

TRANSAMERICA LIFE INSURANCE COMPANY - NAIC 86231

LTC Individual - Comprehensive - Tax Qualified Female

POLICY FORM: TLC 3-P CA 0313F

1. Maximum Policy Benefit (MPB) = In year(s). Enter the number of days in Company Notes.

1Yr	2Yrs	3Yrs	4Yrs	5Yrs	6Yrs	7Yrs	Lifetime	Other
YES	YES	YES	YES	YES	YES	NO	NO	NO

MPB Company Notes: 365, 730, 1095, 1460, 1825, 2190 (Number of Days) times the Nursing Facility Daily Benefit =36500, 73000, 109500, 146000, 182500, 219000. Other Notes: Insured may select any policy maximum up to an equivalent of 6 years with a minimum of 1 year. For example, a daily benefit of \$200 with a maximum benefit of \$250,000 may be selected and will provide \$200 per day for 1250 days.

2. Nursing Home/Facility Daily Benefit Amounts (NHB) - There is a minimum and maximum amount offered in dollar increments.

Minimum	Maximum	Increment	Day	Week	Month	None	Other
\$50	\$500	\$10	YES	NO	NO	NO	NO

NHB Company Notes: Enter Notes: None reported by the company.

3. Residential Care Facility Daily Benefit (RCFE) - Represents the RCFE percentage of the Nursing Facility Limit.

100%	90%	80%	75%	70%	Other
YES	NO	NO	NO	NO	NO

RCFE Company Notes: RCFE is included in the Facility definition in states that use the RCF definition rather than ALF.

4. Home Care Benefit Amounts (HCB) - Represents the percentage of Home Care Benefit Amount for Comprehensive Policies.

100%	90%	80%	75%	70%	60%	50%	None	Other
YES	NO	NO	NO	NO	NO	NO	NO	NO

HCB Company Notes: Enter Notes: None reported by the company.

5. Home Care Only Benefit Amounts (HCBO) - There is a minimum and maximum amount offered in dollar increments.

Minimum	Maximum	Increment	Day	Week	Month	None	Other

HCBO Company Notes: Not Applicable: This LTC policy form is not a Home Care Only policy.

6. Qualification for Benefits (QB)

QB_2_OF_6	QB_2_OF_7	QB_OTH1	QB_MN	QB_CI	QB_90DR	QB_OTH2
YES	NO	NO	NO	NO	NO	NO

QB Company Notes: The need for human assistance or continual supervision to perform at least 2 of 6 Activities of Daily Living.

7. Elimination Period (EP) = In days Select all that applies.

0	20	30	60	90	100	CALENDAR	SERVICE	Other
YES	NO	YES	YES	YES	NO	NO	YES	YES

EP Company Notes: Enter Notes: 180 day EP available

8. Inflation Protection (IP)

IP Methodology	5% Compound	5% Simple	Guaranteed Purchase Option	Other
Explain IP Methodology: Compound Inflation: On each anniversary of the effective date of this rider, the maximum benefit and the daily benefit will be increased by 3% or 5%. The premium will not increase. Step-rated Compound Inflation: On each anniversary of the effective date of this rider, the maximum benefit, the daily benefit, and the premium will be increased by 3% or 5%. Tailored Inflation: On each anniversary of the effective date of this rider up to an including the one prior to your 61st birthday, the maximum benefit and daily benefit will be increased by 5%. Starting with the anniversary of the effective date of this rider on or after your 61st birthday, the maximum benefit and daily benefit will be increased by 3%. Starting with the anniversary of the effective date of this rider on or after your 76th birthday, there will be no more increases under this rider.	YES	NO	YES	YES
IP Company Notes: Tailored, and 5% Compound, 3% and 5% Step Rated Compound				

9. Waiver of Premium (WAVP)

Enter Notes: If you are receiving benefits under the Facility or Home Health Care provisions, or if you are receiving the cash benefit.

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Long Term Care Insurance Rates

POLICY FORM: TLC 3-P CA 0313F

FEMALE

LTC Individual - Comprehensive - Tax Qualified Female

30 Day Elimination Period - Service 90 Day Elimination Period - Service

ISSUE AGE	30 Day Elimination Period - Service				90 Day Elimination Period - Service			
	3 YEAR MAXIMUM POLICY BENEFIT - NO INFLATION PROTECTION	3 YEAR MAXIMUM POLICY BENEFIT - WITH INFLATION PROTECTION	LIFETIME BENEFIT - NO INFLATION PROTECTION	LIFETIME BENEFIT - WITH INFLATION PROTECTION	3 YEAR MAXIMUM POLICY BENEFIT - NO INFLATION PROTECTION	3 YEAR MAXIMUM POLICY BENEFIT - WITH INFLATION PROTECTION	LIFETIME BENEFIT - NO INFLATION PROTECTION	LIFETIME BENEFIT - WITH INFLATION PROTECTION
40	\$840	\$4,755			\$715	\$4,047		
45	\$974	\$4,937			\$829	\$4,202		
50	\$1,165	\$4,973			\$991	\$4,232		
55	\$1,375	\$5,100			\$1,170	\$4,340		
60	\$1,890	\$5,538			\$1,609	\$4,713		
65	\$2,768	\$6,312			\$2,356	\$5,372		
70	\$4,239	\$7,968			\$3,607	\$6,782		
75	\$6,912	\$11,128			\$5,882	\$9,470		
80								

Note: 0 day EP for HHC, marital discounts available, 5 year rate guarantee, preferred rate class