

Important Notice of Privacy of Information Practices

This Privacy Notice is provided on behalf of the group and individual dental, vision and hearing care businesses of Ameritas Life Insurance Corp. and Ameritas Life Insurance Corp. of New York.

our commitment to your privacy

We value your trust. That is why we are committed to protecting your personal information. This notice explains the way we use and protect your personal information. You do not need to take any action, but you do have certain rights that are described in this notice.

Ameritas

In addition to Ameritas Life Insurance Corp. and Ameritas Life Insurance Corp. of New York, Ameritas consists of the following affiliated companies, all of which offer their own Notice of Privacy Practices:

- Ameritas Investment Corp.
- Calvert Investments, Inc.
- Ameritas Investment Partners, Inc.

Information we collect

We collect information about you for the purpose of conducting routine business functions, such as paying your dental and vision claims. Following are examples of the types of customer information we may collect about you:

- **Personal identification and contact information**, such as your:
 - Name and address,
 - Social Security number and
 - Date of birth.
- **Enrollment information**, such as your:
 - Employment status and
 - Date of hire.
- **Health information**, such as the claims information you or your dental or vision provider submit to us so we can process your claims and assess your benefits.

How we gather your personal information

Most of the information we collect about you comes directly from you. You give us personal information when you enroll in your employer's dental and/or vision plan. We also may receive information from:

- Your dental or vision provider,
- Governmental agencies and
- Independent reporting agencies.

How we use and share your personal information

We do not sell or share your information with outside marketers. However, we may share your information outside of Ameritas for the following reasons:

- **Service Providers.** We may share information about you with service providers. Service providers are unrelated companies who perform business transactions for us. We require service providers to keep your information confidential. We prohibit them from using your information for their own purposes or re-disclosing it to anyone. Disclosures to service providers are part of our business operations. You may not opt out of these disclosures.
- **Required by law.** Sometimes the law requires us to share customer information, such as in response to a valid summons, court order, search warrant or subpoena. We must comply with the law and therefore you may not opt out of these disclosures.
- **Agents and brokers.** We may share your information with your agent or broker so he or she may provide you with efficient and superior service. Our agents and brokers understand the importance of your privacy and they are required by law to maintain your privacy and safeguard your information. We require our agents and brokers to follow our policies in order to keep your personal information private and secure. You may not opt out of these disclosures.



Health or medical information

We will not release your medical or health information to anyone unless we are permitted or required by law to do so. When we are not permitted or required by law to disclose your health or medical information, we will not do so without your written authorization.

Examples:

- **Permitted by law:** The law permits us to exchange information with your health care provider in order to process your claims and facilitate payment.
- **Required by law:** The law requires us to disclose your information under a valid court order.

Your rights

You have the right to receive a copy of this notice at least once each year while you are our customer. This notice is also available on our website. You may request an additional copy by writing, e-mailing or calling the Privacy Office as indicated at the end of this notice.

You have the right to review the information we have about you. You must make this request in writing and include your full name, address and policy or account number. We may charge you a reasonable fee for the copies you request.

You have the right to request that we make corrections to the information we maintain about you if you believe our records are incorrect. All requests must be in writing.

We safeguard your personal information

We maintain physical and electronic safeguards for the protection of your personal information. We restrict access of your information to our employees and agents who need it to perform their jobs. Our employees and agents understand the importance of these safeguards. We have trained them in the proper handling of your personal information.

Former customers' personal information

The policies and practices described in this notice apply equally to current and former customers. When you are no longer a customer, we will maintain your information for the period of time required by law and then it is destroyed. As a former customer, however, you will not receive our annual Privacy Notice.

Our privacy policies

This Privacy Notice summarizes the Official Privacy Policy of Ameritas identified on the first page of this notice, which became effective on January 1, 2006. We are required by law to send you our Privacy Notice at least once each year. This notice complies with all applicable laws and regulations. If your state's privacy law requires more restrictive practices than those described in this notice, we will apply the more restrictive practices to your information. We may make changes to our privacy policies from time to time. However, if we make a change that impacts the accuracy of the sharing practices that are explained in this notice, we will provide you with a revised Privacy Notice within 30 days.

Special note to our group and individual dental, vision and hearing care plan sponsors and participants:

Our group and individual dental, vision and hearing care plans must also comply with the privacy requirements of the Health Insurance Portability and Accountability Act (HIPAA). Our Notice of Protected Health Information Practices more specifically describes our privacy policies with regard to your information. You may contact our Privacy Office to request an additional copy.

You may contact us at:

Ameritas Privacy Office
P.O. Box 81889
Lincoln, NE 68501-1889
1-888-284-7844
privacy@ameritas.com

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