

Enrollment Guide

Complete your 2014 Medicare Enrollment



IMPORTANT!

Extend Health is here to help you enroll in new coverage. Call us and complete your enrollment using the information printed inside.

Inside You'll Learn:

-  Who we are
-  How to prepare
-  How to contact us
-  What happens next

How to Contact Us

After you have read this guide and collected the information it requests, you're ready for your enrollment call.

Call us using the phone number below for assistance evaluating your options and enrolling in new coverage.

Please allow at least one hour per person to complete your call.



Contact Us by Phone

1-888-592-8348

(TTY: 711)

Monday through Friday,

8:00 a.m. to 9:00 p.m. Eastern time



Review Your Options Online

www.extendhealth.com/ornl

We are changing our name!
Extend Health will become Towers Watson
January 2014

Oak Ridge National Laboratory
EG-GAPONLY-DV-ND-2014

Introducing Extend Health

Trusted advisor for hundreds of thousands of Medicare-eligible participants.

Your former employer or benefits provider has chosen Extend Health to work with you as you enroll in new individual coverage, which will replace your current group plan. We are pleased to welcome you to your enrollment period for 2014 Medicare benefits.

Extend Health is not an insurance company. We are a resource that gives you access to a state-of-the-art Medicare marketplace that includes a wide variety of plans from the nation's leading health insurers. We understand that your health care decisions are important, and can be confusing. It's our job to make this process easier.

As the country's largest private Medicare marketplace, Extend Health offers the largest selection of individual Medicare plans from over 80 national and regional insurance carriers across the country. The individual insurance plan(s) you purchase in our Medicare exchange will replace the group plan provided by your former employer or benefits sponsor.

To help you decide which individual plan(s) are right for you, you'll have the assistance and expertise of a licensed benefit advisor. During your enrollment call your benefit advisor will help you compare, select and enroll in the plan(s) that fit your needs and budget.

We look forward to helping you make an informed and confident choice.

IMPORTANT!

Enrollment in a Medicare Advantage plan or a Part D plan will terminate your coverage under your former employer's or benefits provider's group prescription drug plan.

What to Expect from Us

The highest-quality coverage for the least expense

Extend Health is not an insurance company. We are a resource that gives you access to a Medicare marketplace that includes a wide variety of Medicare supplement plans from the nation's leading health insurers.

This marketplace, used by hundreds of thousands of people like you, offers you and your Medicare-eligible spouse, personalized assistance with finding and enrolling in the plans that fit your needs. Because individual Medicare plans share a larger risk pool than employer group plans, the plans offered in our marketplace can cost the same or less than your group plan. Best of all, we provide this service at no cost to you or your spouse. When you work with Extend Health you can expect:

Step-by-step guidance

Our benefit advisors and easy-to-use online tools will guide you, step-by-step, through the individual Medicare market, ensuring you confidently choose the plan that fits your needs.

Unbiased, objective support

Our licensed benefit advisors are trained to be your objective advocates, with no incentive to sell any carrier or type of plan over another. Their compensation is never tied to your selection.

Efficient, accurate enrollment

Once you have selected a plan, our enrollment specialists will complete your application, ensuring it is processed correctly. Once your application is submitted, you may track its status on our website or call us for an update.

Support after you enroll

When you purchase a Medicare plan through us, we continue to be your advocate for the lifetime of your enrollment. If your medications or needs change or you move, contact us to determine if your plan is still the right one for you. We are available to help you make changes if necessary.



What is Available to You

Understanding your options

During this specified enrollment period you have the opportunity to supplement your original Medicare coverage with additional medical coverage purchased in the Extend Health Medicare exchange. This supplemental medical coverage, known as Medigap insurance, will replace the medical portion of the group plan currently provided by your former employer or benefits provider. Your prescription drugs will continue to be covered under your group plan.

This supplemental coverage is available to everyone who is Medicare-eligible, regardless of income. If you have not already done so, visit www.medicare.gov to learn how to apply for original Medicare.

