HIPAA Notice of Privacy Practices for Protected Health Information

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. PLEASE REVIEW IT CAREFULLY

To: Participants in the Raytheon Health Benefits Plan
Participants in the Raytheon Retiree Health Benefits Plan

This is the Health Information Privacy Notice from the Raytheon Health Benefits Plan and the Raytheon Retiree Health Benefits Plan. The plan in which you are a participant and for which you are receiving this notice is referred to as the “Plan”, and together the plans are referred to as the “Plans”. The Plans provide Raytheon employees, Raytheon retirees, their spouses and dependent children, their beneficiaries, their legal representatives and COBRA participants (referred to as “Plan participants”) with health benefit programs. Raytheon Health Benefits Plan programs currently include medical, dental, vision care, employee assistance, health care reimbursement account, and Long-Term Care Insurance. Raytheon Retiree Health Benefits Plan programs include medical, dental, vision care and Long-Term Care Insurance, where applicable. You have received this notice because of your status as a Plan participant in one or more of the health benefit programs provided under the Plan.

Health Information (including genetic information) that relates to an individual’s past, present or future health, treatment or payment for health care services and either identifies an individual or provides a reasonable basis for believing that it can be used to identify an individual is considered Protected Health Information (“PHI”). The Plan document governing the Plan has been amended to include information about how the PHI of Plan participants will be protected.

This Notice describes:

1) the protection provided by the Plan to the PHI it receives about Plan participants;
2) the Plan’s use and disclosure of PHI; and
3) the rights of Plan participants with respect to the PHI and how those rights can be exercised.

The Plan is required to provide this Notice to you by the Health Insurance Portability and Accountability Act ("HIPAA"). For additional information regarding the Plan’s HIPAA Health Information Privacy Policy you may write directly to: Raytheon Company, Attention: HIPAA Privacy Officer, 235 Wyman Street, Waltham, MA 02451.

PROTECTION OF PHI

The Plan is required by law to maintain the privacy of PHI received in connection with the operation of the Plan and to protect the PHI of Plan participants from inappropriate use or disclosure. Raytheon employees and employees of Business Associates who are engaged in the administration and operation of the Plan are required to protect the confidentiality of PHI. They may look at only the minimum necessary Plan participant PHI needed for the intended use or disclosure and only when there is an appropriate reason to do so as explained in the next section.
Business Associates are third party entities that perform services on behalf of the Plan. Examples of Business Associates are third party administrators, billing companies, data management companies, or companies that provide general administrative services.

USES AND DISCLOSURES OF PHI

To Plan Sponsor: The Plan may disclose PHI to Raytheon Company (the sponsor of the Plan) ("Raytheon") for plan administration functions, such as claims processing. At no time, however, will the Plan disclose information to Raytheon for employment-related actions or decisions unless otherwise authorized by the Plan participant.

In addition, the Plan may disclose "summary health information" to Raytheon for obtaining premium bids or for modifying, amending or terminating the Plan. Summary health information is information that summarizes the claims history, claims expenses or type of claims experienced by individuals for whom Raytheon has provided health benefits under a health, medical or similar plan, and from which identifying information has been deleted.

Finally, the Plan may disclose to Raytheon information on whether an individual is participating in the Plan.

The Plan (which as used in this notice generally includes Business Associates) may use and may disclose PHI to Raytheon and others without obtaining written authorization from the individual to whom the PHI relates for the following purposes:

For Treatment: The Plan may use PHI as necessary to provide the Plan with appropriate health care information as it relates to treatment which includes coordination or management of health care with Business Associates; consultation between health care providers relating to a patient; or referral of a patient from one health care provider to another.

For Health Care Operations: The Plan may also use and disclose PHI for the purpose of evaluating a request for benefits under one or more of the health programs included in the Plan, administering Plan benefits, and processing transactions requested by Plan participants. The Plan may also disclose PHI to Business Associates if they need to receive PHI to provide a service to the Plan and have agreed to abide by the specific HIPAA rules relating to the protection of PHI. PHI may be disclosed to insurers, consultants or third party administrators for underwriting, planning, audit or claim review reasons. Without exception, however, the Plan will never use or disclose genetic information for underwriting purposes.

For Payment: The Plan may use and disclose PHI to pay for benefits under the Plan. For example, it may review PHI identified on claims to reimburse providers for services rendered. The Plan may also disclose PHI to insurance carriers or other plans to coordinate benefits with respect to a particular claim. Additionally, it may disclose PHI to a health plan or an administrator of an employee welfare benefit plan for various payment related functions, such as eligibility determination, audit and review or to assist Plan participants with their inquiries or disputes.
Where Required by Law or for Public Health Activities: The Plan may disclose PHI when required by federal, state or local law. Examples of such mandatory disclosures include notifying state or local health authorities regarding particular communicable diseases or providing PHI to a governmental agency or regulator with health care oversight responsibilities. The Plan may also release PHI to a coroner or medical examiner to assist in identifying a deceased individual or to determine the cause of death.

