



## TRANSAMERICA LONG TERM CARE INDIVIDUAL PRODUCER GUIDE

*This guide is designed for electronic use, with active links to our most current product and sales materials and information.*

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## THE TRANSAMERICA LONG TERM CARE ADVANTAGE

Long Term Care insurance (LTCi) is only as good as the company behind it. With a strong foundation, a solid structure, a secure framework and stellar positioning, Transamerica Long Term Care (Transamerica LTC) has proven to be an LTCi leader.

### A FOUNDATION of Commitment

25 YEARS OF EXPERIENCE. 2012 marked a quarter century of leadership in the LTCi industry for Transamerica Long Term Care. Throughout these 25 years, the foundation of our dedication has remained the same: our commitment to our policy holders to provide the benefits they need when they need them the most.

### A Solid Support STRUCTURE of Experience and Expertise

Almost half a million POLICY HOLDERS. Our devotion to our clients has built a solid structure of experience and expertise that comes from servicing over 460,000 policyholders in 25 years.<sup>1</sup>

### A Secure Financial FRAMEWORK

A+ A.M. BEST RATING & COMDEX 93.<sup>2</sup> Transamerica Long Term Care insurance is underwritten by Transamerica Life Insurance Company, ranked among the highest in the industry in financial strength and operating performance as recognized by independent rating serves like A.M. Best and Comdex.

### Stellar POSITIONING in the LTCi industry

Approximately \$1.7 MILLION IN CLAIMS PAID per day<sup>3</sup>. Transamerica has established itself as a company that both you and your clients can trust. Transamerica has a solid reputation among consumers and agents alike for providing superior customer service and support.

The Power of the Tower: the strength behind the Transamerica brand makes it easy for you to establish a sense of confidence and security with your clients when talking about long term care. With the competitive advantage of a strong and highly regarded brand we make it easy for you to talk about long term care with your clients.



<sup>1</sup>Transamerica LTC actuary: number of issued LTCi policyholders (lives not policies) through the Bedford office from inception through 7/31/2012 <sup>2</sup>A.M. Best Rating as of 12/31/2013. Comdex as of 6/2/2014. <sup>3</sup>Policy Benefits paid, Transamerica Long Term Care, as of 6/2/2014. Copies are available at Transamerica Life Insurance Company.

CLICK HERE TO VIEW THE  
**Transamerica LTCi Advantage Video**

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### *Why Long Term Care insurance?*

No one wants to think about or plan for a future where they are no longer able to care for themselves. Engaging your clients on the benefits of Long Term Care insurance (LTCi) exclusively from that perspective can understandably create resistance.

In many ways, a conversation about LTCi is really not that different from a conversation about life insurance; the emphasis should be about planning for the needs of the family as caregiver for the policy holder. What LTCi can mean for your clients is not whether they will be able to stay out of a nursing home but how an unexpected need for long term care could affect the family. Will their families have to bear the financial and logistical issues of caring for them alone?

Consider this:

- It is quite common for adult children to become the primary caregivers for the parents. Of the 48.9 million caregivers in the U.S., most are family members providing more than 20 hours of care each week.<sup>4</sup>
- The value of caregiving services that family members provide for “free” is estimated to be \$450 billion a year.<sup>5</sup>
- Increases in caregiving expenses have caused 47% of working caregivers to use up ALL or MOST of their savings.<sup>4</sup>
- Medical insurance and Medicare supplement plans will generally not cover long term care.
- In a few states children could become legally obligated to pay for their parents’ long term care bills.

An LTCi policy can help give your clients the security and added peace of mind that come from minimizing the negative impacts that an unexpected long term care event could have on themselves and their family.

<sup>4</sup>American Association for Long-Term Care Insurance, 2011 LTCi Sourcebook.

<sup>5</sup>Valuing the Invaluable: 2011 Update, The Economic Value of Family Caregiving. AARP Public Policy Institute.

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## WHAT SETS OUR PRODUCTS APART

Transamerica Long Term Care insurance policies provide some of the best features and benefits in LTCi available today with the flexibility to meet a wide range of client needs and budgets.

