

<Date>

<First Name> <Last Name> <Address 1> <Address 2> <City>, <State> <Zip>

Dear <First Name>,

We take the job of protecting your personal information seriously. And we want you to know when there might be a concern.

That's why we're reaching out to let you know about a privacy issue we found on June 5, 2023. We may have sent letter(s) with your information to someone else by mistake. We're sorry for any concern this causes and want you to know what steps we're taking.

What information was sent?

Because of this mailing, someone could have found these facts about you:

- · Name, old address, Member ID number, plan name
- · Provider name, claim number, dates of service

The letters didn't include social security numbers or banking information.

What happened?

Our mailing system sent letters during a system update starting May 28, 2023. These were letters we sent you between 2019 and 2021. Some of the letters were addressed to you. They may have been sent to an old mailing address where you used to live. We haven't seen that any of the information has been misused.

What we're doing about it

We're sorry this happened. We fixed the mistake as soon as we knew about it. We're also updating our processes to help make sure it doesn't happen again.

To help protect you, we're offering you **Experian's IdentityWorks Credit 1B** service at no cost to you. You can find how to sign up for this free service included in this letter.

How to protect your information

The Federal Trade Commission lists ways to help protect your information and privacy. You can see the list at **consumer.ftc.gov**. You can also call the agencies listed to make sure the information they may have in their records is right, order free annual credit reports and place a fraud alert or security freeze on your credit file.

- Equifax: 1-800-525-6285
- Experian: 1-888-397-3742
- TransUnion: 1-800-680-7289

We're here to help

If you have any questions, call us at **1-888-455-3824** between 8:30 a.m. and 4:30 p.m. ET, Monday through Friday. You can email us at **Privacy_Office@BCBST.com**.

Best of Health,

Cathy Shepherd, Privacy Analyst

BlueCross BlueShield of Tennessee Privacy Office

To sign up for IdentityWorks Credit 1B:

· Go to **bcbst.com/member** and log in.

 \cdot Choose the **Benefits & Coverage tab.** Then click on **Identity Protection Services** and follow the instructions there.

 \cdot You can also enroll by phone if you don't have an online account. Just give us a call us at the number on the back of your Member ID Card, and ask us for the engagement number and activation code listed in BlueAccess. Be sure to write these two numbers down because you will need them to sign up for the service. Then call **1-866-926-9803** to sign up. You'll need those codes when calling.

You don't need a credit card to enroll. Here's some more information about IdentityWorks Credit 1B:

• **Experian credit report at signup:** See what information is associated with your credit file. Daily credit reports are available for online members only.*

· Credit Monitoring: This monitors your Experian file for signs of fraud.

· Identity Restoration: Agents help you address credit and non-credit related fraud.

• Experian IdentityWorks ExtendCARE[™]: You get the same Identity Restoration support even after your Experian IdentityWorks membership has expired.

 \cdot Up to \$1 Million Identity Theft Insurance**: This provides coverage for certain costs and unauthorized electronic fund transfers.

Once you've enrolled, review your credit report. Look for anything that looks wrong or suspicious. Call Experian at **1-866-926-9803**. You can ask questions about IdentityWorks. You can get help understanding your credit report. And you can ask them about something on your credit report you think is fraudulent.

* Offline members will be eligible to call for additional reports quarterly after enrolling

** The Identity Theft Insurance is underwritten and administered by American Bankers Insurance Company of Florida, an Assurant company. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions. BlueCross BlueShield of Tennessee (BlueCross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified interpreters and (2) written information in other formats, such as large print, audio and accessible electronic formats.
- Provides free language services to people whose primary language is not English, such as: (1) qualified interpreters and (2) written information in other languages.

If you need these services, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711).

If you believe that BlueCross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance ("Nondiscrimination Grievance"). For help with preparing and submitting your Nondiscrimination Grievance, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711). They can provide you with the appropriate form to use in submitting Nondiscrimination Grievance you can file a Nondiscrimination Grievance to: Nondiscrimination Compliance Coordinator; c/o Manager, Operations, Member Benefits Administration; 1 Cameron Hill Circle, Suite 0019, Chattanooga, TN 37402-0019; (423) 591-9208 (fax); Nondiscrimination_

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1–800–368–1019, 800–537–7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association.