To Avert a Serious Threat to Health or Safety: The Plan may disclose PHI to avert a serious threat to someone's health or safety and may also disclose PHI to federal, state or local agencies engaged in disaster relief, as well as to private disaster relief or disaster assistance agencies to allow such entities to carry out their responsibilities in specific disaster situations.

For Health-Related Benefits or Services: The Plan may use PHI to provide Plan participants and beneficiaries with information about benefits available to them under their current coverage or policy and, in limited situations, about health-related products or services that may be of interest to them.

For Law Enforcement or Specific Government Functions: The Plan may disclose PHI in response to a request by a law enforcement official made through a court order, subpoena, warrant, summons or similar process. The Plan may disclose PHI about Plan participants or beneficiaries to federal officials for intelligence, counterintelligence, and other national security activities authorized by law.

When Requested as Part of a Regulatory or Legal Proceeding: If a Plan participant is involved in a lawsuit or a dispute, the Plan may disclose PHI about the applicable individual in response to a court or administrative order. The Plan may also disclose PHI about an individual in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell the individual about the request or to obtain an order protecting the PHI requested. The Plan may disclose PHI to any governmental agency or regulator with whom a Plan participant has filed a complaint or as part of a regulatory agency investigation.

In addition to the foregoing uses and disclosures without written authorization, the Plan may also use and disclose PHI as follows:

With Written Authorization: A Plan participant's written authorization will be obtained before the Plan would use or disclose psychotherapy notes about the Plan participant from the Plan participant's psychotherapist. Psychotherapy notes are separately filed notes about the Plan participant's conversations with the Plan participant's mental health professional during a counseling session. They do not include summary information about a Plan participant's mental health treatment. Subject to state law, the Plan may use and disclose such notes when needed by the Plan to defend against litigation filed by a Plan participant. The Plan would also be required to obtain a participant’s written authorization before selling PHI or using or disclosing PHI for fundraising or marketing purposes, although neither Raytheon nor the Plan ever anticipate such uses or disclosures.
After Plan Participant Has Prior Opportunity to Agree or Disagree: Disclosure by the Plan of a Plan participant's PHI to family members, other relatives and close personal friends is allowed if:

- the information is directly relevant to the family or friend’s involvement with the Plan participant's care or payment for that care; and
- the Plan participant has either agreed to the disclosure or have been given an opportunity to object and have not objected

For Research Purposes: The Plan and its Business Associates may disclose PHI to researchers when a Plan participant authorizes such disclosure or when an institutional review board or privacy board has reviewed the research proposal and established protocols to ensure the privacy of the requested information, and approves the research.

Other Uses of PHI: Other uses and disclosures of PHI not covered by this notice and permitted by the laws that apply to the Plan will be made only with a Plan participant's written authorization or that of the Plan participant's legal representative. If the Plan is authorized to use or disclose PHI about an individual, the individual or his or her legally authorized representative may revoke that authorization, in writing, at any time, except to the extent that the Plan has taken action relying on the authorization or if the authorization was obtained as a condition of obtaining coverage through the Plan. All Plan participants should understand that the Plan will not be able to take back any disclosures it has already made with authorization.

PLAN PARTICIPANT RIGHTS REGARDING PHI THE PLAN MAINTAINS ABOUT THE PLAN PARTICIPANT AND HOW THE PLAN PARTICIPANT CAN EXERCISE THEM

The following are a Plan participant's rights under HIPAA regarding access to PHI. Should a Plan participant have questions about a specific right, please write to Raytheon as directed below:

Right to Inspect and Copy PHI: In most cases, a Plan participant has the right to inspect and obtain a copy of the PHI that the Plan maintains about the Plan participant. To inspect and copy PHI, a Plan participant must submit the Plan participant's request in writing to Raytheon Company, Attention: HIPAA Privacy Officer, 235 Wyman Street, Waltham, MA 02451. To receive a copy of the Plan participant's PHI, a Plan participant may be charged a fee for the costs of copying, mailing or other costs associated with the request. However, certain types of PHI will not be made available for inspection and copying. This includes PHI collected by Raytheon in connection with, or in reasonable anticipation of any claim or legal proceeding. In very limited circumstances the Plan may deny the request to inspect and obtain a copy of the Plan participant's PHI. If the Plan does, the Plan participant may request that the denial be reviewed.

The review will be conducted by an individual chosen by the Plan who was not involved in the original decision to deny the request. The Plan will comply with the outcome of that review.

