

PRIVACY NOTICE

HOW HEALTH AND FINANCIAL INFORMATION ABOUT YOU MAY BE USED AND SHARED YOUR RIGHT TO ACCESS THIS INFORMATION—PLEASE REVIEW CAREFULLY

Our Privacy Commitment

This notice applies to you as a prospective, current or former customer. It describes what we do with your **Personally Identifiable Information** (“PII”). It also describes the choices you have about PII in our care.

PII is information that clearly identifies you. Examples of PII are your name, address, Social Security number, information about your health and finances, and other nonpublic information.

We will not ask for your PII unless it is reasonably necessary to issue or service your insurance with us.

This notice covers the insurance companies: (1) owned or controlled by CNO Financial Group, Inc. (“Affiliates” or “Affiliated Companies”), and (2) administered by CNO Services, LLC, which are listed below.* We may change our privacy practices at any time. For purposes of federal health privacy law, we are an affiliated covered entity. This means that our health insurance plans comply with federal health privacy laws as a single entity.

Protecting Your Information

Your trust is important to us. We take your privacy seriously. We limit access to our buildings and our information systems to authorized persons. We have policies and procedures designed to keep PII safe and secure. We train our personnel to make privacy a priority. We use privacy and security safeguards that obey state and federal regulations. If state law is stricter than federal law, then we will follow the stricter law.

Types of PII We Collect and Why We Collect It

Mostly, we collect your PII directly from you. You provide PII when you apply for insurance, make a claim for benefits or ask us to perform a transaction on your policy. We need your name and contact information, date of birth and may need your Social Security number. Depending on the coverage you apply for, we may ask you about your past or present health status and financial assets.

We also collect your PII from third parties. We may need medical records or consumer credit reports to underwrite your coverage or to process insurance claims. However, we are prohibited from using or disclosing your health information that is genetic information for underwriting purposes, excluding for the issuance of long term care policies. We may get reports from MIB, Inc., a nonprofit insurance support organization that exchanges information with its members. We may ask about the insurance you have with an Affiliated Company, such as the amount of your coverage or your payment history. We get your authorization to obtain this information, unless the law allows otherwise.

We use your PII for the purpose of issuing and servicing your insurance coverage. The issuing company may also use your PII to offer you other products and services. **However, we do not use your health information for marketing purposes unless the law allows it.**

Sharing PII Fairly and Legally

We may share your PII with nonaffiliated companies that perform services for us in order to help administer your policy, or with whom we have joint marketing agreements. These companies are also required to maintain strict privacy and security standards. You cannot restrict this type of sharing.

We may share your PII with Affiliated Companies or nonaffiliated companies as allowed by law such as to protect the security of our records, to meet legal or regulatory requests, or to follow state, federal or local laws. We may share a limited amount of PII provided by you with MIB, Inc. You cannot restrict this type of sharing.

Your Opt-Out Rights

If you do not want us to share your PII for marketing purposes, except as permitted by law, with Affiliated Companies or nonaffiliated companies you may call the toll-free number listed below. If you previously opted out of Affiliate sharing, your election is effective for five years. If you previously opted out of nonaffiliated company sharing, your election is effective until you revoke it.

California, Montana, New Mexico, North Dakota and Vermont Residents

We will not share your PII with nonaffiliated companies for marketing purposes. You do not need to take any action to opt out of this kind of sharing. However, we still may share your PII with nonaffiliated companies for purposes that are allowed by law.

*Insurance Affiliated Companies include: Bankers Life and Casualty Company, Bankers Consec Life Insurance Company, a New York licensed and domiciled insurance company, Colonial Penn Life Insurance Company, Consec Life Insurance Company of Texas and Washington National Insurance Company.

As of July 1, 2014, CNO Services, LLC serves as administrator for Consec Life Insurance Company, a subsidiary of Wilton Reassurance Company.

Vermont Residents

For marketing purposes, we will only disclose your name, contact information and information about your transactions with us to nonaffiliated third parties with whom we have joint marketing agreements.

To Opt Out - Call us at 800-783-7720

Our automated opt out line will lead you through your choices. Please have your policy number ready.

Or Write to us at P.O. Box 2031, Carmel, IN 46082-2031

You may opt out of Affiliate sharing or nonaffiliated company sharing by writing to us. Please, provide your full name, current mailing address and policy number(s).

Your Right to Access Your PII

You have the right to access the PII we maintain about you. If you wish to do so, write to us at the address listed at the bottom of this notice. Please provide your full name, address, and policy number(s). We will respond within the time frame required by law, generally about 30 days after receipt. We will provide this information free of charge once a year; otherwise, we may make a reasonable charge for copying and postage.

Your Right to Correct Your PII

You have the right to correct your PII. Even if we have contradictory information, we will keep your request with your file for as long as you are our customer. If we agree to your request, we will make reasonable efforts to communicate the correction or amendment to other parties who may need this information. We do not have to accommodate your request if we did not create the PII, if we do not maintain the information, or if your PII is already accurate and complete. To give your request careful consideration, provide us with a written request signed by you or your legal representative. If we deny your request, we will explain our reasons in writing and let you know how to file a complaint with us and regulatory agencies.

Your Right to Request an Accounting of Disclosures of Your PII

You may request a record of disclosures of your PII made within the last six years. We are not required to provide an accounting of disclosures made for payment activities, health care operations or based on a valid written authorization. Your request must state a specific period of time that may not be longer than six years and may not include dates before April 14, 2004. Provide us with a written request signed by you or your legal representative. We will provide this information free of charge once a year; otherwise, we may make a reasonable charge for each additional accounting request.