Guaranteed issue

In general, if you enroll during the specified enrollment period (a seven-month period comprised of the three months before and after the month of your 65th birthday), you are guaranteed coverage by one of the plans available in your area, regardless of your current medical conditions. Plans are available to everyone who is Medicare-eligible, regardless of income.

During this first enrollment period, Medigap insurance plans for which you are eligible are guaranteed issue – you cannot be turned down based on your medical history or pre-existing conditions. After your first enrollment period, changes to your Medigap coverage may be subject to underwriting – meaning you can be rejected based on your pre-existing medical conditions.

Note that if you choose not to enroll in a Medigap plan when first eligible, you will lose guaranteed issue status for future Medigap applications. Also, if you have opted out of your current coverage and already have a Medigap plan, you are not guaranteed coverage for Medigap insurance during this first enrollment period.

Should you wish to change your Medigap coverage in the future, we will work with you and your preferred plan to meet underwriting conditions, but you are not guaranteed acceptance. Learn more about Medigap insurance on the following pages.

Finding information about specific plans

While regional variations prevent us from printing the prices of specific plans in this guide, our website offers extensive information on all the plans we offer in your area. You will find our website address printed on the inside front cover of this guide. To learn how to search for plans in your area, read the “Before Your Enrollment Call” section of this guide.

Medigap Insurance In Detail

Understanding the value of Medigap plans

A Medigap plan fills the “gaps” in original Medicare Part A and Part B coverage, meaning it helps pay the difference between the total costs and the amount original Medicare pays. These plans provide additional coverage for your doctor visits and hospital stays as well as other expenses partially covered by original Medicare. Medigap plans do not provide prescription drug coverage.

One of the benefits of a Medigap plan is predictability. You know your plan will be accepted by any doctor or hospital that accepts original Medicare and, for most plans, you know your premiums are all you will pay for services covered by Medicare.

Other benefits of a Medigap plan include:

You have the flexibility to see any doctors that accept Medicare, including your current doctors.

Medigap is accepted by all doctors that accept Medicare. It is the most flexible type of plan regarding choice of physician.

It helps keep your out-of-pocket costs manageable if you have frequent doctor visits, or you see several different doctors regularly.

Because most Medigap plans do not require copayments or co-insurance, each visit to the doctor or hospital is covered by your monthly premium payments.

You travel frequently.

Medigap is widely accepted and can accommodate multiple residencies and frequent trips better than other plans.

Medigap plans are accepted by every Medicare-participating provider in the U.S., with some emergency benefits worldwide. If you travel frequently or live part of the year out-of-state, these plans may be right for you.

Wondering why you can't find plan prices in this guide?

Regional variations prevent us from printing the prices of specific plans in this guide. However, cost comparisons can be made on our website or when you speak with a benefit advisor. Learn more about how to see plan prices online in the “Before Your Enrollment Call” section of this guide.

Prepare for Your Enrollment Call

Prepare for your call in a few simple steps

To prepare for your enrollment call, we encourage you to visit the our website. You'll find the web address printed on the inside front cover of this guide. Once online, there's a lot you can do.

Using our website is optional. You can provide your information and complete your enrollment over the phone. While you don't have to go online if you don't wish, our online tools are easy to use, and using them can help reduce the amount of time you spend on the phone. If you have questions, simply call us and speak to a trained expert.

Create your account

If you have not yet created an online account, we encourage you to do so. Creating an account allows you to add family members, search for and save plans, and track the status of your applications.

To create an account, simply click the *My Account* link on our website. If you're a first-time visitor, some information is required. If you're a returning visitor, enter your username and password. Once your account is created, you're ready to shop for and compare plans. Simply click any *Shop & compare* link

Shop & Compare

The *Shop & Compare* section of our website allows you to search for plans available in your area and sort them by price, plan type, insurance company, and other factors. With just a few clicks, you can compare plans side-by-side and review the details of the plans that interest you.

Note that restrictions prevent us from listing prices for AARP Medigap plans on our website, but your benefit advisor can give you AARP Medigap plan pricing information during your enrollment call.