### **0-Day Elimination** (No additional premium required)

0-Day Elimination means benefits are available from the first day that the policy goes into effect. This applies to Home Health Care and Cash Benefit. Other benefits are subject to the elected elimination period for the policy. 0-Day Elimination can help provide an immediate sense of security and potentially reduce out of pocket expenses.

### **Cash Benefit** (No additional premium required)

The insured can choose to take a monthly lump sum equal to 1/3 of the monthly benefit in lieu of all other benefits. The Cash Benefit is paid directly to the insured and may be used in any way he or she sees fit with no receipts required. This is ideal for those receiving home care from a family member.

### **Return of Premium to Age 67** (No additional premium required)

If the insured dies before the age of 67, a refund equal to the sum of all premiums paid, less the amount of any claims paid to the insured, will be returned to the insured's beneficiary. This feature can make LTCi more attractive to younger clients who may feel they are too young to purchase.

### **Accident Benefit** (No additional premium required)

When your client needs long term care due to an unintentional physical injury occurring before age 67 we will cover up to 2 times the Maximum Daily Benefit for eligible expenses while only subtracting no more than the Maximum Daily Benefit from the pool of money.

Not available with Cash Benefit, Global Coverage if available, Remain at Home and Extension of LTC Facility Benefits. Subject to Maximum Daily Benefit, Policy Maximum Amount, and Policy Elimination Period.

*Qualifying for benefits is required.*

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### Step-Rated Benefit Increase Option Rider

With this inflation protection option, both the benefit and the premium will automatically increase each year by either 3% or 5% as selected by the insured when purchasing the policy. This annual increase is not based on attained age. This option allows clients to grow their pool of money to help offset inflation, while offering the flexibility to stop and start these automatic increases. There is no limit to the number of times the insured can stop and restart the increases under this Rider. However, if they choose not to increase benefits for three consecutive years, the option to restart the increases under this Rider will end. If Step-Rated is selected after policy issue using the Deferred Benefit Increase Option, the additional cost of the rider will be added to the premium based on the cost of the rider at issue age, with increases in benefits beginning the effective date of the rider.

### Tailored Benefit Increase Option Rider

With this inflation protection option, available in TransCare® III, benefit amounts change as the insured enters different stages of life. Prior to age 61, benefit amounts will increase on the rider's anniversary each year based on 5% Compound Benefit Increase Option. On the rider's anniversary each year between the ages 61-76, benefit amounts will increase based on 3% Compound Benefit Increase Option. There will be no more benefit increases after the 76th birthday.

Although Benefit Increase Options may be selected after policy issue using the Deferred Benefit Increase Option, *DRA Partnership requires a Benefit Increase Option must be selected at policy issue and be maintained according to the rules of the state.*

### Care Coordination (No additional rider required)

The goal of Care Coordination is to help your client take a more complete look at their care needs in conjunction with any available resources and help obtain a full range of appropriate services. A Care Coordinator is available to work with your client, family members, representatives they designate, and their Physician to develop a Plan of Care. Additionally, the Care Coordinator can assist in securing the recommended services described in the Plan of Care.

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## FLEXIBLE BENEFIT AMOUNTS

Coverage needs will vary among each person you contact. Our policies offer the flexibility you need to help design the best policy for each client.

We suggest that you ask questions to assess your client's needs and investigate the costs of care in your local metropolitan area ([www.longtermcare.gov](http://www.longtermcare.gov)) in order to better meet each individual's requirements, or go to [www.taltc.com](http://www.taltc.com) > Agent Resources > Cost of LTC for an interactive map.

You can help your client determine how much their policy pays, and how soon, by selecting amounts for each of the following:

**Maximum Daily Benefit (MDB)** – the amount we will reimburse for each day of qualified care your client receives.

**Pool of Money (POM, or Policy Maximum Amount)** – the total amount available to cover the cost of long term care services.

**Elimination Period (EP)** – the number of days that your client is responsible for paying the cost of covered long term care services before the policy begins to pay benefits.

For clients who require affordability, you may offer a policy that keeps the MDB and POM low, and the EP high. The added security of some coverage is better than none. For clients who have many assets to help protect, however, you may offer a policy with a high MDB and POM, and a lower EP.

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## POLICY SAVINGS

### *Discounts*

Discounts are provided for couples who maintain a shared residence for at least 2 years.

