

MUTUAL OF OMAHA
**PRIVACY NOTICE—MEDICAL INFORMATION
ATTACHMENT FOR RESIDENTS OF ILLINOIS**

Domestic Abuse: Under Illinois law, we can not ask an applicant or an insured whether he or she has been the subject of abuse or whether the individual has sought medical or psychological treatment for abuse or protection or shelter from abuse.

Policy Numbers: We may not disclose policy numbers to outside third parties for use in telemarketing, direct mail or marketing through electronic mail.

Authorizations: If we request an authorization that permits disclosure to another insurance institution, insurance agent or insurance support organization, it shall remain valid for not longer than thirty (30) months, or if we obtain the authorization for claim purposes, for the term of the related insurance coverage.

If we request an authorization that permits disclosure to a person other than an insurance institution, insurance agent or insurance support organization, it must be obtained one (1) year or less prior to the date of disclosure.

Access/Accounting: You have a right of access to recorded personal information we have about you. We will respond to your request for access or an accounting within 30 business days from the date your request is received. We will inform you of the nature and substance of such recorded personal information.

You have a right to receive an accounting of disclosures of your personal information that we have made within 2 years prior to the request for the accounting, whether the disclosure was made before or after April 14, 2003. Under your state's law, you are entitled to an accounting of disclosures to carry out our payment or health care operations.

Amendments: We will respond to your written request to correct, amend, or delete any recorded personal information about you within our possession within 30 business days from the date your request is received.