

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW THIS NOTICE CAREFULLY.**

The Cincinnati Life Insurance Company (“CLIC”) is required to provide this Notice to you by the privacy rules (the “Privacy Rules”) issued under the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”). The Notice describes CLIC’s practices with respect to CLIC insurance policies that are within the definition of “health plan” under the Privacy Rules (“Covered Policies”) and covered by this Notice. Examples of Covered Policies are Medicare supplement and certain long-term care policies. CLIC is a hybrid entity because it also issues insurance policies that are not Covered Policies and not subject to the Privacy Rules. CLIC can revise this Notice at any time. If CLIC makes any material change to this Notice, you will be provided with a revised Notice. If you have any questions, please contact the “HIPAA Privacy Officer” at The Cincinnati Insurance Companies, Attn: Regulatory & Compliance – Privacy, P.O. Box 145496, Cincinnati, Ohio 45250-5496, or by calling or emailing 888-744-2170 (toll free), 513-603-5992 or [privacy@cinfin.com](mailto:privacy@cinfin.com).

**Your Protected Health Information**

The Privacy Rules only protect certain medical information, which is known as “protected health information” (or “PHI”). Generally, PHI is individually identifiable health information created or received in connection with a Covered Policy that relates to: (1) your past, present or future physical or mental health; (2) providing you with health care; or (3) the past, present or future payment for your care. This Notice only applies to PHI related to Covered Policy.

**CLIC’s Use And Disclosure Of PHI**

In certain circumstances, we can use or disclose your PHI without your permission. However, most uses and disclosures of psychotherapy notes, uses and disclosures of PHI for marketing purposes, and disclosures that constitute a sale of PHI, require an authorization. The following categories describe the different ways that your PHI can be used.

**For Payment.** CLIC can use or disclose your PHI in connection with: (1) determining your eligibility benefits; (2) facilitating payment for treatment and services that you received from health care providers; (3) determining CLIC’s benefit responsibility; and (4) coordinating coverage. For example, a doctor or health facility involved with your care may submit a claim (containing PHI) to CLIC for processing.

**For Health Care Operations.** CLIC can use or disclose your PHI in connection with other operations that are necessary to administer Covered Policies. For example, we may use and disclose your PHI in

connection with quality assessment and improvement activities, legal services, audit services, fraud and abuse detection, business planning, management, and development, CLIC’s general administrative activities, and underwriting and other similar activities. However, genetic information cannot be used or disclosed for underwriting purposes other than with respect to long-term care Covered Policies.

**For Treatment.** CLIC can use or disclose your PHI to facilitate medical treatment or services by health care providers, including doctors, nurses, technicians, medical students, or other medical personnel who are taking care of you. For example, your health care provider may ask us to disclose your PHI in connection your treatment.

**To Business Associates.** CLIC can contract with individuals or entities known as “Business Associates” to perform various functions or services on its behalf. To perform these functions or services, a Business Associate will have access to, and may use and disclose, your PHI, but only after they enter into an agreement with CLIC to implement appropriate safeguards intended to protect your PHI (i.e., a “Business Associate Agreement”). For example, after entering into a Business Associate Agreement CLIC may disclose your PHI to a Business Associate to administer claims or to provide support services, such as utilization management, fraud detection, audit and IT consulting.

**As Required by Law.** CLIC can disclose your PHI when it is required by federal, state or local law. For example, CLIC can disclose your PHI when required to do so by federal or public health disclosure laws.

**To Avert a Serious Threat to Health or Safety.** CLIC can use or disclose your PHI when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. However, disclosures can only be made to those able to help prevent the threat. For example, your PHI can be disclosed in a physician’s licensing proceeding.

**To a Plan Sponsor.** For the purposes of administering a health plan, CLIC can disclose your PHI to plan sponsors who will generally only use or disclose your PHI to perform administration functions for the health plan or as required by the Privacy Rules. Your PHI cannot be used for employment purposes without your authorization.