Right to Amend PHI: If a Plan participant believes that the Plan participant's PHI is incorrect or that an important part of it is missing, the Plan participant has the right to ask the Plan to amend the Plan participant's PHI while it is kept by or for it. The Plan participant must provide
the Plan participant's request and reason for the request in writing and submit it to Raytheon Company, Attention: HIPAA Privacy Officer, 235 Wyman Street, Waltham, MA 02451. The Plan may deny the request if it is not in writing or does not include a reason that supports the request. In addition, the Plan may deny the request if the Plan participant asks the Plan to amend PHI that is accurate and complete; was not created by the Plan, unless the person or entity that created the PHI is no longer available to make the amendment; is not part of the PHI kept by or for the Plan; or, is not part of the PHI which the Plan participant would be permitted to inspect and copy.

Right to a List of Disclosures: A Plan participant has the right to request a list of the disclosures the Plan made of PHI about them. This list will not include disclosures made for treatment, payment, health care operations, or purposes of national security, or to law enforcement or to corrections personnel or made pursuant to the Plan participant's authorization or directly to the Plan participant. To request this list, a Plan participant must submit a request in writing to Raytheon Company, Attention: HIPAA Privacy Officer, 235 Wyman Street, Waltham, MA 02451. A Plan participant's request must state the time period for which they want to receive a list of disclosures. The time period may not be longer than six years and may not include dates before April 14, 2003. The request should indicate in what form the Plan participant wants the list (for example, on paper or electronically). The first list the Plan participant requests within a 12-month period will be free. Raytheon may charge the Plan participant for responding to any additional requests within that period and will notify the Plan participant of the cost involved; the Plan participant may choose to withdraw or modify the request at that time before any costs are incurred.

Right to Request Restrictions: The Plan participant has the right to request a restriction or limitation on PHI the Plan uses or discloses about the Plan participant for treatment, payment or health care operations, or that the Plan discloses to someone who may be involved in the Plan participant's care or payment for the Plan participant's care, like a family member or friend. While the Plan will consider the Plan participant's request, it is not required to grant it. To request a restriction, a Plan participant must make a request in writing to Raytheon Company, Attention: HIPAA Privacy Officer, 235 Wyman Street, Waltham, MA 02451. In the request, a Plan participant must state (1) what information they want to limit; (2) whether they want to limit the Plan’s use, disclosure or both; and (3) to whom they want the limits to apply (for example, disclosures to a spouse or parent). The Plan will not agree to restrictions on PHI uses or disclosures that are legally required, or which are necessary to administer our business.

Right to Request Confidential Communications: A Plan participant has the right to request that the Plan communicate with him or her about PHI in a certain way or at a certain location if the Plan participant states that communication in another manner may endanger the Plan participant. For example, a Plan participant can ask that the Plan only contact him or her at work or by mail. To request confidential communications, a Plan participant must make a request in writing to Raytheon Company, Attention: HIPAA Privacy Officer, 235 Wyman Street, Waltham, MA 02451 and specify how or where the Plan participant wishes to be contacted. The Plan will accommodate all reasonable requests.
**Right to File a Complaint:** If a Plan participant believes the Plan participant's privacy rights have been violated, he or she may file a complaint with Raytheon or with the Secretary of the Department of Health and Human Services. To file a complaint with the Plan, a Plan participant must contact Raytheon Company, Attention: HIPAA Privacy Officer, 235 Wyman Street, Waltham, MA 02451. All complaints must be submitted in writing. A Plan participant will not be penalized or retaliated against for filing a complaint.

**Right to a Paper Copy of Notice:** A Plan participant has a right to a paper copy of this Notice. To request a paper copy of this Notice, a Plan participant must contact Raytheon Company, Attention: HIPAA Privacy Officer, 235 Wyman Street, Waltham, MA 02451.

**Right to Notice in Event of Breach:** The Plan goes to great efforts to prevent a breach of PHI. As such, the Plan does not anticipate any such breach. In the unlikely event that PHI that has not been rendered unusable, unreadable or indecipherable by technology approved by Health and Human Services (referred to as "unsecured PHI") is, or is reasonably believed to have been, accessed, acquired or disclosed as a result of a security breach, the Plan will notify affected Plan participants and, if required by law, the Secretary of Health and Human Services.

**ADDITIONAL INFORMATION**

**Changes to This Notice:** The Plan reserves the right to change the terms of this notice at any time and to make the revised or changed notice effective for PHI it already has about Plan participants as well as any PHI the Plan receives in the future. The effective date of this notice and any revised or changed notice may be found at the top of the first page of the notice. A Plan participant will receive a copy of any revised notice from the Plan by mail or by e-mail, but only if e-mail delivery is offered by Raytheon and the Plan participant agrees to such delivery.

**Further Information:** A Plan participant may have additional rights under other applicable laws. For additional information regarding Raytheon’s HIPAA Health Information Privacy Policy or our general privacy policies, a Plan participant can contact the Plan's Privacy Officer at Raytheon Company, Attention: HIPAA Privacy Officer, 235 Wyman Street, Waltham, MA 02451.

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