Finding plans and plan details

All plans available in our Medicare marketplace offer their summary of benefits for review online. If you'd like to review the summary of benefits of a plan that interests you, simply click on the plan's name in the search results, then click on the "View" link in the *Plan Brochure* row of the plan details.

Understanding Medicare

Clicking the *Help* tab allows you to access our *Understanding Medicare* section, which explains many components of the Federal Medicare program.

Consider your priorities

During your enrollment call your benefit advisor will ask questions in order to find the plans that fit your needs. Having the answers to these questions ready simplifies your call. Space is provided in the "Notes" section of this guide to write the answers to questions your benefit advisor will ask.

A Final Checklist

Before you make your call, take a moment to ensure you have collected all the information that you'll need to complete your enrollment. Consider the questions below and complete the final checklist on the opposite page. Space for your notes is provided later in this guide.

Questions to consider:

- Have you found a plan that interests you? Add it to your cart or write its name and reasons you prefer it in your Notes.

Do you have this information available?

- Social Security Number
- Medicare ID card, with effective dates for Medicare Parts A & B
- Your billing information. Some insurers may require first month's premium payment during the application process.

Does a family member, friend, or caregiver help you make your health care decisions?

- If so, have them available during your call. Your benefit advisor can connect them if they are calling from a different phone number.*

* Your benefit advisor will ask that you give recorded permission for your caregiver to assist. If you are unable to be on the call or unable to listen to required recorded disclaimers, your caregiver will need to have your legal Power of Attorney document authorizing them to act on your behalf, a process which requires contacting an attorney in advance of your call. Power of Attorney is not required if you are able to listen to and answer a few simple questions.



Call and Enroll

What to expect when you call to enroll

Now that you have reviewed this guide and researched your options online, you're ready to call and complete your enrollment. Don't worry if you're still unsure which plan is right for you. It's our job to help you select the appropriate coverage.

When should I call?

To avoid a disruption in coverage, contact us and complete your enrollment before the coverage end date printed on the cover of this guide.

How long will it take?

Because the work we do is personalized for the needs of each individual making an enrollment, the duration of calls vary. Allow at least one hour per person to complete your enrollment. Most people are able to complete their enrollment in one call.

What to expect during your call

When you call us, you will be connected with a benefit advisor licensed for your state. To accurately connect you, our automated system may ask a few questions. Be prepared to provide your zip code and the last four digits of your Social Security number.

You may be speaking with other representatives before and after you are connected with a benefit advisor. These representatives may collect and enter your personal information, help you complete applications and answer other questions. Whoever you speak to, know that all our representatives are eager to assist you in the friendliest, most efficient way possible.

Is there any paperwork?

During your call, each representative you speak to is completing the forms and application paperwork required to complete your enrollment. The industry-leading software they use is designed to complete and submit your application(s) electronically. There is no paperwork for you to fill out, and your application(s) will be submitted immediately.

Because we complete the application process on your behalf, you will have to confirm your personal information multiple times, and listen to recorded messages specific to the coverage you select. We understand that these confirmations and messages can be inconvenient, but we are required by Medicare and our insurance partners to verify your information during enrollment. Just as your medical provider asks for your name and information several times before a medical procedure, this confirmation process reduces the possibility of errors. The representatives and benefit advisors you speak with during your call are always glad to answer any questions you have about the process.

Make notes for future reference

Your enrollment call will cover details that may be hard to recall once you hang up, so it's a good idea to write down things you want to remember including the names of your benefit advisor and other individuals you speak with. Space for this information is provided in the "Notes" section of this guide.

A Timeline: After Your Call

We continue to be your advocate throughout the years, and for the lifetime of your enrollment.

Selection confirmation

After your enrollment call we will mail you a *Selection Confirmation* letter, confirming your application(s). This letter confirms that you have applied for coverage under the policies listed; it is not a confirmation that your policy has been issued, and does not qualify as proof of coverage. Proof of coverage will come later, directly from your new insurance provider.

You must review your *Selection Confirmation* letter immediately and contact us if any information is incorrect.

Communications from your new insurer

In addition to your *Selection Confirmation* letter, you may also receive mailings, phone calls or emails directly from your new insurer before you receive confirmation of your new coverage. It is very important that you respond to communications from your new insurer, as your response may be required before your new policy or policies can be issued.

