SOUTHERN STAR®
CENTRAL GAS PIPELINE

Request for Emailed Notice of Privacy Practices

Return completed Request to:

Southern Star Privacy Officer
Southern Star Central Gas Pipeline, Inc.
4700 Highway 56
Owensboro, KY 42301
Fax: 270/852-5017

Please provide me with an emailed copy of Southern Star's Notice of Privacy Practices. I understand that the requested copy will be emailed by Southern Star to the email address I provide, below, within 30 days of Southern Star's receipt of this Request. Receipt is defined as the day the Request is delivered to Southern Star from the carrier with which I sent this Request. I understand I am not entitled to a copy of the Notice of Privacy Practices unless I am the named insured or covered, eligible dependent of the same on a Southern Star Health Plan subject to HIPAA. I understand that I may receive Notices of Privacy Practices directly from certain vendors Southern Star has contracted with to provide Health Plans subject to HIPAA.

Name _____ _____
Last First

Address _____
_____
_____
_____ ____ _____
City State Zip Code

Email Address _____

_____ _____
Signature Date

To be completed by Privacy Officer

Date Request Received _____

Is requestor the named insured or covered eligible dependent? (Must check one, below)

____ YES. Attach copy of Request to Emailed Notice of Privacy Practices. Date emailed _____

____ NO. Attach copy of Request to Explanation of Rejection of Request. Date sent _____

Date copy of Request and Response filed _____