

# IMPORTANT INFORMATION FOR VICTIMS OF DOMESTIC VIOLENCE AND ENDANGERED INDIVIDUALS

If you are a victim of domestic violence or there is an endangered individual in your household, the law gives you certain rights and protections. In New York, Section 2612 of the New York Insurance Law and Part 244 of the New York Insurance Regulations provide those rights and protections.

Section 2612 provides:

## DISCRIMINATION IS UNLAWFUL

An insurance carrier may not

- refuse to issue or renew, deny or cancel any insurance policy
- demand or require a greater premium or payment from any person
- designate domestic violence as a prior condition, for which coverage will be denied/reduced solely because a person is or has been a victim of domestic violence

## DISCLOSURE IS UNLAWFUL

An insurance carrier may not disclose to the policyholder the address or telephone number of a covered person or of anyone providing covered services to a covered person who has obtained an order of protection against the policyholder from a New York court. This right extends to a covered child and to the parent or guardian of the child.

To request confidentiality, email a copy of the order of protection to the insurer at [help@lemonade.com](mailto:help@lemonade.com).

Additionally, Part 244 establishes confidentiality protocols to guard against disclosure of the address and location of a covered person.

## ALTERNATIVE DELIVERY OF COMMUNICATIONS, INCLUDING CLAIM INFORMATION IS REQUIRED

We must accommodate reasonable requests by a covered person to receive communications of claim related information by alternative means or at alternative locations, if the person clearly states that disclosure of the information could endanger him or her. If the covered person is a child, then the child's parent or legal guardian may make the request. The insurer, without consent of the person making the request will be prohibited from disclosing to the policyholder the address, telephone number, any other personally identifying information, information regarding a child residing with the covered person, the nature of any health care services provided, the name or address of the provider of the covered services to the covered person. The request must include an alternative address, telephone number and/or other reasonable methods of contact. In order to revoke a request that has been received and implemented, the requesting person must submit to the insurer a written sworn statement revoking the prior request.

## FOR ADDITIONAL ASSISTANCE, PLEASE CONTACT

New York State Domestic and Sexual Violence Hotline: (800)942-6906 (En Espanol: (800) 942-6908). In NYC, dial: (800) 621-HOPE (4673) or 311 TTY: (866) 604-5350.