Couples<sup>10</sup> Discount amounts vary by policy type and have policy-specific requirements. For TransCare® II, spouse/partner policies must have like-benefits. For TransCare® III, spouse/couple policies can differ.

When spouse/partners apply for either the Shared Care or Joint Waiver of Premium Rider, the benefits of the policy will need to match in order to receive the couples discount.

A reduced discount is available for a spouse/partner when only one spouse applies for coverage or whenever both spouses apply and one is declined for coverage.

A preferred health discount may be offered in addition to other discounts available and will be determined at the time of underwriting.

***Some discounts may be offered simultaneously to help your clients save more.***

### *Payment Frequency*

Your client has the choice of how often to pay premiums: annually, twice a year, quarterly, or monthly.

Premiums will vary based upon the mode or frequency of the premium payment. The more often premiums are paid the higher the total premium amount may be per year. All premium selections are subject to underwriting approval.

<sup>10</sup>Under this Policy, the term "spouse/partner" and "couple" may include married persons, domestic partners and/or civil union partners. Requirements vary by state. In ID, LA & VA, discount available for legal spouses only. In MT, the term is "companion" which is defined as a legal spouse or an adult not related by blood to the Policyholder who: (1) resides with the Policyholder on a continuous basis and shares the same address, living expenses, rent and/or mortgage; and (2) has exchanged powers of attorney, or has designated his or her companion as the primary beneficiary under his or her will and/or testamentary trust. Consult your insurance agent/producer for details.

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## SUITABILITY GUIDELINES

People buy Long Term Care insurance for many reasons. Some clients don't want to use their own assets to pay for long term care. Others don't want their family to have to pay for care or don't want to go on Medicaid. But Long Term Care insurance may be expensive, and may not be right for everyone.

By state law the insurance company must ask each applicant for his income and asset levels. This information should be used by the producer and the applicant to help determine if the contemplated policy will be suitable for the client. You should review with the client the premium that will be charged for the coverage selected.

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SUITABILITY GUIDELINES - CONTINUED

As a general rule, premiums for an LTC policy should not exceed 7% of the client's income. This recommendation is found in the National Association of Insurance Commissioner's (NAIC) Long Term Care Model regulation. The Personal Worksheet follows the NAIC guidelines on assets, suggesting that an applicant have a minimum of \$30,000 in assets (excluding a house) before considering the purchase of a Long Term Care insurance policy.

When we receive the completed application we will verify that the Personal Worksheet suitability form is completed and signed by the applicant or that the applicant has checked the opt-out box and signed the form. We may also ask the Insured to verify his responses during the underwriting telephone interview if one is completed.

If the income and/or assets are less than \$30,000 we are required by law to send a suitability letter to the applicant confirming they would still like to purchase coverage. In the state of Texas we are required to send a suitability letter to the applicant even if they elect not to disclose their financial information. The suitability letter in both instances must be returned before we can issue the policy.

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## UNDERWRITING GUIDELINES

If you need assistance with prequalifying an applicant, please contact us via email at [LTC\\_Prequalify@transamerica.com](mailto:LTC_Prequalify@transamerica.com). When the Underwriting Department responds to you, print a copy of the response and attach it to your application. Every effort will be made to place the applicant in the best rating classification, regardless of what has been applied for. When the underwriting evidence indicates that a policy cannot be issued as applied for, rather than simply decline, we will give consideration to providing an alternate offer. In addition to Preferred and Standard premium rates, we can offer coverage on a Class 1 or Class 2 basis with increases in premium. Please refer to the Underwriting Field Guide, available at the Agent Resource Center ([www.taltc.com](http://www.taltc.com)) for complete details.

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## SUBMITTING BUSINESS

### At Time of Application

NOTE: State variations may require the use of additional or different forms.

The following items **MUST** be delivered to the applicant at the time of application:

- The Disclosure Package that includes the following:
  - o Outline of Coverage (Disclosure Form in some states)
  - o “Things You Should Know Before You Buy Long Term Care Insurance”
  - o Potential Rate Increase Disclosure Form, if applicable
  - o Authorization for the Release of Health Information
  - o MIB Authorization for Release of Health Information
  - o Privacy Notice
  - o Disclosure Notice – Medical Information Bureau and Fair Credit Reporting
  - o If replacing existing coverage, Replacement Notice form should be used
  - o State specific forms or guides if applicable
  - o Conditional Receipt
- The NAIC Shopper’s Guide to Long Term Care Insurance
- If eligible for Medicare; The Guide to Health Insurance for People with Medicare

Note: The coverage comparison section of the NAIC Shopper’s Guide must be completed anytime a comparison of Long Term Care coverage is done.