Insurance cards

Once your application is accepted, your new insurance carrier will mail identification cards. These cards will arrive by mail between six and eight weeks after you have enrolled.

Your coverage begins on your policy's effective date, not the date your insurance card(s) arrive. Any medical expenses covered by your policy will be covered by your new insurance. Speak with your medical provider about what is accepted as proof of insurance for expenses you incur before your insurance cards arrive.

Online account and website

After your enrollment call, the *My Account* section of our website allows you to track your application's status. Also on our website, you'll find many tools to evaluate your options, should your health coverage needs change.

Stay informed and engaged

Twice a year we send the *Experience Choice* newsletter filled with helpful information on Medicare-related topics. To ensure you receive our newsletter, keep your email and mailing addresses up to date.

We also invite you to Extend Connections (www.extendconnections.com), an online community where you can engage with other retirees, find timely Medicare news, and get answers to your questions.

Medicare's Open Enrollment Period

Each year, between October 15th and December 7th, you have the opportunity to make changes to your Medicare coverage for the following year. This period is called Medicare's Open Enrollment Period.

One of the newsletters you receive will arrive before the end of the Open Enrollment, and will contain useful information that helps you evaluate whether a change of coverage might be right for you.

If you are satisfied with your coverage at the time of Open Enrollment, no action needs to be taken, and you do not need to contact us. Note that should you wish to enroll in Medigap coverage during Open Enrollment, we will work with you and your preferred plan to meet underwriting conditions, but you are not guaranteed acceptance.

Frequently Asked Questions

Will my new plan be as good as my current plan?

We work with the top national and regional insurance companies to ensure that you will have quality individual plan options. There will likely be individual plans available that are similar to your current group plan, but there may be plans better suited to your needs. Our multiple options give you the ability to find a plan that closely matches your specific needs.

Are my options and rates affected by my current or past health?

No. For people changing from employer-based group health coverage to individual coverage, there are no health-based restrictions, nor are any “penalties” reflected in your premiums.

What can I expect to pay for my new plan?

What you will pay depends on the type of plan that you select. Our research shows that many people will continue to pay about the same as they did under group coverage with their former employer, but some may pay more and others will pay less. Your benefit advisor will work with you to understand the costs—and the benefits—of the different coverage options available to you.

How much should I expect my rates to increase next year?

Nearly every plan will increase its premiums each year, primarily due to the rising cost of medical care. In the individual Medicare market, where you will purchase your new coverage, rate increases have averaged 5-6 percent each year over the last few years. This is a slower rate of increase than in other, non-Medicare insurance markets. Be aware that this is an average – rate increases within your area may be lower or higher depending on the cost of medical care and other factors.

Can I continue to use the same insurance company?

In many cases, yes you can. However, while we recognize the

importance of staying with a trusted insurance company, understand that employer-sponsored health plans and individual health plans may work differently, even when provided by the same insurance company. Your current insurance company may not offer an individual Medicare plan tailored to your specific needs. We will compare your current insurance carrier with other carriers, allowing you to find the plan that fits your needs. That plan may be provided by your current carrier, or you may discover another insurer offers a plan that is a better fit for your individual needs.

Will I lose or “replace” my Medicare?

You will not lose Medicare, but it may work differently depending on the type of plan you choose.

Medigap (also known as Medicare Supplement) plans work in tandem with Medicare. Medicare continues to be the primary payer of medical expenses. A Medigap plan pays for expenses that Medicare partially covers. You must have Medicare Part A & Part B in order to enroll in a Medigap plan.

Do I need to keep paying my Medicare Part B premium?

Yes. To qualify for a Medigap plan, beneficiaries must be enrolled in and continue to pay for Medicare Part B.

Medigap plan rates are based on a schedule that is filed with your state’s Department of Insurance and may increase based on your age group. In general, even with an increase, your plan premium will still be very competitive with other comparable Medigap plans in your area for people of your age and health status.

Will I have to pay for my new health plan when I enroll?

