

## **AFLAC PRIVACY PRACTICES**

Protecting the privacy and confidentiality of information about our customers is very important to American Family Life Assurance Company of Columbus and American Family Life Assurance Company of New York and Continental American Insurance Company (collectively, "Aflac"). Accordingly, we strive to comply with each of the following practices in everything we do:

- \* **We do not sell, rent, lease or otherwise disclose personal information of our customers for purposes unrelated to our products and services.** The personal information of our customers is of paramount importance to us. Therefore, we provide this information only to our employees, agents and third parties as required to allow them to help us develop and provide our insurance and employee benefit products and services.
- \* **We work to ensure information integrity and security.** We use technology tools and design our business practices to help ensure that the personal information of our customers is properly gathered, stored and processed. We also work to maintain the security of, and internal and external access to, the personal information of our customers through the use of technology and our business practices.
- \* **We expect our agents and employees to respect the personal information of our customers.** Aflac has business policies and practices in place to help ensure that employees and agents carry out these practices and otherwise protect personal information about our customers. Both employees and agents are subject to censure, dismissal, or termination for violation of these policies.

These Privacy Practices apply to our U.S. customers. Because of legal and cultural differences, our practices may vary outside the United States.

## **NOTICE OF PRIVACY AND INFORMATION PRACTICES**

Aflac and our agents provide this notice to let you know about the current privacy practices of Aflac and our agents. This notice applies to Montana customers and applicants. **You do not need to do anything in response to this notice. This notice is merely to inform you about how we safeguard your information.**

### **Collection of Information**

As part of Aflac's normal underwriting and operating procedures, Aflac (and our agents acting on our behalf) need to obtain information to determine an individual's eligibility for our products and services, and to perform our insurance functions. Aflac and our agents may collect information (which includes both financial information and health information) about Aflac's customers and applicants, including:

- \* Information from our customers (including names, addresses, financial and health information).
- \* Information about the customers' and applicants' transactions with Aflac or our agents (including claims and payment information).
- \* Information from consumer reporting agencies (including creditworthiness and credit history); motor vehicle records agencies (including accident reports and violations); investigators (including information regarding general character and participation in hazardous activities); insurance support organizations such as the Medical Information Bureau, Inc. (including claims, and health and insurance application histories; also, please note that the information from a report prepared by an insurance support organization may be retained by that organization and disclosed to other persons); and the customers' and applicants' health care providers (including health history), employers (including salary and benefits information), and family members.

### **Disclosure of Information**

Aflac may, under certain circumstances, disclose the information we collect, as described above, as well as information about your transactions with us (such as your policy coverage, premiums and payment history) to our agents, affiliates, other insurers, insurance support organizations, and other third parties who perform services for us or functions on our behalf including, in some instances, marketing Aflac products. We may also under certain circumstances disclose such information:

- \* to health care providers;
- \* to law enforcement agencies, other governmental agencies or authorities, or insurance regulatory authorities or agencies;
- \* to other parties as necessary to respond to administrative or judicial orders, search warrants, or subpoenas;
- \* to actuarial or health or other researchers;
- \* to group policyholders;
- \* to a party to a proposed sale, transfer, merger, or consolidation of all or a part of Aflac's business;
- \* to persons pursuant to the Montana Rules of Civil Procedure;
- \* to you or as authorized by you; and
- \* as otherwise required or permitted by law.

Neither Aflac nor our agents will use or share with other parties any health information about Aflac customers for any purpose other than the performance of insurance functions by Aflac or on our behalf, or to which the customer consents.

AFLAC and our agents will not disclose any information about an individual, other than as set forth above, even after he or she ceases to be an Aflac customer.

### **Confidentiality and Security**

Aflac and our agents will safeguard, according to strict standards of security and confidentiality, any information we collect, receive or maintain about Aflac's customers. Aflac maintains administrative, technical, and physical safeguards to ensure the security and confidentiality of our customer information and records, to protect against anticipated threats or hazards to such records, and to protect against unauthorized access to or use of such information or records.

Internally, Aflac limits access to our customers' information to only those employees who need access to the information to perform their job functions. Employees who misuse information are subject to disciplinary actions. Externally, we do not disclose customer information to any third parties unless we have previously informed the customer of the disclosure, have been authorized to do so by the customer, or are required or permitted to make the disclosure by law or our regulators.

### **Access to Information**

You have the right to access recorded information about you (except information relating to a claim or to a civil or criminal proceeding involving you) that is in our files and that we can locate within reason. To ensure the security of information in our files, we will require positive identification before we allow access to that information. To obtain a copy of our information concerning you, send a signed, written request to: Aflac Worldwide Headquarters, ATTN: Client Services, 1932 Wynnton Road, Columbus, Georgia 31999. Give your full name, address, telephone number, and policy number, if a policy has been issued, or if the policy has not been issued, give the application date.

Within 30 business days after we receive your request, we will notify you about the information that we can locate and retrieve in our files. We will also tell you to whom we have disclosed this information within the last two years (if recorded) if the information disclosed was not medical record information, and within the last three years if the information disclosed was medical record information. For disclosures of medical record information, we will provide you with the name, address, and institutional affiliation of each person receiving or examining the medical information during the preceding three years; the date of the receipt or examination; and, to the extent practicable, a description of the information disclosed. If you wish, we can show you the information at our headquarters, or we will mail copies to you. However, we reserve the right to disclose medical information only through an approved medical professional of your choice. You may have to pay a reasonable charge to cover the cost of providing the requested information.

#### **Correction of Information**

You have the right to request that we correct, amend or delete any of our information about you. Within 30 business days from our receipt of your request, we will either (1) comply with your request and provide the updated information to you, to anyone you specify who has received the information in the past two years, to any insurance support organization to which we have systematically provided personal medical information over the last seven years, and to any insurance support organization that furnished the original information to us or (2) refuse to make the requested changes, notify you of the reasons for the refusal, and inform you that you have the right to file a statement setting forth the information that you feel to be correct and the reasons you disagree with our refusal to make the requested changes. We will keep your statement with your personal medical information and provide it to other parties as if it were corrected information.

#### **NOTICE OF PRIVACY PRACTICES - PROTECTED HEALTH INFORMATION**

If you would like a copy of Aflac's Notice of Privacy Practices - Protected Health Information issued pursuant to the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA), as amended in 2009, copies are available by sending a written request to: Aflac Worldwide Headquarters, ATTN: Privacy Office, 1932 Wynnton Road, Columbus, Georgia 31999.