

State: Arkansas **Filing Company:** Transamerica Life Insurance Company
TOI/Sub-TOI: LTC06 Long Term Care - Other/LTC06.000 Long Term Care - Other
Product Name: TransACE Long Term Care Rider Consumer FLYer
Project Name/Number: /

Filing at a Glance

Company: Transamerica Life Insurance Company
Product Name: TransACE Long Term Care Rider Consumer FLYer
State: Arkansas
TOI: LTC06 Long Term Care - Other
Sub-TOI: LTC06.000 Long Term Care - Other
Filing Type: Advertisement
Date Submitted: 07/27/2012
SERFF Tr Num: AESP-128603106
SERFF Status: Closed-Approved
State Tr Num:
State Status: Approved-Closed
Co Tr Num: ICC 12 OL 3010 0812

Implementation: On Approval
Date Requested:
Author(s): Joan King
Reviewer(s): Donna Lambert (primary)
Disposition Date: 07/27/2012
Disposition Status: Approved
Implementation Date:

State Filing Description:

State: Arkansas **Filing Company:** Transamerica Life Insurance Company
TOI/Sub-TOI: LTC06 Long Term Care - Other/LTC06.000 Long Term Care - Other
Product Name: TransACE Long Term Care Rider Consumer FLyer
Project Name/Number: /

General Information

Project Name:	Status of Filing in Domicile: Authorized
Project Number:	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact:	Filing Status Changed: 07/27/2012
	State Status Changed: 07/27/2012
Deemer Date:	Created By: Joan King
Submitted By: Joan King	Corresponding Filing Tracking Number:

Filing Description:

This advertising flyer is intended for use with individuals who are interested in purchasing a Long Term Care Rider with their life insurance policy.

Company and Contact

Filing Contact Information

Joan King, Compliance Assistant	JFKing@aegonusa.com
AEGON	727-557-3332 [Phone]
570 Carillon Parkway	866-419-4389 [FAX]
St. Petersburg, FL 33716-1202	

Filing Company Information

Transamerica Life Insurance Company	CoCode: 86231	State of Domicile: Iowa
4333 Edgewood Road N.E.	Group Code: 468	Company Type: Insurance
Admin Address: 570 Carillon Parkway	Group Name: TLI	State ID Number:
St. Petersburg, FL 33716-1202	FEIN Number: 39-0989781	
Cedar Rapids, IA 52499		
(727) 299-1800 ext. 2363[Phone]		

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	1 x \$50.00 = \$50.00
Per Company:	No

Company	Amount	Date Processed	Transaction #
Transamerica Life Insurance Company	\$50.00	07/27/2012	61236145

SERFF Tracking #:

AESP-128603106

State Tracking #:

Company Tracking #:

ICC 12 OL 3010 0812

State:

Arkansas

Filing Company:

Transamerica Life Insurance Company

TOI/Sub-TOI:

LTC06 Long Term Care - Other/LTC06.000 Long Term Care - Other

Product Name:

TransACE Long Term Care Rider Consumer FLYer

Project Name/Number:

/

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Donna Lambert	07/27/2012	07/27/2012

SERFF Tracking #:

AESP-128603106

State Tracking #:

Company Tracking #:

ICC 12 OL 3010 0812

State:

Arkansas

Filing Company:

Transamerica Life Insurance Company

TOI/Sub-TOI:

LTC06 Long Term Care - Other/LTC06.000 Long Term Care - Other

Product Name:

TransACE Long Term Care Rider Consumer FLYer

Project Name/Number:

/

Disposition

Disposition Date: 07/27/2012

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	ICC 12 OL 3010 0812 AR COVER LETTER AND STATEMENT OF VARIABILITY	Approved	No
Form	TransAce Long Term Care Rider Consumer Flyer	Approved	No

State: Arkansas **Filing Company:** Transamerica Life Insurance Company
TOI/Sub-TOI: LTC06 Long Term Care - Other/LTC06.000 Long Term Care - Other
Product Name: TransACE Long Term Care Rider Consumer FLYer
Project Name/Number: /

