## [DATE]

[MEMBER NAME]
[ADDRESS 1]
[ADDRESS 2]
[CITY] [STATE], [ZIP]

RE: Notification of Privacy Breach

Dear [Insert Individual's Name]:

We are writing to notify you of a privacy breach that may have involved some of your health information. Most importantly, we want to apologize if you have been affected. We understand how important your privacy is, and this type of mistake is unacceptable.

## **Here is what happened**:

The breach occurred on July 28, 2017, when a letter related to a change in your pharmacy benefits and access to medications was sent to you. On July 31, 2017, we were first made aware that, in some cases, personal health information was visible through the window of the envelope used to send the letter.

Upon learning of the issue, we took immediate steps to investigate what happened. We then confirmed that the vendor handling the mailing had used a window envelope, and, in some cases, the letter could have shifted within the envelope in a way that allowed personal health information to be viewable through the window. On August 2, 2017, we determined this incident may have caused a breach of your protected health information.

Regardless of how this error occurred, it affects our members and it is our responsibility to do our best to make things right. We will work to ensure that proper safeguards are in place to prevent something similar from happening in the future.

## Types of information involved:

The information displayed in the envelope's window was your first name, last name, address, and in some cases, a reference to filling prescriptions for [certain] medications. The viewable information did not include the name of any particular medication or any statement that you have been diagnosed with a specific condition. Your Social Security number, bank account information and credit card information were not included in the letter.

We take the privacy of member information very seriously and deeply regret that this incident occurred. If you have any questions related to the original lawsuit settlement, please call 800-326-5608. This phone line is toll-free and operates 24 hours per day, seven days per week.

You also have the right to file a complaint with the Office of Civil Rights of the U.S. Department of Health and Human Services. You can send your complaint by mail to: Centralized Case Management Operations, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W.. Room 509F HHH Bldg., Washington, D.C. 20201.

Alternatively, you can send a complaint by email to <a href="OCRComplaint@hhs.gov">OCRComplaint@hhs.gov</a>.

We serve nearly 45 million people, and are entrusted to protect their personal health information at all costs. When that trust is broken, no matter how big or small the impact, it is on us to earn it back. We hope to do that here.

Sincerely,

Cynthia Bates Chief Privacy Officer