Your Right Regarding Adverse Underwriting Decisions

If your insurance coverage is denied, terminated, offered at a rate higher than standard rates, or if your insurance representative did not apply for the insurance coverage that you requested, you will receive a written explanation of the specific reason for the decision as well as a summary of your right to access and correct your PII, or you will be advised that you may receive this information by writing to us at the address listed at the bottom of this notice. You must submit your request within 90 business days of the underwriting decision. We will provide a response within 21 business days.

Your Right to File a Complaint

If you have a privacy related complaint, please let us know so we can address your concern. Write to us at P.O. Box 2031, Carmel, IN 46082-2031. You may also file a complaint with your state department of insurance. You may also file a complaint with the Secretary of the U.S. Department of Health and Human Services in Washington, D.C. within 180 days of the conduct. Neither filing a complaint with a regulatory agency or us will adversely affect your status as our customer or the services you receive from us.

Additional Privacy Rights for Health Insurance

Your Right to Request Alternative Means of Communication

You have the right to request that we communicate with you by alternative means, such as directing your mail to a post office box. We will try to accommodate your request if it is reasonably possible for us to do so. We are required to accommodate reasonable requests if you inform us that disclosure of all or part of your PII could place you in danger. Provide us with a written request signed by you or your legal representative.

Your Right to Request a Restriction on Communications

You may request that we restrict our disclosures of your PII (including health information) to or from certain persons. We are not required to comply with your request. If we cannot comply with your request, we will explain that to you in writing. Provide us with a written request signed by you or your legal representative. We reserve the right to terminate your request if we believe it is appropriate. If this happens, we will notify you in writing. You can terminate a restriction request by letting us know in writing or by phone.

Your Right to Breach Notification

You have a right to be notified following a breach of your unsecured PII.

Additional Privacy Standards for Health Insurance

We are subject to additional privacy standards for health insurance. Most uses and disclosures of psychotherapy notes, uses and disclosures of health information for marketing purposes and disclosures that constitute a sale of health information require your authorization. Except as listed below, we will not disclose your PII without a valid written authorization, which you may revoke at any time. Remember, PII includes specific health information about you, including information regarding payment for health care.

- **Payment and Health Care Operations** - The law permits us to disclose your PII to an organization subject to federal health privacy laws when conducting payment activities or health care operations. For instance, we may share your PII with your health care providers in connection with settling your claims. Also, we may use your PII as required to conduct internal quality audits or in connection with reinsurance, mergers or acquisitions.
- **Caregivers or Emergencies** - The law permits us to disclose a minimum amount of your PII to persons involved in your care, or in an emergency.
- **Public Interest** - The law permits us to disclose your PII if it is required by law, for fraud prevention or law enforcement. We may disclose your PII to a state or federal agency, including the U.S. Department of Health and Human Services for compliance purposes. We may disclose your PII to comply with a court order or if we believe you are a victim of abuse, neglect or domestic violence.

Fair Credit Reporting Act Notice

As part of our underwriting procedures, we may get an investigative consumer report. The report will contain information about your character, general reputation, personal characteristics and mode of living. The information is obtained through interviews with your friends, neighbors and associates. You have a right to ask for details on the nature and scope of this report. You have the right to contact the consumer reporting agency to review a copy of the report. If you write to us we will let you know if we have in fact obtained a report; and, if so, the name and the address of the agency making the report.

MIB Notice

Information regarding your insurability is confidential. We (or our reinsurers) may make a brief report to MIB, Inc. MIB is a non-profit membership organization of insurance companies, which operates an information exchange on behalf of its members. If you apply to another MIB member company for life or health insurance, or submit a claim for benefits, MIB, upon request, will supply that company with information it may have in its file. We (or our reinsurers) may release information in our files to other insurance companies to whom you might apply for life or health insurance, or submit a claim for benefits.

If you request it, MIB will arrange disclosure of any information it may have in your file. If you question the accuracy of any information in the Bureau's files, you may contact MIB and seek correction in accordance with the procedures of the Fair Credit Reporting Act. The address of MIB's information office is 50 Braintree Hill Park, Suite 400, Braintree, Massachusetts 02184-8734. MIB's telephone number is (866) 692-6901. Information for consumers about MIB is available on its website at www.mib.com.

Contact Us

For more information about this notice, call us at 800-783-7720 or write to us at P.O. Box 2031, Carmel, IN 46082-2031.

This notice is effective as of July 1, 2014.



Important Privacy Choices for Consumers

If you do not want us to share your PII for marketing purposes, you can opt out.

- Call us toll-free at 800-783-7720. Please have your policy number ready.
- Fax this form to 800-757-6324.
- Mail this form to P.O. Box 2031, Carmel, IN 46082-2031. (CA residents may be provided a pre-addressed envelope.)

My Opt Out Choices

- Do not share my PII with nonaffiliated companies for marketing purposes. This opt out choice is effective until I revoke it.
- Do not share my PII with Affiliated Companies* for marketing purposes. This opt out choice is effective for 5 years.

My Information

Printed Name _____ Policy Number(s) _____ Date _____

Address _____ City _____ State _____ Zip Code _____

*Insurance Affiliated Companies include: Bankers Life and Casualty Company, Bankers Conesco Life Insurance Company, a New York licensed and domiciled insurance company, Colonial Penn Life Insurance Company, Conesco Life Insurance Company of Texas and Washington National Insurance Company.

As of July 1, 2014, CNO Services, LLC serves as administrator for Conesco Life Insurance Company, a subsidiary of Wilton Reassurance Company.