**Special Situations**

**Organ and Tissue Donation.** If you are an organ donor, CLIC can disclose your PHI to organizations

that handle organ procurement or organ, eye or tissue transplantation, or to an organ donation bank, as necessary to facilitate organ or tissue donation and transplantation.

**Military and Veterans.** If you are a member of the U.S., armed forces or a foreign military, CLIC may disclose your PHI as required by military authorities.

**Workers' Compensation.** CLIC can disclose your PHI in connection with workers' compensation or similar programs that provide benefits for work-related injuries or illness.

**Public Health Risks.** CLIC can disclose your PHI for public health activities, such as those which involve: (1) preventing or controlling disease, injury or disability; (2) reporting births and deaths; (3) reporting child abuse or neglect; (4) reporting reactions to medications or problems with products; (5) notifying people of recalls of products; (6) notifying people who may have been exposed to a disease or may be at risk for contracting or spreading a disease; and (7) notifying the appropriate government authority if it is believed you have been the victim of abuse, neglect or domestic violence, and if you agree to the disclosure or it is required or authorized by law.

**Health Oversight Activities.** CLIC can disclose your PHI to a health oversight agency for activities, authorized by law, that are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws. These activities include audits, investigations, inspections, and licensure.

**Lawsuits and Disputes.** If you are involved in a lawsuit or a dispute, CLIC can disclose your PHI in response to a court or administrative order, subpoena, discovery request, or other lawful process by someone else involved in the dispute. However, efforts must have been made to tell you about the request or to obtain an order protecting the information requested.

**Law Enforcement.** CLIC can disclose your PHI if requested by a law enforcement official: (1) in response to a court order, subpoena, warrant, summons or similar process; (2) to identify or locate a suspect, fugitive, material witness, or missing person; (3) about the victim of a crime if, under certain limited circumstances, CLIC are unable to obtain the victim's authorization; (4) about a death that is believed to be the result of criminal conduct; or (5) about criminal conduct.

**Coroners, Medical Examiners and Funeral Directors.** CLIC can disclose your PHI to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. CLIC can also disclose your PHI

to a funeral director if necessary to carry out his or her duties.

**National Security and Intelligence Activities.** CLIC can disclose your PHI to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.

**Inmates.** If you are an inmate of a correctional institution or under the custody of a law enforcement official, CLIC can disclose your PHI to the correctional institution or law enforcement official if necessary for the institution: (1) to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.

**Research.** CLIC can disclose your PHI to researchers when: (1) the individual identifiers have been removed; or (2) when an institutional review board or privacy board has reviewed the research proposal and established protocols to ensure the privacy of the requested information, and approves the research.

#### Other Disclosures

**Legal Representatives.** CLIC will generally disclose your PHI to individuals authorized by you, or to your legal representative if you provide CLIC with written notice/authorization and supporting documents (e.g., power of attorney). However, CLIC is not required to disclose your PHI to your legal representative if CLIC reasonably believes that: (1) you have been, or may be, subjected to domestic violence, abuse or neglect by this person, or treating this person as your legal representative could endanger you; and (2) in CLIC's professional judgment, it is not in your best interest to treat this person as your legal representative.

**Spouses/Family Members.** CLIC will generally send all mail to the employee covered under the Covered Policy, including mail relating to his or her family members covered under the policy. If someone covered under the policy requested restrictions or confidential Communications (described later in this Notice), and if the HIPAA Privacy Officer agreed to the request, CLIC will send mail as provided by the request.

**Authorizations.** Uses or disclosures of your PHI that are not described in this Notice will only be made with your written authorization. You can revoke a written authorization at any time if the revocation is in writing. Written revocations are only effective for future uses and disclosures and will not be effective for PHI that may have been used or disclosed (in reliance upon your written authorization) prior to receiving your revocation.