The following items **MUST** be submitted with the application:

- A completed Personal Worksheet
- Signed Authorization for the Release of Health Information
- Signed MIB Authorization for the Release of Health Information
- Signed Replacement Notice, if applicant is replacing existing coverage
- Note that the Rejection Of Compound Inflation must be checked and signed by every applicant choosing anything other than 5% CBIO

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### Resident States

In most cases, the application should match the applicant's state of residence. In certain situations, the application must be signed in either the state in which the application was completed or the applicant's state of residence, but this is considered an exception. Special delivery receipts may be required. Agent must be properly appointed.

The Interstate Compact (IC) States are: AL, AK, CO, GA, ID, IL, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NE, NH, NM, NC, OH, OK, OR, PA, RI, SC, TN, TX, UT, VT, VA, WA, WV, WI, WY.

Please use the following Applicant Situations below to determine whether there is an exception to the rules.

#### APPLICANT SITUATIONS:

- (1) If the two states in question, the state of residence of the applicant and the state where the application is being taken, are both states covered by the IC, an IC policy can be issued for that person and no special delivery receipt is required.
- (2) If the applicant is a resident of an IC state, but the application is being taken in a non-IC state, the producer should refer to the Resident State Guidelines and Chart found on the Agent Resource Center (ARC). [Resident State Guidelines](#) And if a policy can be issued outside the resident state (see the chart for specific states), a special delivery receipt will be required.
- (3) If the applicant is a resident of a nonIC state, then there are three states an agent should be aware of: CT, NJ and NY. CT does not allow anything other than a CT policy to be issued to their residents. The chart on the ARC outlines the requirements for an agent in order to write an out of state policy on a NJ or NY resident. The special delivery receipt requirements will also apply.

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### **Submitting Premium**

For all non list billed applicants, two months premium must be submitted with the application (California requires only one (1) month).

Payment options are check, EFT, or credit card (MasterCard, Visa, Amex and Discover). Credit card can be used to pay initial premium only, up to one (1) full annual modal premium.

Credit Card payment is not available in Alaska, California, Maryland, Nevada, North Carolina, New Jersey, or New York.

Electronic Funds Transfer is recommended for initial premium payment to ensure that you will not have to go back to the client for additional funds. We will draft the premium from their account based upon what is ultimately due. Differences could occur due to a Class Rating in underwriting or a Cash with Application (CWA) difference.

If EFT is selected, when the policy is approved a letter will accompany the policy notifying the applicant that 15 days from the date of this letter we will be drafting your bank account for the amount below. We cannot accept cashier's checks, certified checks from a bank, or money orders.

Monthly direct billing is not available.

### **Balance of Premium**

The balance of any premium due must be received in the Home Office before the coverage will be placed in force.

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### Effective Date

The Effective Date on individual policies is the Signature Date on the completed application unless the following exceptions occur:

- If the client chooses to Save Age:
  - o Application should be dated the actual date signed
  - o Application must be received in the Home Office no later than 30 days following the Signature Date
  - o Application must be signed within 30 days of birthday
  - o A notation to “Save Age” must be included in the “Special Instructions” section on the signature page
  - o The Effective date will be the day before the birthday. Future premiums will be due on that date.
- If a future Effective Date less than 90 days out is requested:
  - o A particular date does not have to be listed; the request can be “Upon Approval”
  - o Note: Coverage provided by Conditional Insurance, if any, will not begin until the future Effective Date
  - o Cannot request a future effective date and also request to Save Age

### Delivery Requirements

Completed delivery requirements must be returned to the Home Office within 25 days from the date sent.

We accept faxes to 800-724-0331 for all requirements except checks. We accept checking account debits (electronic check) via the phone for your clients’ convenience.

