

SERFF Tracking Number: AEGJ-126967785 State: Arkansas  
Filing Company: Transamerica Life Insurance Company State Tracking Number: 47617  
Company Tracking Number: ADV TLC SCBI 1210  
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified  
Product Name: TC - TCO  
Project Name/Number: ADV TLC SCBI 1210/ADV TLC SCBI 1210

## Filing at a Glance

Company: Transamerica Life Insurance Company

Product Name: TC - TCO SERFF Tr Num: AEGJ-126967785 State: Arkansas  
TOI: LTC03I Individual Long Term Care SERFF Status: Closed-Filed- State Tr Num: 47617  
Closed  
Sub-TOI: LTC03I.001 Qualified Co Tr Num: ADV TLC SCBI 1210 State Status: Filed-Closed  
Filing Type: Advertisement Reviewer(s): Stephanie Fowler  
Disposition Date: 01/26/2011  
Authors: Julie Maclin, Joan Shumaker, Patsy Holt  
Date Submitted: 12/30/2010 Disposition Status: Filed-Closed  
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

## General Information

Project Name: ADV TLC SCBI 1210 Status of Filing in Domicile: Not Filed  
Project Number: ADV TLC SCBI 1210 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 Individual Market Type:  
Overall Rate Impact: Filing Status Changed: 01/26/2011  
State Status Changed: 01/26/2011  
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

Joan Shumaker, Advertising Manager joan.shumaker@transamerica.com  
P.O. Box 93007 817-285-3363 [Phone]  
Hurst, TX 76053-3007 817-285-3394 [FAX]

### Filing Company Information

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 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

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**Filing Fees**

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: 1 Advertisement X \$50  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Transamerica Life Insurance Company	\$50.00	12/30/2010	43335033

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	01/26/2011	01/26/2011

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## **Disposition**

Disposition Date: 01/26/2011

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Cover Letter	Filed	Yes
Supporting Document	Variables Document	Filed	Yes
Form	Shared Care Ad	Filed	Yes

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## Form Schedule

### Lead Form Number: TLC SCBI 1210

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed 01/26/2011	TLC SCBI 1210	Advertising	Shared Care Ad	Initial		0.000	TLC SCBI 1210.pdf

# [ TRANSCARE<sup>®</sup> ]

A Plan Designed for a Changing Future<sup>®</sup>

ENHANCED

## ***You Share Your Life, Family and Home – Share Your Long Term Care insurance Benefits too.***

### **Shared Care Benefit Rider<sup>1</sup>**

[TransCare<sup>®</sup>] offers the Shared Care Benefit Rider as an optional benefit that allows couples<sup>2</sup> the ability to access each other's benefits if the Maximum Benefit has been exhausted on one of the policies. It is available to couples that purchase and maintain identical policies.

For example, a couple purchases identical policies with a [\$150/day] Maximum Daily Benefit and a [5] year Benefit Period. Each member of the couple then has a Maximum Benefit of [\$273,750]. Should one member of the couple exhaust his or her Maximum Benefit, that person, can then access the other Maximum Benefit of [\$273,750].

Both Maximum Benefits may become exhausted by one person. In this situation, the person who allowed access to his or her Maximum Benefit may purchase two years of additional coverage<sup>3</sup> with no underwriting.

Additionally, should one member of the couple die, the remaining Maximum Benefit on his or her policy will be transferred to the survivor. In this situation, no further payments on the rider will be required.

Transamerica Life Insurance Company is committed to maximizing your care choices and helps provide you with the benefits that you need when you need them. With the Shared Care Benefit Rider, [TransCare<sup>®</sup>] provides added protection from the high cost of long term care.

***The best way to help protect your future is to prepare. [Contact your [insurance agent/producer] today [or] [a]ttend an insurance sales presentation and enrollment meeting] to learn about all your choices and for information on how [TransCare<sup>®</sup>] Long Term Care insurance can help protect you and your family from the high cost of long term care.***

 **TRANSAMERICA**  
LONG TERM CARE

<sup>1</sup>Additional premium required. Available only to couples<sup>2</sup> who are both issued and maintain identical policies. Not available in conjunction with Return of Premium or Unlimited Maximum Benefit selections.

<sup>2</sup>Couples may include spouses, domestic partners and/or civil union partners. See your insurance agent/producer for details.

<sup>3</sup>An additional coverage request must be made in writing. Premium for additional coverage will be based on attained age. It will not be available on or after your 91<sup>st</sup> birthday, if you are currently eligible for benefits or if you are the one who exhausted the Maximum Benefit of your policy.

Underwritten by Transamerica Life Insurance Company. Qualifying for benefits is required. Exclusions and limitations apply. Options, benefits and premiums vary depending upon plan selected. [Contact your insurance agent/producer] today [or] [a]ttend an insurance sales presentation and enrollment meeting] 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.

**Home Office:**  
Cedar Rapids, IA

**Administrative Office:**  
PO Box 95302  
Hurst, TX 76053

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## Supporting Document Schedules

		<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b>	Cover Letter	Filed	01/26/2011
<b>Comments:</b>			
<b>Attachment:</b>			
AR Cover Ltr.pdf			
		<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b>	Variables Document	Filed	01/26/2011
<b>Comments:</b>			
<b>Attachment:</b>			
Variables.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

December 30, 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 SCBI 1210 Invitation to Inquire

Dear Commissioner Bradford:

Enclosed is the referenced form submitted for your review and approval. This form is intended to replace form TLC SCBI 1110, approved by your department on November 15, 2010 (SERFF # AEGJ-126888483).

The only changes are to add the word "Enhanced" to the piece and update the form number.

This form will be used to solicit policy form TLC 1-FP (AR) 206, et al., which was approved by your department on May 30, 2006, and the Shared Care Benefit approval on August 4, 2010 (SERFF #AEGJ-126667700).

It is our intention to use this form 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 this form will meet with your approval. If you have any questions, please let me know.

Sincerely,

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

Joan Shumaker  
Advertising Manager  
Transamerica Long Term Care Division

## VARIABLES

### TLC SCBI 1210

The Product Name is variable, depending upon the employer or association group it is being used for. The variables could be:

- TransSecure II
- TransSecure Plus
- Transamerica Secure II
- TransCare Options
- TransCare Options Enhanced
- TransCare
- TransCare Enhanced

The Maximum Daily Benefit, Benefit Period, and Maximum Benefit are variable, depending upon what package will be offered to a particular person, employer or association group.

“[Contact your [insurance agent/producer] today [or] [a]ttend an insurance sales presentation and enrollment meeting)” is variable depending upon whether an employer will allow the insurance producer/agent to conduct a meeting or not.