## Your Rights

**Inspecting and Copying PHI.** You have the right to inspect and copy certain PHI that may be used to make decisions about your benefits. To inspect and copy this PHI, you must submit your request in writing to the HIPAA Privacy Officer. If you request a copy of the information, you may be charged a fee for the costs of copying, mailing or other supplies associated with your request. CLIC can deny your request to inspect and copy PHI in certain limited circumstances. If you are denied access to your PHI, you can request that the denial be reviewed by submitting a request in writing to the HIPAA Privacy Officer.

**Amending PHI.** If you believe that certain PHI that is maintained by CLIC is incorrect or incomplete, you have the right to request an amendment as long as the PHI is maintained by CLIC. You can request an amendment, by submitting a written request in writing (along with the reason for your request) to the HIPAA Privacy Officer. Your request may be denied if: (1) it is not in writing; (2) it does not include a valid reason to support the request; (3) it requests an amendment to PHI that is not maintained by CLIC, was not created by CLIC (unless the person or entity that created the PHI is no longer available to make the amendment, or is not PHI that you are permitted to inspect and copy; or (4) it requests an amendment to PHI that is accurate and complete. If your request is denied, you can file a statement of disagreement in writing with the HIPAA Privacy Officer, and then any future disclosures of the disputed PHI will include your statement.

**Right to an Accounting of Disclosures.** You have the right to request an "accounting" of certain disclosures of your PHI. However, an accounting will not include: (1) disclosures for purposes of treatment, payment, or health care operations; (2) disclosures made to you; (3) disclosures that you authorized; (4) disclosures made to friends or family in your presence or because of an emergency; (5) disclosures for national security purposes; and (6) disclosures incidental to otherwise permissible disclosures. To request an accounting of disclosures, you must submit your request in writing to the HIPAA Privacy Officer. Your request must provide for a time period for the disclosures of not longer than 6 years and may not request disclosures made before April 14, 2003. Your request must indicate the form in which you would like to receive the disclosures (e.g., paper or electronic). The first list you request within a 12-month period will be provided free of charge. For additional lists, you may be charged for the costs of providing the disclosures to you. You will be notified of the cost involved and may choose to withdraw or modify your request at that time before any costs are incurred.

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**Requesting Restrictions.** You have the right to request a restriction on uses and disclosures of your PHI that CLIC normally would use or disclose for treatment, payment, or health care operations, or would disclose to someone involved in your care or the payment for your care, such as a family member or friend. CLIC is generally not required to agree to your request. However, if your request is denied, CLIC will honor the restriction until you revoke your request or you are notified of the denial. You must send a written request for restrictions to the HIPAA Privacy Officer. Your request must contain: (1) the PHI you want to limit; (2) whether you want to limit CLIC use, disclosure, or both; and (3) to whom you want the limits to apply (e.g., disclosures should not be made to your spouse).

**Requesting Confidential Communications.** You have the right to request that CLIC communicate with you about medical matters in a certain way or at a certain location. For example, you can ask that CLIC only contact you at work or by mail. CLIC will accommodate reasonable requests if you provide clear information that the disclosure of all or part of your PHI could endanger you. You must send a written request for confidential communications to the HIPAA Privacy Officer. Your request must specify how or where you wish to be contacted. You will not be asked the reason for your request.

**Breach Notification.** You have the right to be notified in the event that we (or a Business Associate) discover a breach of your "unsecured" PHI.

**Paper Copy of This Notice.** You can ask CLIC for a paper copy of this Notice any time. To obtain a copy of this Notice, contact the HIPAA Privacy Officer.

**Complaints.** If you believe your privacy rights have been violated, you can file a complaint with CLIC or the Secretary of the Department of Health and Human Services. To file a complaint with CLIC, contact the HIPAA Privacy Officer at The Cincinnati Insurance Companies, Attn: Regulatory & Compliance – Privacy, P.O. Box 145496, Cincinnati, Ohio 45250-5496, or by calling or emailing 888-744-2170 (toll free), 513-603-5992 or [privacy@cinfin.com](mailto:privacy@cinfin.com). You will not be penalized for filing a complaint.