Form Schedule

Lead Form Number:

Item No.	Schedule Item Status	Form Number	Form Type	Form Name	Action/Action Specific Data	Readability Score	Attachments
1	Approved 07/27/2012	ICC 12 OL 3010 0812	ADV	TransAce Long Term Care Rider Consumer Flyer	Initial:		ICC 12 OL 3010 0812 MATERIAL.pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
OTH	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages



A Smart Combination

LONG TERM CARE and LIFE INSURANCE



This Story Could Be Yours

Meet Hank, a 60-year-old self-employed architect. He's worked hard to provide a comfortable life for his wife and children, and now he's looking forward to retirement. But lately Hank's been concerned about what would happen to him and his family if he needed long term care like his father, who is facing a number of health issues and large medical bills from his struggle with Alzheimer's. Hank wants to make sure that the cost and burden of any care he might need doesn't fall on his family and loved ones.

What's a Solution?

Health insurance or Medicare can help pay for the cost of immediate medical expenses. But if you need ongoing care for a chronic illness, such as Alzheimer's, or for a serious disability that requires help with daily living needs, such as bathing, dressing, or eating, then you may need long term care coverage, especially since the need for this type of care can last for several months or even years.¹

For Hank and his family—and for you and your family as well—the answer could be a Long Term Care Rider with a TransACE® life insurance policy from Transamerica Life Insurance Company. You get the best of both worlds: long term care coverage if you need it and, if you don't, a guaranteed financial legacy for your family.²

**NEARLY 70%
OF AMERICANS
OVER 65 WILL
NEED SOME SORT
OF LONG TERM
CARE DURING
THEIR LIFETIME.³**

What does having a TransACE® life insurance policy with the Long Term Care Rider mean to Hank and his loved ones?

- Hank can receive long term care benefits from as low as \$25,000 up to \$1 million.
- If Hank does not use the long term care benefits, his premium payments will not go to waste—his loved ones will receive a guaranteed death benefit.
- Hank can count on what he pays for the LTC Rider not to increase. And with the TransACE® life insurance policy that it's a part of, Hank has opportunities to surrender his policy at certain anniversary dates and be eligible to receive up to 100% of the life insurance premiums paid.⁴

¹A chronically ill individual is defined as an individual who has been certified by a Licensed Health Care Practitioner as being unable to perform two of six Activities of Daily Living (bathing, continence, dressing, eating, toileting and transferring) for a period of at least 90 days or having a severe cognitive impairment.

²All guarantees are based on the claims-paying ability of Transamerica Life Insurance Company. Fluctuations in interest rates and/or policy charges may require the payment of additional premiums to keep the policy in force.

³National Clearinghouse for Long-Term Care Information, U.S. Department of Health and Human Services, Will You Need LTC?; http://www.longtermcare.gov/LTC/Main_Site/Understanding/Definition/Know.aspx July 2, 2012.

⁴Surrender value will be the lesser of 100% of gross premiums paid less any refunds, partial surrenders, and outstanding policy loans or 33% of the lowest face amount less any outstanding loans and any partial surrenders during the 60-day period following the 15th or 20th policy anniversary, or at any time on or after the 25th policy anniversary. Surrender value will be reduced on a dollar-for-dollar basis if LTC benefits are paid out. Subject to minimum funding requirements.



Guarantees, Flexibility and Control

A TransACE® life insurance policy with the Long Term Care Rider can help guarantee that you have means to pay for long term care if you need it.⁵ Plus, if you end up not using the long term care benefits, you can still leave your beneficiaries with a financial legacy—a valuable gift for your loved ones.

You're not just buying a life insurance policy. You're helping provide protection for your family from a company that you can trust.

For more information on long term care coverage with a guaranteed TransACE® life insurance policy, contact a Transamerica Life representative today.