When you enroll in your new plan, you will need to begin making premium payments to the insurance company to maintain your coverage. Some insurers may require the first month’s premium

payment during the application process. In this case, expect to make a payment within a few days of your enrollment. To expedite your enrollment call, have your payment information ready when you contact us. Most insurance companies give you several billing options for ongoing payments: direct billing, Electronic Funds Transfer from your checking account, or automatic deduction from your Social Security check.

Will Extend Health be available to assist me next year?

Yes. When you purchase a Medicare plan through Extend Health, we continue to be your advocate for the lifetime of your enrollment. If your medications or needs change, or you move, contact us to determine if your plan is still the right one for you. We are available help you make changes if necessary.

Do you offer plans that cover me in multiple states? Are there plans that cover me when I travel domestically or internationally?

Medigap plans are accepted by every Medicare-participating provider in the United States, with some emergency benefits worldwide.

If I don't like the plan I enrolled in, when can I change?

Every year an Open Enrollment Period allows you to investigate other medical and drug plans and enroll in a different plan should you choose to. However, after your initial enrollment, your medical status may limit the Medigap plan options available to you. We will contact you during the Open Enrollment Period, and we encourage you to contact us should you have any questions.

If I have other options for coverage (such as through my spouse or the military) and do not enroll with Extend Health this year, can I enroll with you next year or at some other point in the future?

Yes, but you should discuss your individual situation with a benefit advisor to ensure you are taking advantage of all the coverage options available to you.

If I like the benefit advisor I speak to, can I request that same person again?

If you have previously spoken to a specific benefit advisor and would like to speak to them again, you may request them. However, they may not be available due to scheduled appointments or high call volume. If they are unavailable, another member of our team can assist you.

If I need assistance can someone else speak with a benefit advisor on my behalf?

Yes, but this person can only complete your enrollment if they have your medical Power of Attorney. You may provide your Power of Attorney information to us online in advance of your call to expedite your enrollment.

Do you offer dental insurance?

Dental insurance plans offered by Delta Dental and Humana may be available. These plans include a wide range of services. The Delta Dental plan is available nationwide, while the Humana plan is currently available in all but the following states: HI, ME, MT, OR, and VT. Learn more about dental plan features on our website, or ask about them during your enrollment call.

Do you offer vision insurance?

Yes. The vision insurance option we offer provides immediate access to premium vision coverage—including annual eye exams, prescription eyewear, personalized care and more—from one of the most trusted names in eye care, VSP® Vision Care.

VSP Vision Care is the nation's largest eye care provider, providing access to a nationwide network of 22,000 community-based independent eye doctors. You'll receive affordable services, great savings, and great choices in eyewear. Learn more about the vision plan features on our website, or ask about it during your enrollment call.

Privacy policy

This Privacy Policy is hereby incorporated by reference into the Extend Health Terms of Service (<https://www.extendhealth.com/about/licensing-legal>), and applies to information collected by Extend Health, Inc. and its subsidiaries (collectively, “Extend Health”) in connection with your use of Extend Health’s websites (the “Sites”) and our services, which include providing you with information about insurance options, assisting with the selection of and enrollment in an insurance plan, providing you with an opportunity to interact with other users, and other products and services that may be available to you (the “Services”). In this Privacy Policy, the words “you,” “your,” and “customer” are used to mean you, an individual user from whom Extend Health has collected personal information through the Sites, including for purposes of assisting in administration of an employer’s plan or enrolling in an individual health plan by an Extend Health benefit advisor. Other capitalized terms used but not defined in this Privacy Policy are defined in the Terms of Service. As a provider of services and products that involve compiling personal information, Extend Health takes your privacy very seriously. We may not collect all of the types of information described below, however, this policy explains how we handle and protect your personal information and protected health information. When you enroll in a particular health plan, it will have its own privacy policies that describe how your information will be treated. To obtain a copy of your health plan’s HIPAA-mandated Notice of Privacy Practices, please contact the member services number on your health plan ID card.

