



Great American Insurance Company

[301 E 4th Street, Cincinnati, OH 45202]

STOP LOSS DISCLOSURE STATEMENT

HIPAA and PHI

HIPAA Privacy permits the release of Protected Health Information (PHI) for the purpose of evaluating and accepting risk associated with the "Policyholder" as part of health care operations. "We" shall use the information provided solely for the purpose of evaluating the acceptability of this risk and shall not disclose any PHI collected except in performing this risk evaluation.

Use of Disclosure Statement

"We" will rely upon the information provided on the attached disclosure form, which will become part of the application for stop loss coverage and will be a part of the policy if accepted by "Us" or "Our" authorized representative. The purpose of the form is to allow "Us" to take underwriting action on all known risks in the categories listed below. It is the "Policyholder's" responsibility, either directly or through their designated TPA or representative, to accurately report all claims known as of the date of this disclosure by making a thorough review of all applicable records. Such records shall include historical claims reports, disability records, current information from administrators, insurers, utilization management companies, managed care companies, and any Agent/Broker of the "Policyholder." In exchange, "We" will accept the liability for any truly unknown risks. [The attached disclosure form must be completed and signed by the appropriate parties no more than [30] days prior to the proposed effective date of stop loss coverage and received by "Us" within [5] days of completion.]

Upon receipt of the completed disclosure, "We" will assess all data, new and previously reported, and will inform the producer in writing within [5] days of any changes to the rates, factors or terms of coverage. "We" reserve the right to rescind the proposal in its entirety based upon a review of all information submitted during the proposal process.

Questionnaire

Either submit a claim report or list on the form below all individuals known to:

1. Be currently disabled, confined to a medical facility, or have been precertified within the last three months.
2. Have received medical services during the current plan year the cost of which exceeds the lesser of, [50%] of the lowest Specific Benefit Deductible applied for or [\$50,000], and for which bills have been received by the designated TPA or claims administrator and entered into their claims system.
3. Have been identified as a candidate for case management and as having the potential to exceed during the policy period, the lesser of, [50%] of the lowest Specific Benefit Deductible applied for, or [\$50,000].
4. Have been diagnosed, during the current plan year, with a condition represented by any of the ICD-10 codes contained in the attached list.

If the proposed "Policyholder" fails to disclose any risk known to fall into one of the above categories, either intentionally or because a thorough review of all records was not conducted, then "We" will have no liability for claims on the risk not disclosed.



Full Name	DOB	Sex	Employee Spouse Child	(A)ctive, (C)OBRA, (R)etiree, or (T)ermed	Term Date	Diagnosis	Hospital Confined? (Y/N)	Transplant? (Y/N)	Most Recent Date of Service	Expenses Incurred This Plan Year

After review, the proposed "Policyholder" named below hereby represents and warrants that the above list accurately discloses all potentially catastrophic risks in accordance with the instructions attached to this form and that it is the result of a diligent search in accordance with those instructions. In addition, should Great American Insurance Company require additional medical information on any individual disclosed above, the proposed "Policyholder" agrees to provide access to this information so that Great American Insurance Company may evaluate the risk and provide final terms. The proposed "Policyholder" also acknowledges that furnishing false written information concerning their insurance; or the suppression, withholding or misstating of material facts, or failure to return this required document within the specified timeframe may result in the Stop Loss policy being revised or in a rescission of the policy, at the election of the carrier.

