transamerica Life today/Attend an insurance sales seminar and enrollment meeting] to learn about all your choices and for information on how [TransCare Options®] Long Term Care insurance can help protect you from the high cost of long term care.



INDIVIDUAL LONG TERM CARE INSURANCE

TLC APBF 0809

TRANSAMERICA LIFE INSURANCE COMPANY

Underwritten by Transamerica Life Insurance Company. Qualifying for benefits is required. Exclusions and limitations apply. Options and benefits may differ and are not available in all states. Contact [your insurance producer/your insurance agent/your company/Transamerica Life] for details. See the Outline of Coverage for complete policy benefits and details.

Policy series TLC 1-FP 1001 or TLC 1-FP 402; (In ID: TLC 1-P (ID) 408; In LA: TLC 1-P (LA) 504; In OK: TLC 1-FP (OK) 709).

Home Office:

Cedar Rapids, IA

Administrative Office:

P. O. Box 95302

Hurst, TX 76053



[TransCare Options®] A Plan Designed for a Changing Future®

*When it comes time to use [TransCare Options®],
inflation protection shelters you.*

Benefit Increase Options | *Additional Premium Required*

Inflation causes a decline in the purchasing power of your money. A dollar today can buy more than it most likely will in 10 or 20 years. The [TransCare Options®] policy allows you to help meet future costs with available Benefit Increase Options.

The following choices are offered:

- [3% Compound Benefit Increase Option
– increases your benefit amounts each year by 3% of the current dollar amount]
- 5% Compound Benefit Increase Option
– increases your benefit amounts each year by 5% of the current dollar amount
- [5% Simple Benefit Increase Option
– increases your benefit amounts each year by 5% of the original benefit amount]

Transamerica Life Insurance Company understands the high costs of long term care. So, [TransCare Options®] offers the Benefit Increase Option to enhance your policy, help protect your assets and help create the best policy for you and your family.

The best way to help protect your future is to prepare. [Call your [insurance producer/agent] today/Call Transamerica Life today/Attend an insurance sales seminar and enrollment meeting] to learn about all your choices and for information on how [TransCare Options®] Long Term Care insurance can help protect you from the high cost of long term care.

INDIVIDUAL LONG TERM CARE INSURANCE

TLC BIOF 0809



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*When it comes time to use [TransCare Options®],
receive benefits from the first day of benefit eligibility.*

0-day Elimination Period

An Elimination Period is like a deductible. You must meet the Elimination Period before you start receiving benefit payments. Your Elimination Period will vary depending upon the policy that you purchased. But, included in your [TransCare Options®] policy are three benefits that have an automatic 0-day Elimination Period:

- Home Health Care Benefit
- Adult Day Care Benefit
- Alternative Payment Benefit

There is no need to wait for your benefits to begin. These three benefits allow you to start receiving your benefits on the very first day of benefit eligibility.

First day coverage is contingent upon your qualifying for benefits. These benefits do not satisfy the Elimination Period that may apply to other benefits; however, they will help you through those difficult times.

Transamerica Life Insurance Company understands the large expenses that may be incurred with long term care. You can help protect your assets from day one with the 0-day Elimination Period that is included in your policy for the Home Health Care, Adult Day Care and Alternative Payment Benefits.

The best way to help protect your future is to prepare. [Call your [insurance producer/agent] today/Call Transamerica Life today/Attend an insurance sales seminar and enrollment meeting] to learn about all your choices and for information on how [TransCare Options®] Long Term Care insurance can help protect you from the high cost of long term care.

INDIVIDUAL LONG TERM CARE INSURANCE

TLC EPF 0809

 **TRANSAMERICA**
LONG TERM CARE

TRANSAMERICA LIFE INSURANCE COMPANY

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[TransCare Options®]

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*When it comes time to use [TransCare Options®],
your care choice counts.*

Home Health Care and Adult Day Care Benefits

Advances in medicine have extended our life expectancies. However, age still takes a toll on the body and daily activities may become harder to accomplish. Today, aging Americans have a wide variety of choices when they need help undertaking certain activities.

One option is Home Health Care. This may be an alternative to nursing homes and alternative living facilities. You are able to enjoy added peace of mind that staying at home can provide. Another alternative is an Adult Day Care Center. It provides health services and also offers a well-deserved break for the in-home caregiver and may allow the caregiver to keep from interrupting his or her work schedule. [These benefits have a 0-day Elimination Period, which means you are eligible for benefits from the first day of benefit eligibility. These benefits do not satisfy the Elimination Period that may apply to other benefits; however, they may help.]

Transamerica Life Insurance Company is committed to maximizing your care choices. That is why [TransCare Options®] pays for Home Health Care and Adult Day Care [or Qualified Service Provider] actual out of pocket charges up to the Maximum Daily Benefit amount you choose.

The best way to help protect your future is to prepare. [Call your [insurance producer/agent] today/Call Transamerica Life today/Attend an insurance sales seminar and enrollment meeting] to learn about all your choices and for information on how [TransCare Options®] Long Term Care insurance can help protect you from the high cost of long term care.

