

SERFF Tracking Number: AEGJ-126739955 State: Arkansas
Filing Company: Transamerica Life Insurance Company State Tracking Number: 46319
Company Tracking Number: ADV TLC ABE TCO 0710
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: TCO
Project Name/Number: ADV TCO ABE/ADV TCO ABE

Filing at a Glance

Company: Transamerica Life Insurance Company

Product Name: TCO SERFF Tr Num: AEGJ-126739955 State: Arkansas
TOI: LTC03I Individual Long Term Care SERFF Status: Closed-Approved State Tr Num: 46319
Sub-TOI: LTC03I.001 Qualified Co Tr Num: ADV TLC ABE TCO State Status: Closed
0710

Filing Type: Advertisement

Reviewer(s): Marie Bennett, Harris Shearer

Authors: Julie Maclin, Joan Shumaker, Patsy Holt

Disposition Date: 08/02/2010

Date Submitted: 07/26/2010

Disposition Status: Approved

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: ADV TCO ABE
Project Number: ADV TCO ABE
Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Not Filed
Date Approved in Domicile:
Domicile Status Comments: Advertising not required to be filed in Domicile.

Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:
Filing Status Changed: 08/02/2010

Market Type: Individual
Group Market Size:
Group Market Type:
Explanation for Other Group Market Type:
State Status Changed: 08/02/2010
Created By: Joan Shumaker
Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Joan Shumaker

Filing Description:

Please see Filing Letter on the Supporting Documentation tab.

Company and Contact

Filing Contact Information

Joan Shumaker, Advertising Manager
P.O. Box 93007

jeshumaker@aegonusa.com
817-285-3363 [Phone]

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 Hurst, TX 76053-3007 817-285-3394 [FAX]

Filing Company Information

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: \$150.00
 Retaliatory? No
 Fee Explanation: 3 Advertisements X \$50 each
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Transamerica Life Insurance Company	\$150.00	07/26/2010	38294650

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Marie Bennett	08/02/2010	08/02/2010

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Disposition

Disposition Date: 08/02/2010

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Filing Letter		Yes
Supporting Document	Variables Document		Yes
Form	APB Benefit Flyer		Yes
Form	BIO Flyer		Yes
Form	Elim Period Flyer		Yes

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Form Schedule

Lead Form Number: TLC APBF TCO 0710

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	TLC APBF TCO 0710	Advertising	APB Benefit Flyer	Initial		0.000	TLC APBF TCO 0710 filing.pdf
	TLC BIOF TCO 0710	Advertising	BIO Flyer	Initial		0.000	TLC BIOF TCO 0710 filing .pdf
	TLC EPF TCO 0710	Advertising	Elim Period Flyer	Initial		0.000	TLC EPF TCO 0710 filing.pdf



TransCare Options[®] lets you choose how to use your benefits.

TransCare Options[®]

A Plan Designed for a Changing Future[®]

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. [Attend an insurance sales seminar and enrollment meeting/Call your/the insurance producer/agent/Transamerica National Sales Desk] 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.

[Insurance Producer/Agent Name or National Sales Desk]

[xxx-xxx-xxxx]

Underwritten by Transamerica Life Insurance Company. Qualifying for benefits is required. Exclusions and limitations apply. Benefits and premiums vary depending upon plan selected. [Attend an insurance sales seminar and enrollment meeting/Call your/the insurance producer/agent/Transamerica National Sales Desk] 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



Let your TransCare Options® benefits keep up with rising costs with inflation protection.

TransCare Options®

A Plan Designed for a Changing Future®

Benefit Increase Options

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 (additional premium required).

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. [Attend an insurance sales seminar and enrollment meeting/ Call your/the insurance producer/agent/Transamerica National Sales Desk] 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.

[Insurance Producer/Agent Name or National Sales Desk]

[xxx-xxx-xxxx]

INDIVIDUAL LONG TERM CARE INSURANCE

TLC BIOF TCO 0710

*Not available in DE, IN and NJ.

TRANSAMERICA
LONG TERM CARE

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. Benefits and premiums vary depending upon plan selected. [Attend an insurance sales seminar and enrollment meeting/Call your/the insurance producer/agent/Transamerica National Sales Desk] for details. See the Outline of Coverage for complete policy benefits and details.

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TransCare Options® pays benefits from the first day of benefit eligibility.

TransCare Options®

A Plan Designed for a Changing Future®

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. [Attend an insurance sales seminar and enrollment meeting/Call your/the insurance producer/agent/Transamerica National Sales Desk] 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.

[Insurance Producer/Agent Name or National Sales Desk]

[xxx-xxx-xxxx]

INDIVIDUAL LONG TERM CARE INSURANCE

TLC EPF TCO 0710

*In WA, Adult Day Health Care.

TRANSAMERICA
LONG TERM CARE

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Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Filing Letter		
Comments:			
Attachment:			
AR ABE ltr.pdf			
		Item Status:	Status Date:
Satisfied - Item:	Variables Document		
Comments:			
Attachment:			
Variables ABE.pdf			



Home Office: Cedar Rapids, Iowa
Long Term Care Division
P O Box 95302
Hurst, Texas 76053-5302
800-553-7600, ext 3363
joan.shumaker@transamerica.com

July 26, 2010

Commissioner Jay Bradford
1200 West Third Street
Little Rock, AR 72201

RE: **Long Term Care Advertising**
NAIC #: 86231
FEIN #: 39-0989781
Form # / Description: TLC APBF TCO 0710 Invitation to Inquire
TLC BIOF TCO 0710 Invitation to Inquire
TLC EPF TCO 0710 Invitation to Inquire

Dear Commissioner Bradford:

Enclosed are the referenced forms submitted for your review and approval. These forms are intended to replace forms TLC APBF 0809, TLC BIOF 0809, TLC EPF 0809, approved by your department on November 25, 2009 (SERFF # AEGJ-126375024).

These forms will be used to solicit policy form TLC 1-FP (AR) 206, et al., which was approved by your department on May 30, 2006.

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

Bracketed information is intended to be variable. Please see the 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 cursive script that reads "Joan Shumaker".

Joan Shumaker
Advertising Manager
Transamerica Long Term Care Division

BENEFIT FLYERS VARIABLES

TLC APBF TCO 0710	Alternative Payment Benefit Flyer
TLC BIOF TCO 0710	Benefit Increase Options Flyer
TLC EPF TCO 0710	Elimination Period Flyer

APPLICABLE TO ALL 3 PIECES:

Cover & Back: “[Attend an insurance sales seminar and enrollment meeting/Call your/the insurance producer/agent/Transamerica National Sales Desk]”

Depends upon the employer or association group. It will always be a licensed insurance producer/agent who talks with the customer about product benefits. The National Sales Desk phones are answered by licensed producers in our office.

Cover Page: “[Insurance Producer/Agent Name or National Sales Desk] [xxx-xxx-xxxx]”
Licensed Producer’s name or National Sales Desk and the appropriate contact phone number.