Authorized Proposed Policyholder _____ Title _____ Date _____

Claims Administrator Signature _____ Title _____ Date _____

[Agent/Broker _____ Title _____ Date]

ICD-10 Codes for Disclosure Notification

Please list all Plan Participants who have been diagnosed with or treated for any of the codes listed under the following categories during the current Benefit Period:

A00-B99 Certain infectious and parasitic disease

- A40 Streptococcal sepsis
- A41 Other Sepsis
- B15-B19 Viral hepatitis
- B20 Human immunodeficiency virus (HIV) disease

C00-D49 Neoplasms

- C00-C96 Malignant neoplasms
- D46 Myelodysplastic syndromes

D50-D89 Diseases of the blood and blood-forming organs & disorders involving the immune mechanism

- D57 Sickle-cell disorders
- D59 Acquired hemolytic anemia
- D60-D64 Aplastic and other anemias
- D65-D69 Coagulation defects, purpura and other hemorrhagic conditions
- D70-D77 Other diseases of blood and blood-forming organs
- D80-D89 Certain disorders involving the immune mechanism

E00-E89 Endocrine, nutritional and metabolic diseases

- E10-E13 Diabetes mellitus
- E15-E16 Other disorders of glucose regulation and pancreatic internal secretion
- E65-E68 Obesity and other hyper alimentation
- E70-E89 Metabolic disorders

F01-F99 Mental, Behavioral and Neurodevelopmental disorders

- F10.1 Alcohol Abuse
- F11.1 Opioid Abuse
- F20 Schizophrenia
- F31 Bipolar Disorder
- F32.3 Major depressive disorder, single episode, severe with psychotic feature F33.1-F33.3 Major Depressive Disorder, recurrent
- F84.0 Autistic Disorder
- F84.2 Rett's Syndrome
- F84.5 Asperger's syndrome

G00-99 Diseases of the nervous system

- G00 Bacterial Meningitis
- G04 Encephalitis Myelitis and Encephalomyelitis.
- G06-G07 Intracranial and intraspinal abscess and granuloma
- G12.21 Amyotrophic Lateral Sclerosis
- G35 Multiple Sclerosis
- G36 Other Acute Disseminated Demyelination
- G37 Other Demyelinating disease of central nervous system
- G82.5 Quadraplegia
- G83.4 Cauda Equina Syndrome
- G92 Toxic Encephalopathy
- G93.1 Anoxic Brain Injury

I00-I99 Diseases of Circulatory System

- I20 Angina Pectoris
- I21.09-I22 Acute myocardial infarction
- I24 Acute and Subacute Ischemic Heart Disease
- I25 Chronic ischemic heart disease
- I26 Pulmonary embolism
- I27 Other pulmonary heart disease
- I28 Other diseases of pulmonary vessels
- I33 Acute & Subacute Endocarditis
- I34-I38 Heart Valve Disorders
- I42-I43 Cardiomyopathy
- I44-I45 Conduction Disorders
- I46 Cardiac Arrest
- I47-I49 Cardiac Dysrhythmias
- I50 Heart Failure
- I60-161 Subarachnoid Hemorrhage / Intercerebral Hemorrhage
- I63 Cerebral infarction
- I65.8-I66 Occlusion of Precerebral /Cerebral Arteries
- I67 Other cerebrovascular disease
- I70 Atherosclerosis / Aortic Aneurysm

J00-J99 Diseases of Respiratory System

- J40-J44 Chronic Obstructive Pulmonary Disease (COPD)
- J84.10-J84.89 Postinflammatory Pulmonary Fibrosis
- J98.11-J98.4 Pulmonary Collapse / Respiratory Failure

K00-K95 Diseases of Digestive System

- K22 Esophageal obstruction
- K25-K28 Ulcers
- K31 Other diseases of stomach & duodenum
- K50 Crohn's disease
- K51 Ulcerative colitis
- K55-K64 Diseases of intestine
- K65-K68 Diseases of peritoneum & retroperitoneum
- K70-K77 Diseases of liver
- K83 Diseases of biliary tract
- K85-K86 Diseases of pancreatitis
- K90-K95 Other diseases of digestive system/Complications of bariatric procedures

M00-M99 Diseases of Musculoskeletal System & Connective Tissue

- M15-M19 Osteoarthritis
- M32 Systemic lupus erythematosus
- M34 Systemic sclerosis
- M41 Scoliosis
- M43 Spondylolysis
- M50 Cervical disc disorders
- M51 Thoracic, thoracolumbar & lumbosacral intervertebral disc disorders
- M72.6 Necrotizing Fasciitis
- M86 Osteomyelitis

