Gramm- Leach- Bliley (GLB) Privacy Notice

Union Security Insurance Company*, Union Security Life Insurance Company of New York* and the affiliated prepaid dental companies* seek to provide cost effective benefit solutions for our policyholders, contractholders and insureds. These solutions help to create a sense of security for our customers, not only from the protection our products afford but, equally important, from the care we take in protecting our customers' personal information even if the formal customer-client relationship ends. We use the brand name “Assurant Employee Benefits” to associate our products and services and to connect us with the brand of our parent company, Assurant, Inc.

Your trust in us in protecting this information is of utmost importance to us. Please read this Notice of Insurance Information Practices, and, if applicable, share it with those individuals receiving coverage under your policy or plan. The term “customer” as it is used in this notice refers to individual claimants, insureds, members, beneficiaries or applicants. This notice details the types of information we collect, who we might share that information with, the security measures we have in place to respect the privacy and confidentiality of the information we collect and certain rights that individuals have with respect to personal information we maintain about them.

I. Personal information we collect:

- Any information that is provided to us through the completion of the following forms:
  - Claim forms
  - Enrollment forms
  - Beneficiary designation/Assignment forms
  - Any other form necessary to effectuate coverage, administer coverage or administer and pay a claim.
- Any information from others that is necessary for us to properly process a claim, underwrite the coverage, or to otherwise complete a transaction requested by our customer, policyholder or contractholder. This may include information from third parties such as insurance-support organizations and credit reporting agencies. Information we obtain from a report prepared by an insurance-support organization may be retained by the insurance-support organization and disclosed to other persons.
- Any information that our customer authorizes us to collect from others.

The information collected can include name, Social Security number, address, date of birth, phone number, marital status, gender, dependent information, bank account information and employment information. While this list is not exhaustive it should give you an idea of the types of information we are referring to in this notice.

II. Personal information we may disclose and to whom:

- We do not disclose any of the above-described personal information about our current and former customers to any third parties except as permitted by law, such as for completing a requested transaction and/or if authorized by our customer.
- For various business reasons, we may need to provide our customer's personal information to our affiliates or others, including a policyholder's or contractholder's broker, third-party administrator, reinsurer, employer or plan sponsor. These disclosures may be made to others for the purpose of performing administrative services on our behalf, helping us administer or review a claim, where we feel it necessary to protect our interests or as requested by a governmental agency.
- We may disclose the above-described personal information to other non-affiliated third parties in order for them to help us provide superior products and services. Should we determine that these disclosures are necessary, we will seek assurances that these third parties will not further share the information beyond its stated purpose.

III. Health information:

- We will not share any of our customers' health information unless allowed by applicable law and/or the customer has provided us the appropriate authorization. Upon written request, you have the right to a record of certain disclosures of your health information that we have made within the previous two years.
IV. Confidentiality and integrity:

- We use physical, electronic, and procedural controls, including physically secured areas and computer access controls.
- We assess the integrity of our systems through auditing, monitoring and data management processes.
- We have policies to direct and procedures to limit access of a customer’s information.
- Our employees are continually trained on how to keep our customers' information safe.

V. Individual rights:

You have the right to access recorded personal information that we have about you. If you want copies of your recorded personal information, we may charge you a fee. You also have the right to request correction, amendment or deletion of recorded personal information in our possession. If we approve your request, we will make reasonable efforts to furnish the correction, amendment, or deletion to inform others, including people you name, about the correction to your personal information. If we deny your request, we will provide you a written explanation of our decision. We also will explain your right to file a statement disputing our decision and to have that statement included with any future disclosures of your personal information. To exercise these rights, you must send a written request to Assurant Employee Benefits, Privacy Officer, P.O. Box 419052, Kansas City, MO 64141-6052 or call 800.733.7879. For New York business, please write Union Security Life Insurance Company of New York, Attention: Privacy Officer, Administered by: Assurant Employee Benefits, P.O. Box 419052, Kansas City, MO 64141-6052 or call 888.901.6377.

VI. Questions?

We hope this notice has been helpful in explaining our insurance information practices. Please note, we reserve the right to change this notice. If we do, we will notify you of any changes made. If there are any questions concerning this notice, please write Union Security Insurance Company or an affiliated prepaid dental company, Attention Privacy Officer, at P.O. Box 419052, Kansas City, MO 64141-6052 or call 800.733.7879. For New York business, please write Union Security Life Insurance Company of New York, Attention: Privacy Officer, Administered by: Assurant Employee Benefits, P.O. Box 419052, Kansas City, MO 64141-6052 or call 888.901.6377.

* In this notice, "we," "us," and "our" refer to Union Security Insurance Company; Union Security Life Insurance Company of New York, licensed only in the State of New York; and the following affiliated prepaid dental companies: DentiCare of Alabama, Inc., Union Security DentalCare of Georgia, Inc., UDC Dental California, Inc., UDC Ohio, Inc., United Dental Care of Arizona, Inc., United Dental Care of Colorado, Inc., United Dental Care of Michigan, Inc., United Dental Care of Missouri, Inc.; United Dental Care of New Mexico, Inc., United Dental Care of Texas, Inc., United Dental Care of Utah, Inc., Union Security DentalCare of New Jersey, Inc. With regard to Union Security Life Insurance Company of New York, this notice only applies to its group disability, life, and dental products and its prepaid dental product.