

## NOTICE OF PRIVACY PRACTICES FOR NON-PUBLIC PERSONAL INFORMATION (GRAMM-LEACH-BLILEY AND STATE LAWS) PROTECTING YOUR PRIVACY

Nippon Life Insurance Company of America (Nippon Life Benefits) is committed to protecting the information you share with us and is required by law to maintain the privacy of your personally identifiable information. The types of personal information that we collect and share depends upon the product or service you have with us. This information may include medical and/or financial information e.g. your social security number, your date of birth, and health data. This privacy statement will explain the type of information we collect, how we use that information and how we protect that information for all of our members.

### How We Collect Information

We collect data about you as we do business with you. Our claims adjudication processes require that we obtain information. Some of the sources of this data are as follows.

- Information we obtain when you apply for enrolled for products or services: you may provide facts such as your name, address, social security number, salary, and, when applicable, medical history.
- Information we obtain from others: This may include claim reports, medical records and other information provided by your employer.
- Information we obtain through our transactions and experience with you: This includes information through claims submitted to our company from healthcare providers.
- Information we obtain through the internet: This includes date from online forms you complete. It also includes data we collect when you visit our website.

### HOW WE SHARE INFORMATION

We may use your information for certain purposes including account administration operations.

### CLAIM PAYMENT:

The most common example of how we use or disclose your information is to pay claims for covered services or to provide eligibility information to your providers when you receive treatment.

### HEALTHCARE OPERATIONS

Nippon Life Benefits may use or disclose your information for activities like:

- Underwriting, premium rating or other activities relating to the creation or renewal of insurance contracts (when allowable by law).
- Quality assessment and improvement activities such as peer review and credentialing of providers
- Care and Disease management activities
- Data and information systems management

### BUSINESS ASSOCIATES

In the course of doing business we may share nonpublic personally identifiable financial information with third parties that we hire to assist in the administration of your benefits. These third parties are called 'Business Associates' and they have both an independent obligation to protect your privacy as well as being required to agree in writing in a Business Associate Agreement with us to protect and maintain the confidentiality and security of your information.

### WITH OTHERS

Nonpublic personally identifiable information may be shared with others for the following reasons. This could include personal information about you or beneficiaries:

- In response to subpoena
- To prevent fraud, to comply with inquiries from government agencies or other regulators,
- With other companies with your consent or at your request
- As permitted by law

### BREACH NOTIFICATION

Pursuant to changes to HIPAA required by the Health Information Technology for Economic and Clinical Health Act of 2009 and its implementing regulations (collectively, "HITECH Act") under the American Recovery and Reinvestment Act of 2009 ("ARRA"), this Notice also reflects federal breach notification requirements imposed on the Plans in the event that your "unsecured" protected health information (as defined under the HITECH Act) is acquired by an unauthorized party.

We understand that medical information about you and your health is personal and we are committed to protecting your medical information. Furthermore, we will notify you following the discovery of any "breach" of your unsecured protected health information as defined in the HITECH Act (the "Notice of Breach"). Your Notice of Breach will be in writing and provided via first-class mail, or alternatively, by email if you have previously agreed to receive such notices electronically.

Your Notice of Breach shall be provided without unreasonable delay and in no case later than 60 days following the discovery of a breach. Additionally, for any substitute Notice of Breach provided via web posting or major print or broadcast media, the Notice of Breach shall include a toll-free number for you to contact us to determine if your protected health information was involved in the breach.

### ACCESS TO RECORDED PERSONAL INFORMATION

Upon your written request, we will provide you access to your recorded personal information which can be reasonably locatable and retrievable within 30 days of the request.

### WE PROTECT THE INFORMATION WE COLLECT ABOUT YOU

We follow strict standards to safeguard personal information.

These standards include limiting access to data and regularly testing our security technology.

### ACCURACY OF INFORMATION

We strive for accurate records. Please tell us if you receive any incorrect materials from us. We will make the appropriate changes.

You may write to us if you have questions about our Privacy Notice. Contact our Privacy Officer at:

Nippon Life Benefits Compliance Department  
655 Third Avenue, 16th floor  
New York, NY 10017-9113