N00-N99 Diseases of the Genitourinary System

- N00-N01 Acute and Rapidly Progressive Nephritic Syndrome
- N03 Chronic Nephritic Syndrome
- N04 Nephrotic Syndrome
- N05-N07 Nephritis and Nephropathy
- N08 Glomerular Disorders classified elsewhere
- N17 Acute Kidney Failure
- N18 Chronic Kidney Disease (CKD)
- N19 Renal Failure, Unspecified

O00-O9A Pregnancy, childbirth and the puerperium

- O09 High Risk Pregnancy
- O11 Pre-Existing Hypertension with Pre-Eclampsia
- O14-O15 Pre-Eclampsia and Eclampsia
- O30 Multiple Gestation
- O31 Other complications specific to Multiple Gestations

P00-P96 Certain conditions originating in the perinatal period

- P07 Disorders of newborn related to short gestation and low birth weight P10- P15 Birth Trauma
- P19 Fetal distress
- P23-P28 Other respiratory conditions of newborn
- P29 Cardiovascular disorders originating in the perinatal period
- P36 Bacterial sepsis of newborn
- P52-P53 Intracranial hemorrhage of newborn
- P77 Necrotizing enterocolitis of newborn
- P91 Other disturbances of cerebral status newborn

Q00-Q99 Congenital malformations, deformations and chromosomal abnormalities

- Q00-Q07 Congenital malformations of the nervous system
- Q20- Q26 Congenital Cardiac malformations
- Q41-Q45 Congenital Anomalies of Digestive system
- Q85 Phakomatoses, not classified elsewhere
- Q87 Congenital malformation syndromes affecting multiple systems
- Q89 Other Congenital malformations

R00-R99 Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified

- R07.1-R07.9 Chest Pain
- R40-R40.236 Coma
- R57-R58 Shock, Hemorrhage
- R65.2-R65.21 Severe sepsis

S00-T88 Injury, Poisoning and Certain Other Consequences of External Causes

S02 Fracture of skull and facial bones
 S06 Intracranial injury
 S07 Crush injury to head
 S08 Avulsion and traumatic amputation of part of head
 S12-S13 Fracture and injuries of cervical vertebra and other parts of neck S14.0-S14.15 Injury of nerves and spinal cord at neck level
 S22.0 Fracture of thoracic vertebra
 S24 Injury of nerves and spinal cord at thorax level
 S25 Injury of blood vessels of thorax
 S26 Injury of heart
 S32.0-S32.2 Fracture of lumbar vertebra
 S34 Injury of lumbar and sacral spinal cord and nerves
 S35 Injury of blood vessels at abdomen, lower back and pelvis
 S36-S37 Injury of intra-abdominal organs
 S48 Traumatic amputation of shoulder and upper arm
 S58 Traumatic amputation of elbow and forearm
 S68.4-S68.7 Traumatic amputation of hand at wrist level
 S78 Traumatic amputation of hip and thigh
 S88 Traumatic amputation of lower leg
 S98 Traumatic amputation of ankle and foot
 T30-T32 Burns and corrosions of multiple body regions
 T81.11-T81.12 Postprocedural cardiogenic and septic shock
 T82 Complications of cardiac and vascular prosthetic devices, implants and grafts
 T83-T85 Complications of prosthetic devices, implants and grafts
 T86 Complications of transplanted organs and tissue
 T87 Complications to reattachment and amputation

Z00-Z99 Factors Influencing Health Status and Contact with Health Services

Z37.5-Z37.6 Multiple births
 Z38.3-Z38.8 Multiple births
 Z48-Z48.298 Encounter for aftercare following organ transplant
 Z49 Encounter for care involving renal dialysis
 Z94 Transplanted organ and tissue status
 Z95 Presence of cardiac and vascular implants and grafts
 Z98.85 Transplanted organ removal status
 Z99.1 Dependence on respirator
 Z99.2 Dependence on dialysis