⁵The Long Term Care Rider is an acceleration of the base policy's death benefit. Benefits paid under the rider will reduce the policy's death benefit and policy value. Consideration should be given to whether your life insurance needs are met if rider benefits are paid out in full.

TransACE® is a non-participating flexible-premium universal life insurance policy issued by Transamerica Life Insurance Company, Cedar Rapids, IA 52499. Policy Form #1-12611107 (CVAT), Group Certificate #2-72336107 (CVAT), Long Term Care Rider Form No. ICC 12 LTCR02 or LTCR02. Policy and rider form and number may vary, and this policy and rider may not be available in all jurisdictions. Insurance eligibility and premiums are subject to underwriting. In most states, in the event of suicide during the first two policy years, death benefits are limited only to the return of premiums paid.

ICC 12 OL 3010 0812
[XXX XX XX XXXX XXXX]



Transamerica Life Insurance Company

SERFF Tracking #:

AESP-128603106

State Tracking #:

Company Tracking #:

ICC 12 OL 3010 0812

State:

Arkansas

Filing Company:

Transamerica Life Insurance Company

TOI/Sub-TOI:

LTC06 Long Term Care - Other/LTC06.000 Long Term Care - Other

Product Name:

TransACE Long Term Care Rider Consumer FLYer

Project Name/Number:

/

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	ICC 12 OL 3010 0812 AR COVER LETTER AND STATEMENT OF VARIABILITY	Approved	07/27/2012
Comments:			
Attachment(s):	ICC 12 OL 3010 0812 AR LTC LETTER.pdf ICC 12 OL 3010 0812 Statement of Variability AR.pdf		



Transamerica Life Insurance Company
4333 Edgewood Road NE
Cedar Rapids, Iowa 52499

July 27, 2012

Jay Bradford, Commissioner
Arkansas Insurance Department
1200 West 3rd Street
Little Rock, AR 72201-1904

Administrative Office
P.O. Box 5068
Clearwater, FL 33758
(727) 557-2012
jayne.flood@transamerica.com

**RE: TRANSAMERICA LIFE INSURANCE COMPANY
NAIC #86231, FEIN # 39-0989781
Long Term Care Rider Advertising**

**Form No. ICC 12 OL 3010 0812 TRANSACE LONG TERM CARE RIDER CONSUMER
FLYER**

To Whom It May Concern:

Enclosed for review and approval is the above referenced long term care rider advertising form intended to be used with Policy Form 1-126 05-107, approved on January 10, 2012 (SERFF Tracking #AEGB-127866968); and Rider Form LTCR 02 , approved May 22, 2012 (SERFF Tracking #AEGB-128311144). This form will not replace any supplemental illustration form previously approved by the State.

This advertising flyer is intended for use with individuals who are interested in purchasing a Long Term Care Rider with their life insurance policy.

Bracketed information is intended to be variable. Please see the attached Statement of Variability on the Supporting Documentation tab.

We trust that this filing will meet with your approval. If you should have any questions regarding this submission, please feel free to call me at (727) 557-2012, or contact me at my email address above. Thank you in advance for your consideration.

Sincerely,

Jayne Flood
Assistant Vice President
Advertising Compliance

**Statement of Variability
For Consumer Flyer Form ICC 12 OL 3010 0812
Invitation to Inquire**

Transamerica Life Insurance Company is certifying to the following:

1. The final form issued to the consumer will not contain brackets denoting variable text.
2. Any variable text included in this Statement of Variability will be effective only for future issues.
3. Only text included in this Statement will be allowed to be used on the referenced Form received by consumers.
4. Any changes to variable text or permissible ranges of values will be submitted for approval prior to implementation if required by the State of Arkansas.

VARIABLE DESCRIPTIONS:

PAGE 2:

Contact information for agent / producer will appear in bracketed area.

PAGE 2 – BOTTOM OF PAGE:

Bracketed information below the form number in lower left corner reserved for any required state specific form number