INFORMATION WE COLLECT

Extend Health collects information that helps us to serve your needs, provide you with personalized customer service and fulfill our legal and regulatory obligations. Depending on the services that we provide to you and any services that you might request, we collect information such as

1. information provided by you or your current or former employer (“employer”) or labor union, and if this information is not available from your employer or labor union, we may collect it from third party sources,

2. responses from you and others appointed by you regarding your health care providers and any medications you may take,
3. information about your relationship with us, such as products purchased through Extend Health and your transaction histories,
4. information necessary to provide customer service such as demographic information, gender, location and preferences when such information is linked to other information that identifies you,
5. information from health care providers such as hospitals, doctors, and laboratories, and
6. information about your health condition received from your health plan. Your personal information is also used to identify you and maintain the security and privacy of your benefits.

REGISTERING WITH US; INFORMATION YOU PROVIDE

We collect personal information from you when you register with us and when you voluntarily submit or post information about yourself using certain features of the Sites (such as comments to blogs or personal stories you submit). You may register with us through the Sites or through our customer service centers by providing or confirming certain personal or contact information (e.g., email address, phone number, gender, date of birth) to one of our benefit advisors.

APPLYING FOR HEALTH INSURANCE AND OTHER PRODUCTS

If you apply for health insurance or other products through our website, we may ask you to provide us with personal information and/or health information relating to you and any family member who will be included on your application. This information will be used by your chosen insurance company, agent or plan administrator to process your application. Additionally, we may ask you to provide us with credit card or bank account information, which will be used by your chosen insurance company or plan administrator to process your application and collect any fees associated with your application or insurance premiums upon approval of your application.

SURVEYS; USER SUBMISSIONS

If you provide information or feedback to us through online surveys, various forms and features of the Services or other interactive forms, including posting comments to blogs, submitting retirement stories to us, or sending us comments, we use this information to operate and enhance the Sites and to better understand your health insurance needs and to provide quality products, services and other opportunities. We plan to use any information we obtain from you to help us continually improve our customers' experiences.

TECHNICAL INFORMATION AND COOKIES

When you use the Sites, we may automatically record certain information from your web browser and/or your computer or other device that you use to access the Sites, using different types of technology, including cookies, standard log files, "clear gifs" or "web beacons." These technologies generally consist of a text file that is transferred to your computer's hard drive for record-keeping purposes and to enhance the quality of your visit to the Sites. This "automatically collected" information may include your Internet Protocol (IP) address, device model and/or type, device address or ID, web browser, operating system, the content you view on the Sites, actions you take using the Sites, and the dates and times that you use the Sites, as well as search queries you may have used to find the Sites. We may use persistent cookies (that remain in place after you exit the Site to help us recognize you when you return) and session cookies that will be deleted when you exit the Sites. You can set your browser to refuse cookies, but doing so will limit system performance and may even cause certain features of the Sites to malfunction or not work at all.

SOCIAL SECURITY NUMBERS, HEALTH INSURANCE CLAIM NUMBERS AND TAXPAYER IDENTIFICATION NUMBERS

We may collect your Social Security Number and/or Health Insurance Claim Number from you or your employer or labor union in the course of our regular business functions. Also, in certain circumstances we receive Social Security Numbers or Taxpayer Identification Numbers in connection with an individual's prospective, current or former employment with Extend Health. It is the policy of Extend Health to protect the confidentiality of Social Security

Numbers, Health Insurance Claim Numbers and Taxpayer Identification Numbers. We use these types of data to carry out our business needs and to comply with local, state and national governmental requirements. We do not use this information for internal identification purposes.

Extend Health has adopted administrative, physical and technical safeguards and procedures to restrict access to this information to those employees or agents who need to use it for our business purposes and to protect it from unauthorized access, use, disclosure, and destruction. We may disclose this information to third parties, such as a third party provider of contact information verification services, who agree to protect this information and to keep it confidential and secure. When we dispose of records containing personal information we will use a means, such as shredding, that renders the information unreadable. Our employees periodically undergo training regarding the safeguarding of personally identifiable information, including Social Security Numbers.