### Delivery Receipt

In states that require a delivery receipt (LA, PA, SD, WV) the delivery receipt must be signed and received in the Home Office within 25 days. If the delivery receipt has not been received by the 25th day, a new policy will be sent directly to the policyholder. This will ensure compliance with requirements under the IRS code which mandates that tax-qualified long term care policies be delivered to the policyholder within 30 days of approval. A delivery receipt is also required when the policyholder’s resident state is different than the state where the application was signed.

Note that the agent may instruct the Home Office to send the policy directly to the policyholder.

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### Premium Payments

Payment by credit card is accepted only for the initial premium payment up to the full annual amount. For premium payments after the initial premium payment, bank draft/electronic fund transfer (EFT) or check are the only forms of payment accepted. Money orders, cashier's checks or certified checks from the bank are not accepted.

Note that we will accept EFT for all modes of payment. If client pays monthly, EFT is the only payment accepted.

For monthly EFT payments:

- The initial 2 month deposit will be debited upon receipt of the application at the home office.
- Policyholder will be notified that the next draft for the 3rd month's premium and/or balance of CWA (cash with app) will occur 15 days after the policy is mailed.
- The next draft for the 4th month's premium will occur when payment is due, so there may be a longer period of time between the 2nd and 3rd drafts, depending on how long the underwriting process takes. Subsequent drafts will occur as scheduled.

### Signed Endorsement

When required, a signed endorsement must be received in the Home Office before coverage will be placed in force. Endorsements are required for changes to benefits, changes in premium, and corrections to an incomplete or incorrect application.

### Replacements

We strongly recommend that you compare the proposed policy with the current policy, and document the reasons for recommending a replacement. We suggest that you retain your own copy of this written comparison and recommendation. You and the applicant will then need to sign the replacement form and return it along with the application.

If the Long Term Care insurance policy is replacing a policy underwritten by another Transamerica or AEGON Insurance Group Company we will ask for the producer's brief, written explanation as to why this replacement is in the policyholder's best interest.

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Any LTC policy or rider replacing an existing LTC policy or rider pays the 2nd year commission rate in the 1st year. Exceptions may apply (subject to state imposed limitations) if the policy or rider being replaced is not a Transamerica Company or other AEGON company policy or rider, AND the replacement policy is clearly and substantially better than the policy being replaced. Please consult your commission schedule for details.

**Reinstatements**

Full Underwriting – regardless of the type of policy, benefits or underwriting standards used when the original application was made.

Any policy, regardless of benefits or original underwriting, that has lapsed for non-payment of premium may be reinstated within 90 days of the date of lapse, subject to Full Underwriting. A full application must be submitted, without a premium deposit, and will be subject to Full Underwriting. In some states, reinstatement is available for up to 6 months when the lapse was due to cognitive impairment.

Long Term Care Policies may not be reinstated after 90 days. After 90 days, applicants must reapply for new coverage at current age following the Full Underwriting procedures, with a full application and a premium deposit.

Please contact the Customer Service Department for additional information regarding the reinstatement rules and procedures.

**Statement of Good Health**

This form is used when the Underwriter requires verification that an applicant’s health status has not changed since the date the application was signed. It might be used if the new business/underwriting process took longer than expected due to missing information or forms. If this form is requested, it must be signed and returned to the Home Office before coverage will be effective.

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## TOOLS AND MATERIALS

### Innovative Tools

- The **Agent Resource Center** ([www.taltc.com](http://www.taltc.com)) is your one-stop support and work portal for all your marketing and sales needs, including training presentations, marketing supplies and forms, quotes, and application status.
- The **TransQuote® Illustration System** allows you to generate customized proposals for clients via an easy to use interface. It is available to agents who are licensed and appointed with Transamerica Long Term Care and can be run directly from the Agent Resource Center ([www.taltc.com](http://www.taltc.com)) or downloaded to your computer for convenient off-line quoting.
- Everything you need to quote Transamerica Long Term Care insurance is now in the palm of your hand. The **TransQuote® Mobile** application allows you to create on-the-go quotes on multiple portable devices: Apple iPhone, iPad, Apple iTouch and Android. The app is a free download.
- **TransBuilder** is an intuitive yet powerful tool found on the Agent Resource Center that allows you to easily and seamlessly embed your name and agency logo in Transamerica's best marketing materials. One of the great features of TransBuilder is the ability to send personalized co-branded materials as email attachments directly to your clients at no cost to you. You can find TransBuilder in the "Order Supplies" submenu.