INDIVIDUAL LONG TERM CARE INSURANCE

TLC HHCF 0809

 **TRANSAMERICA**
LONG TERM CARE

TRANSAMERICA LIFE INSURANCE COMPANY

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When it comes time to use [TransCare Options®] flexibility helps protect you.

Monthly Home Care / *Additional Premium Required*

If Home Health Care is important to you, the Monthly Home Care Benefit is an optional feature you may want to add to enhance your benefit options. It allows you to be reimbursed on a per month basis versus a per day basis. This comes in handy because home care is often provided at varying costs a few days a week.

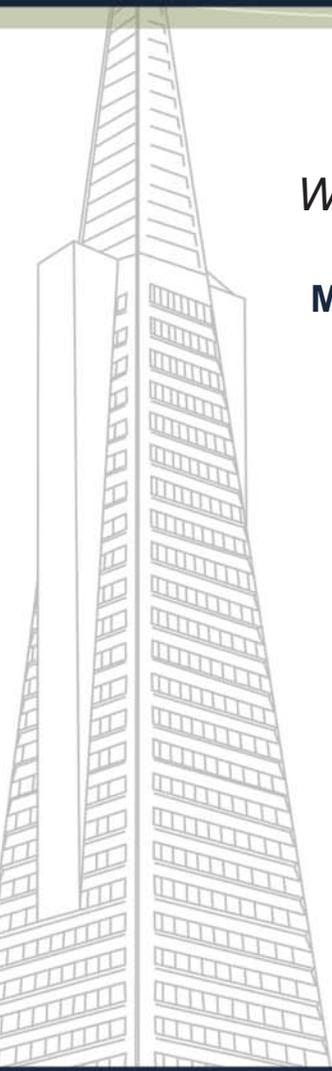
Because health services may vary from day-to-day, this option makes your Home Health Care and Adult Day Care benefits available on a monthly basis (continuous 30-day period). This means that the Maximum Daily Benefit (MDB) no longer applies and you may use the entire benefit in one day, ten days or whatever best suits your needs. [You must be using the Care Coordination Benefit in order to receive this benefit.]

Example: Your policy has a \$100 MDB. On Monday, you receive services from a home health aide and the total charge is \$125. On a daily basis, only \$100 would be covered. On a monthly basis, you would have \$3,000 available (\$100 MDB X 30 days), so all charges for that day would be covered.

[Additionally, you will be reimbursed 2 times the Maximum Daily Benefit for the number of days Professional Services are received during the 30-day period.

Example: Monthly Benefit (\$100 MDB X 30 continuous days)	\$3,000
+ 5 Days Professional Services Received X \$100	+ 500
Total available for 30-day period	\$3,500

The best way to help protect your future is to prepare. [Call your [insurance producer/agent] today/Call Transamerica Life today/Attend an insurance sales seminar and enrollment meeting] to learn about all your choices and for information on how [TransCare Options®] Long Term Care insurance can help protect you from the high cost of long term care.



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[TransCare Options®]

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*When it comes time to use [TransCare Options®],
you can take charge of how you use your benefits.*

Pool of Money

Your money is your money. If you pay into an insurance plan for years, you should be able to receive all of it, and not be limited to only a portion because your policy is limited by a number of years. So, [TransCare Options®] benefit plans state your maximum benefit in terms of dollars, not time.

When you use less than the Maximum Daily Benefit, the remaining unused portion will remain in the Policy Maximum Benefit until the funds have been used. This [TransCare Options®] feature allows you to lengthen the life of your policy beyond a set number of years.

Transamerica Life Insurance Company believes that your benefits are yours, and if you find ways to save money, you can have access to your benefits for a longer period of time.

The best way to help protect your future is to prepare. [Call your [insurance producer/agent] today/Call Transamerica Life today/Attend an insurance sales seminar and enrollment meeting] to learn about all your choices and for information on how [TransCare Options®] Long Term Care insurance can help protect you from the high cost of long term care.



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A Plan Designed for a Changing Future®

*When it comes to a [TransCare Options®] policy
two is better than one.*

Save Up To [40%/30%] with Couples Discounts

Enjoy a discount of up to [40%/30%] [(as compared to standard rates)] when you and your spouse/[domestic partner] apply for and maintain the same level of coverage. This investment allows you and your spouse/[companion] to save now and help protect your assets in the future.

Transamerica Life Insurance Company knows how expensive long term care can be. So, we make buying Long Term Care insurance as affordable as possible, allowing you to more easily protect yourself and your family from the high cost of long term care.

The best way to help protect your future is to prepare. [Call your [insurance producer/agent] today/Call Transamerica Life today/Attend an insurance sales presentation and enrollment meeting] to learn about all your choices and for information on how [TransCare Options®] Long Term Care insurance can help create a strong foundation for your portfolio.