INFORMATION ABOUT CHILDREN

Because of the nature of our business we do not solicit or intentionally receive information from children under the age of 13. Parents and legal guardians are permitted to provide us with information about their children.

USE OF PERSONAL INFORMATION

Any personally identifiable information you give us will be used for our general commercial purposes, including to provide, support, develop, and enhance the features of the Sites and the Services, and to provide any product, service or other information that you request. We may use your information to provide applications and services to you, and to display customized content. We may also use personal information for certain auditing, research and analysis activities to operate and improve Extend Health's technologies and services. Your personal information may also be used to set up, process, or contact you regarding your account. We may use your email address to contact you to respond to your inquiries or to provide information on products or services to you. You can elect not to receive emails from us either by "unsubscribe" to an email that you receive or by contacting us as indicated below. When we use your personal information, it may be processed on our servers in the United States of America and in other countries, and your

information may be processed on a server that lies outside your own country. When we use personal information in certain of our internal marketing efforts, we provide you with choices (see “Choices” below).

SHARING OF YOUR PERSONAL INFORMATION

We are not in the business of selling your information! Nonetheless, we may disclose certain of your personal information to third parties in connection with the operation of our business in a variety of circumstances, including the following:

IN GENERAL

We may disclose information about you to unaffiliated third parties if:

1. you request or authorize it,
2. the information is provided to help complete a transaction for you,
3. the information is provided to comply with the law, applicable regulations, court orders or subpoenas, to enforce our Terms of Service or other agreements, or to protect our rights, property or safety or the rights, property or safety of our users or others (e.g., to a consumer reporting agency for fraud protection etc.),
4. the disclosure is done as part of a purchase, transfer or sale of services or assets (e.g., in the event that some or all of our assets are acquired by another party, customer information may be one of the transferred assets),
5. the information is provided to our agents, outside vendors or service providers to perform functions on our behalf (e.g., analyzing data, providing marketing assistance, providing customer service, processing orders, etc.), or
6. to others as described in this Privacy Policy.

INSURANCE COMPANIES AND AUTHORIZED PLAN ADMINISTRATORS

If you submit an application for an insurance product offered by us, we will disclose your personal information to your chosen insurance company to process your application. If you enroll in a health subsidy account (such as a Health Reimbursement Arrangement) or other similar account offered through an authorized plan administrator with whom we have associated, then we

may disclose your personal information to that trustee or administrator in order to complete your enrollment in the account. These partners are only allowed to use your personal information to process your requested quote, application or enrollment and are contractually obligated to maintain strict confidentiality and security with respect to your personal information.

SERVICE PROVIDERS

We may disclose your personal information to other companies that help us process or service your insurance application or correspond with you. For example, we may provide your personal information to a service provider to verify your mailing address, phone number and email address. The companies we hire to process or service your insurance application or to correspond with you are not allowed to use your personal information for their own purposes and are contractually obligated to maintain strict confidentiality and security with respect to your personal information.

MARKETING USE

We do not disclose your personal information to third parties for their own marketing uses. We may use your information to provide you with information about third parties' goods or services unless you tell us not to. (See "Choices" below)

OTHER USERS

By their nature, certain features of the Services enable you to post and communicate information that will be publicly available to other users in a variety of ways. For example, if you submit a comment to a blog posting, or a retirement story, it may be published on the Sites and elsewhere (as provided in the Terms of Service). Any personally identifiable information that you voluntarily choose to include in a public area of the Sites, such as a User Submissions that you post, will be made available to other users who access that content. Once you make your personally identifiable information available to others in any of these ways, it may be collected and used by the recipients without restriction. Note that if and to the extent that Extend Health provides you with tools to configure, restrict, or limit access to such postings, we cannot guarantee that use of these features will prevent access to information you post, whether surreptitiously or otherwise.

LEGAL OBLIGATIONS

For information that is considered “protected health information” under the federal Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), you have the right to see and copy that information, receive an accounting of disclosures of the information from your health plan and amend that information. If you believe your rights have been violated, you have the ability to file a complaint with your health plan or with the Secretary of the U.S. Department of Health and Human Services. Additionally, the use and disclosure of certain “non-public personal financial and health information” is regulated by the Gramm-Leach-Bliley Act of 1999 (“GLBA”), and your disclosure of such information to us and our business associates is governed by the terms of GLBA.