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### **Advertising and Marketing Materials**

All agent/producer materials utilizing the Transamerica logo and/or featuring our products must have written approval from Transamerica LTC prior to use. If necessary, we will file advertising in those states where filing is required.

Marketing materials are approved for one year's use from the date of LTC Compliance approval. After one year, materials should be resubmitted through the Transamerica Marketing Communications group for review. Insurance Producer/Agent recruiting and product advertising on the Internet, by facsimile (fax), or E-mail must also be approved prior to use.

Marketing materials should be submitted for review through the Marketing Communications mailbox at [LTCMKT@transamerica.com](mailto:LTCMKT@transamerica.com). Please refer to the Professional Conduct Principles and Policies (TLC A PC), available at the Agent Resource Center, [www.taltc.com](http://www.taltc.com), for complete details.

### **Downloading PDFs from Transamerica Long Term Care**

Log in to [www.taltc.com](http://www.taltc.com). Go to Order Supplies > Print Order for both PDFs and hard copies. To download PDF's: "Left Click" on the icon (picture) at the left side of the page to make it full screen, then "Right Click" and "Save As" to put on your desktop or in a folder on your PC.

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## CONTRACTING AND LICENSING

### Insurance Agents/Producers

All Long Term Care agents/producers must be properly licensed and be current on all Long Term Care training requirements for all state(s) in which they expect to do business. Agents will be contracted and appointed with Transamerica Long Term Care before being permitted to take any applications under Transamerica Life Insurance Company (TLIC). So please apply for appointment prior to submitting an application, even for “Just-in-Time” states.

Producers who are interested in selling Transamerica Long Term Care Insurance should contact their marketing organization for the Application for Appointment and the Agent Agreement. If your managing agency does not have a Transamerica selling agreement, please call our marketing team at 1-888-545-2713 and we will introduce you to a distribution channel that will best support your sales.

Electronic agent contracting/appointment is available. Please contact your marketing organization for an authorization code to register.

Transamerica Life Insurance Company Licensing Department contact information:

**Transamerica Life Insurance Company**

Licensing Department

P.O. Box 869093

Plano, TX 75086-9093

Telephone: 1-866-588-8745

Fax: 1-866-630-7496

Email: [LTCLicensing@transamerica.com](mailto:LTCLicensing@transamerica.com)

Once an agent has been appointed, a welcome letter will be sent to the agent, along with the executed contract, via email or mail.

An agent writing number allows you full access to our Agent Resource Center ([www.taltc.com](http://www.taltc.com)).

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### Agent Licensing and Appointment

ATTENTION: You must verify the following information before submitting any business:

1. That you are properly licensed and appointed by Transamerica Long Term Care and by the state in which you intend to solicit business
2. That the product you wish to offer is approved in the state in which you intend to solicit business
3. That you signed and returned the Professional Conduct Principles and Policies Acknowledgment that accompanied your licensing and appointment paperwork

### DRA Partnership Requirements

Transamerica Long Term Care makes state required DRA Partnership Training easy through our website [www.TALTC.com](http://www.TALTC.com) designed to help you maintain your licensing requirements. All training content is ClearCert Certified and is available online, or for large groups in an onsite classroom.

With the Partnership Training - Agent Resource Training Center you are able to:

- Review your State Training Requirements
- Purchase an online course
- View your training history
- Print your certificate of completion
- Receive automatic reminders when future training is due

The Agent Resource Training Center can also help save you time. Training updates, test results and certificates of course completion are automatically sent within one business day to your state Department of Insurance and our Licensing Department. This means you no longer have to be concerned with preparing and sending us your training paperwork. The site also enables you to keep track of your training history and print your completion certificates at anytime.

With our Partnership Training website we make it easy for you to track and stay compliant with the mandatory DRA Partnership training requirements in your state. To see what the requirements are for each state, go to <https://www.taltc.com/ARC/public/licensing.jsf>.