INDIVIDUAL LONG TERM CARE INSURANCE

TLC SDF 0809



TRANSAMERICA LIFE INSURANCE COMPANY

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Supporting Document Schedules

Item Status:

Status

Date:

Satisfied - Item: Cover Letter

Comments:

Attachment:

TLC Flyers AL ltr.pdf

Item Status:

Status

Date:

Satisfied - Item: Flyers Variables

Comments:

Attachment:

Benefit Flyers Variables.pdf



Home Office: Cedar Rapids, Iowa
Long Term Care Division
P O Box 95302
Hurst, Texas 76053-5302
800-553-7600, ext 3446
jmaclin@aegonusa.com

November 6, 2009

Commissioner Walter Bell
Department of Insurance
201 Monroe Street, Suite 1700
Montgomery, AL 36104

RE: **Long Term Care Advertising**
NAIC #: 86231
FEIN #: 39-0989781
Form # / Description: TLC APBF 0809 Invitation to Inquire
TLC BIOF 0809 Invitation to Inquire
TLC EPF 0809 Invitation to Inquire
TLC HHCF 0809 Invitation to Inquire
TLC MHCF 0809 Invitation to Inquire
TLC PMF 0809 Invitation to Inquire
TLC SDF 0809 Invitation to Inquire

Dear Commissioner Bell:

Enclosed are the referenced forms submitted for your review and approval. These forms are not intended to replace any previously approved forms.

These forms are discussing individual benefits that are either in our standard product, or are optional and have additional premium required.

These forms will be used to solicit policy form TLC 1-FP (AL) 206, et al., which was approved by your department on March 8, 2006, and subsequent regulation change filing approvals.

It is our intention to use these forms in both paper and electronic form.

Bracketed information is intended to be variable. Please see the attached Variables document on the Supporting Documentation tab.

We trust that these forms will meet with your approval. If you have any questions, please contact me.

Sincerely,

A handwritten signature in black ink that reads "Julie A. Maclin". The signature is written in a cursive, flowing style.

Julie A. Maclin, ACS
Senior Policy Analyst
Long Term Care Division

BENEFIT FLYERS VARIABLES

ALL 7 PIECES:

TLC APBF 0809	Alternative Payment Benefit Flyer
TLC BIOF 0809	Benefit Increase Options Flyer
TLC EPF 0809	Elimination Period Flyer
TLC HHCF 0809	Home Health Care Flyer
TLC MHCF 0809	Monthly Home Care Flyer
TLC PMF 0809	Pool of Money Flyer
TLC SDF 0809	Spousal Discount Flyer

The Product Name is variable throughout each piece, depending upon the employer or association group it is being used for. The variables could be any of the following packages:

TransCare Options®
Transitions by Transamericasm
SecurePath LTCism
TransCare®

Cover Page: “[Call your [insurance producer/agent] today/Call Transamerica Life today/Attend an insurance sales seminar and enrollment meeting]” is variable depending upon the employer or association group. It will always be a licensed insurance producer/agent who talks with the customer about product benefits.

Last Page: “Contact [your insurance producer/your insurance agent/your company/Transamerica Life] for details” is variable depending upon the employer or association group. It will always be a licensed insurance producer/agent who talks with the customer about product benefits.

TLC APBF 0809 Alternative Payment Benefit Flyer

“[You also don’t have to wait for your money. The APB’s 0-day Elimination Period means you are eligible from the first day of benefit eligibility. This benefit does not satisfy the Elimination Period that may apply to other benefits; however, it will help you through difficult times.]” will only be included if the 0-day EP is allowed in a particular state, and if the package which is being offered includes it in the package.

TLC BIOF 0809 Benefit Increase Options Flyer

“The 3% Compound Benefit Increase Option is ... current dollar amount” will be included if the 3% CBIO is included in the package being offered.

“The 3% Simple Benefit Increase Option is ... original dollar amount” will be included if the 3% CBIO is included in the package being offered.

TLC EPF 0809 Elimination Period Flyer

No additional variables

TLC HHCF 0809 Home Health Care Flyer

“[These benefits have a 0-day Elimination Period, which means you are eligible for benefits from the first day of benefit eligibility. These benefits do not satisfy the Elimination Period that may apply to other benefits; however, they may help.]” will only be included if the 0-day EP is allowed in a particular state, and if the package which is being offered includes it on the Home Health Care package.

TLC MHCF 0809 Monthly Home Care Flyer

“[You must be using the Care Coordination Benefit in order to receive this benefit.]” will be included if it is applicable to the package being offered.

“[Additionally, you will be reimbursed 2 times the Maximum Daily Benefit for the number of days Professional

Services are received during the 30-day period.

Example: Monthly Benefit (\$100 MDB X 30 continuous days) \$3,000

+ 5 Days Professional Services Received X \$100 + 500

Total available for 30-day period \$3,500]” will be included

if it is applicable to the package being offered.

TLC PMF 0809 Pool of Money Flyer

No additional variables

TLC SDF 0809 Spousal Discount Flyer

“[40%/30%]” can be 10% - 40% depending upon the employer/association.

“[(as compared to standard rates)]” will be included in those states requiring explanation of the discount percentage.

“spouse/domestic partner” or “spouse/companion” are variable depending upon the particular state. Those states that do not allow domestic partners or companions would just state “spouse” when being used in that state.