AGGREGATE INFORMATION

Extend Health may disclose aggregated, non-personally-identifiable information to interested third parties to assist such parties in understanding the usage, viewing, and demographic patterns for certain programs, content, services, advertisements, promotions, and/or functionality on the Sites or in connection with providing the Services.

SECURITY

We are committed to protecting your privacy and preventing the unauthorized access and use of your personal information. Extend Health employs and maintains administrative, physical and technical safeguards to protect your personal information, and to restrict access to those employees and contractors who need to know your personal information to provide products and services to you. Any employee or contractor who violates our Privacy Policy may be subject to disciplinary action. Please note that this is not a guarantee that such information may not be accessed, disclosed, altered, or destroyed in connection with a breach of any of our administrative, physical, or technical safeguards. We cannot ensure or warrant the security of any information you transmit to Extend Health, and you do so at your own risk.

While we take steps to protect your personal information and to keep it secure, you also play a role in protecting your information. You can help to maintain the security of your online transactions by not sharing your log-in information with anyone. If we receive instructions using your log-in

information we will assume that the instructions have been authorized by you.

CONTACT US; UPDATING YOUR INFORMATION

If you want to correct or update your personal information, you may log in to your user account on our website, or contact us by email at

support@extendhealth.com or by mail at:

**Customer Service, Extend Health
10975 S. Sterling View Dr.
South Jordan, UT 84095**

We will share your messages with those within our organization that are most capable of addressing the issues contained in your message. We preserve the content of your e-mail, your e-mail address and our response so that we can efficiently respond to any questions you might have. We also do this in an effort to meet legal and regulatory requirements. We will use reasonable efforts to respect your request not to be contacted by e-mail.

CHOICES

We may contact you to survey your satisfaction of our Services and/or to inform you of additional products and services that we offer directly to you or on behalf of a third party. You may opt out of receiving these surveys and/or notices from us. If you want to opt out of receiving these surveys and/or notices, you may use our email opt-out page located at www.extendhealth.com/preferences/opt-out, or you may contact us by email at support@extendhealth.com or by mail at:

**Sales Support, Extend Health
10975 S. Sterling View Dr.
South Jordan, UT 84095**

Please note that you will still receive communications from us regarding your insurance quote, application or policy even if you opt out of receiving our surveys and/or notices of additional products and services.

SITES WE LINK TO

If you choose to use any of the links that we provide to our partner companies, sponsors, and other third party resources, you will leave our website and navigate to a new website. Protection of your privacy at websites other than ours will be governed by the privacy policy of those sites. Take

the time to read the privacy policies on those sites. Because third party websites are not under our control, we cannot be responsible for the privacy practices of such websites or pages and we do not endorse any of third party websites or pages, the services or products described or offered on those sites or pages, or any of the content contained on those sites or pages.

CHANGES TO THIS POLICY

We may update this Privacy Policy at any time, with or without advance notice. In the event there are significant changes to this Privacy Policy, we will display a prominent notice in the privacy portion of the Extend Health website and let you know the effective date of the changes. In the event we make a material change to our information privacy practices that affects the personal information already stored in our database, we will post the revised privacy policy and new effective date in the privacy portion of the Extend Health website and may take other steps to advise you about the changes. If you have any questions or comments or receive any unwanted e-mail from this site, please contact our webmaster via e-mail at privacy@extendhealth.com.

Effective Date: July 1, 2012

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A Towers Watson company

How to Contact Us

After you have read this guide and collected the information it requests, you're ready for your enrollment call.

Call us using the phone number below for assistance evaluating your options and enrolling in new coverage.

Please allow at least one hour per person to complete your call.



Contact Us by Phone

1-888-592-8348

(TTY: 711)

Monday through Friday,

8:00 a.m. to 9:00 p.m. Eastern time



Review Your Options Online

www.extendhealth.com/ornl

We are changing our name!

Extend Health will become Towers Watson

January 2014