

Date

Insured name  
Address 1  
Address 2  
City, State Zip

Re: New York Medicare Supplement Notice of Rate Increase  
Policy:  
Certificate:

Dear (Insured Name),

Transamerica Financial Life Insurance Company will be filing a proposed rate adjustment for your New York Medicare Supplement Plan with the New York State Department of Financial Services, no sooner than October 22, 2013.

Guidance provided by the National Association of Insurance Commissioners suggested that the rates for plans common to both the Medicare Supplement 1990 and 2010 Standard Plans should converge to a common rate over time. With the proposed decreases for the 1990 plans, we have taken a step toward this end. Remaining differences in the base rates after the proposed changes will be as follows: Plans A, B, and F less than 3%, Plan C less than 1%, Plan D less than 9% and Plan G less than 11%.

The following table is a list of the proposed rate adjustments to the Medicare Supplement Plans:

<b>1990 Plans</b>	<b>Change</b>	<b>2010 Plans</b>	<b>Change</b>
1990-Plan A	No Change	2010-Plan A	No Change
1990-Plan B	-5.0%	2010-Plan B	No Change
1990-Plan C	-5.0%	2010-Plan C	No Change
1990-Plan D	-10.0%	2010-Plan D	No Change
1990-Plan E	No Change	2010-Plan F	No Change
1990-Plan F	-5.0%	2010-Plan G	No Change
1990-Plan G	-10.0%	2010-Plan K	No Change
1990-Plan H	No Change	2010-Plan L	No Change
1990-Plan I	No Change	2010-Plan M	No Change
1990-Plan J	No Change	2010-Plan N	No Change

The Company prepared a narrative summary that provides a detailed, plain English explanation of the reasons for the Transamerica Financial Life proposed rate adjustment. This narrative summary will be posted on the Transamerica Financial Life and Department of Financial Services websites. Please note that the Superintendent of Financial Services may approve the proposed rate changes as requested, modify the proposed rate changes, or disapprove the proposed rate changes in its entirety. We will provide you with at least 60 days advance written notice of the premium rate adjustment that the Superintendent ultimately approves.

The policyholder has 30 days from the date the Company submits its proposed rate adjustment filing to the Superintendent, which will be submitted no sooner than October 22, 2013, to contact the insurer or the Department to request additional information or to submit written comments. The policyholder should include the name of the insurer, "Transamerica Financial Life Insurance Company" and their policy, Medicare Supplemental Plan, and their written comments to the Department of Financial Services. Written comments submitted to Department of Financial Services will be posted on the Department's website with personal identifying information removed.

The policyholder may contact the Company to determine the start and conclusion of the 30 day comment period.

Contact information for the New York State Department of Financial Services and the Transamerica Financial Life Insurance Company is as follows:

Health Bureau - - Premium Rate Adjustments  
New York State Department of Financial Services  
One Commerce Plaza  
Albany, NY 12257  
Website: <https://myportal.dfs.ny.gov/web/prior-approval/welcome>  
Email: [PremiumRateIncreases@dfs.ny.gov](mailto:PremiumRateIncreases@dfs.ny.gov)

To submit an online comment to the Department of Financial Services, use the following link:  
<https://myportal.dfs.ny.gov/web/prior-approval/submit-a-comment>

Transamerica Financial Life Insurance Company  
100 Light Street, Floor B1  
Baltimore, MD 21202  
Website: [www.medsuppinfo.com](http://www.medsuppinfo.com)  
Email: [admsservicecenter@aegonusa.com](mailto:admsservicecenter@aegonusa.com)

Sincerely,



Colleen R. Gizinski  
Vice President