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ADMINISTRATION

*Professional Conduct and Marketplace Standards*

**Code of Professional Conduct**

As a Company, we are committed to treating our customers fairly and ethically. Our distributors are the individuals and firms authorized to sell our insurance products. You have a responsibility to treat our customers fairly and ethically. Our employees, who support our agents, brokers and representatives and serve our mutual customers, share that responsibility and trust. As distributors and employees, we will apply the principles and policies included in the Professional Conduct Principles and Policies (TLC A PC), available on the Agent Resource Center at [www.taltec.com](http://www.taltec.com). Agents and Producers receive a copy and sign an acknowledgement at the time of contracting. Transamerica is committed to following the ethical principles in the sale of life and Long Term Care insurance to individuals. In so doing the Company subscribes to these six principles (see the Agent Resource Center for additional information):

To conduct business according to high standards of honesty and fairness and to treat our customers as we would expect to be treated

To provide competent and customer-focused sales service

To compete fairly

To provide advertising and sales material that is clear, honest and fair in content

To handle customer complaints and disputes fairly and promptly

To maintain a system of supervision and monitoring reasonably designed to demonstrate the Company's commitment to and compliance with these principals.

If you have questions about any market conduct matter, please contact your management or the LTC Marketing Department:

**Transamerica Long Term Care**  
P.O. Box 869093  
Plano, TX 75086-9093  
1-888-545-2713

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## ADDITIONAL REFERENCES

### Knowing the Tax Advantages of Long Term Care insurance

Paying for Long Term Care insurance may have important tax implications for your clients. “Frequently Asked Tax Questions for Long Term Care Insurance” is a useful publication from Transamerica that is intended to give you a better understanding of tax laws applicable to Long Term Care insurance. While tax regulations can change and this publication should not take the place of professional tax advice, it does provide information and examples that may be helpful to you in presenting the best opportunities for your clients.

“Frequently Asked Tax Questions for Long Term Care Insurance” is available for download at the Agent Resource Center, [www.taltc.com](http://www.taltc.com).

### How Transamerica Underwrites Long Term Care insurance

Your Long Term Care insurance business is built on applications that are successfully approved by us for underwriting. Transamerica’s “Underwriting Field Guide” outlines our philosophy and expectations for insurability and is designed to help you prepare your clients for the underwriting process and facilitate their application. Note that we require regular doctor’s visits to qualify for the Preferred Health discount.

“Underwriting Field Guide” is available for download at the Agent Resource Center, [www.taltc.com](http://www.taltc.com).

### Quick Guide for Long Term Care insurance Facts

It can be frustrating to dig through a Long Term Care insurance policy to answer basic questions about benefits, requirements, and plan design. Transamerica’s “Fast Facts” (for agent use only) puts the essential information about each of our policies at your fingertips so you can spend more time on your sales instead of research.

“Fast Facts” is available for download at the Agent Resource Center, [www.taltc.com](http://www.taltc.com).

### Understanding Long Term Care insurance for Multi-Life

There are additional steps when you are selling to a worksite, association or other Multi-Life group. The Multi-Life Producer Guide will help walk you through the steps to ensure a successful case.

“Multi-Life Producer Guide” is available for download at the Agent Resource Center, [www.taltc.com](http://www.taltc.com). Our dedicated Multi-Life help line is 866-475-6925.

This is an individual Long Term Care insurance policy underwritten by Transamerica Life Insurance Company, Cedar Rapids, IA, or in NY Transamerica Financial Life Insurance Company (Administrative Office: P.O. Box 93003, Hurst, Texas 76053-3003). Policy ICC13 TLC-4, ICC10 TLC-3 or Policy Series TLC 2-P 0410, TFL 2-P NYF 0410, or TFL 2-P NYAF 0410. Qualifying for benefits is required. Benefit options not available in all states. Policy features may be named differently depending on state. Exclusions and limitations apply. Premiums and benefits vary based upon plan selected.

Premium rates for TransCare® III vary by gender.

Although the policy allows the company to adjust premiums as needed, with prior approval if required by the Interstate Insurance Product Regulation Commission or your state's Department of Insurance, we cannot increase premiums during the policy's rate guarantee period. When a rate guarantee period ends, premium will be adjusted by any premium increases that may have occurred during the rate guarantee period. We cannot single out individuals for a premium rate increase, but we can change premium based on our experience with all insureds in the individual's same premium class. Once we issue coverage, we cannot cancel the individual's policy as long as they pay their premium on a timely basis.