BlueCross BlueShield of Tennessee is a Qualified Health Plan Issuer in the Health Insurance Marketplace. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Si usted es miembro, llame al número de Servicio de atención a miembros que figura al reverso de su tarjeta de identificación de Miembro o al 1-800-565-9140 (TTY: 1-800-848-0298).

ملحوظة: إذا كنت نتحدت انكر اللغة. فإن خدمات المساعدة اللغوية تتوافر لك بلامجان. إذا كنت عصورًا. فاتصل برقم خدمة الأعصاء الموجود على ظهر بطاقة هوية المصو أو بالرقم 9140-565-800-1 (الهاتف النسي: 8020-848-089).

注意:如果您使用繁體中文,您可以免費獲得語言援助服務[。] 若您是會員,請撥打會員 ID 卡背面的會員服務部號碼或 1-800-565-9140(鑒障專線 (TTY):1-800-848-0298)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Nếu quý vị là hội viên, hãy gọi đến số Dịch vụ Hội viên ở mặt sau thẻ ID Hội viên của quý vị hoặc 1-800-565-9140 (TTY: 1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 가입자의 경우, 가입자 ID 카드 뒷면의 가입자 서비스 전화번호 또는 1-800-565-9140(TTY: 1-800-848-0298) 번으로 전화하시기 바랍니다.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Si vous êtes adhérent, appelez le numéro du Service adhérents indiqué au dos de votre carte d'assuré adhérent ou appelez le 1-800-565-9140 (TTY/ATS : 1-800-848-0298).

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ,ການບໍລິການຊ່ວຍເຫຼືອດຸ້ ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ຖ້າທ່ານເປັນສະມາຊິກ, ໃຫ້ໂທຫາເບີຂອງຝ່າຍບໍລິການສະມາຊິກທີ່ມີຢູ່ດ້ານຫຼັງບັດ ID ສະມາຊິກຂອງທ່ານ ຫຼື 1-800-565-9140 (TTY: 1-800-848-0298).

ማስታወሻ: የሚናንሩት ቋንቋ አማርኛ ከሆን የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጀተዋል፡ አባል ከሆኑ፣ በአባልነት መታወቂያዎ ጀርባ ላይ በሚገኘው የአባላት አንልግሎት ቁጥር ወይም በ 1-800-565-9140 (መስማት ለተሳናቸው፣ TTY: 1-800-848-0298) ይደውሉ።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Falls Sie ein Mitglied sind, rufen Sie die Nummer des Mitgliederdienstes auf der Rückseite Ihrer Mitglieds-ID-Karte oder 1-800-565-9140 (TTY: 1-800-848-0298) an.

સૂચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. જો તમે સભ્ય છો, તો તમારા સભ્ય આઈડી કાર્ડની પાછળના સભ્ય સર્વીસ નંબર ઉપર અથવા 1-800-565-9140 (TTY: 1-800-848-0298) પર કૉલ કરો.

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。 会員のお客様は、会員IDカードの裏面に記載の会員サービス番号あるいは1-800-565-9140 (TTY: 1-800-848-0298)まで、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

Kung ikaw ay isang miyembro, tawagan ang numero ng Serbisyo sa Miyembro na nasa likod ng iyong Kard ng ID ng Miyembro o sa 1-800-565-9140 (TTY: 1-800-848-0298).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। अगर आप सदस्य हैं तो अपने सदस्य आईडी कार्ड के पीछे दिए गए नेवर या 1-800-565-9140 (TTY: 1-800-848-0298) पर सदस्य सेवा नंबर पर फोन करें।

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Если Вы являетесь участником, позвоните в отдел обслуживания участников по номеру, указанному на обратной стороне Вашей идентификационной карты участника, или по номеру 1-800-565-9140 (ТТҮ: 1-800-848-0298).

تَرِجة: الَّمُر به زبان فارسی گَفتگر می کنید، نسیبلات زبانی بصورت رایگان برای سَما فراهم می باشد. درصورتیکه عضو هستید، با سَماره خدمات اعضا در بِسَت کارت سَدَاسایی عضو خود یا 1-800-565-9140 (2028-848-0298) تَماس نماس بگیرید.

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Si ou se yon manm, rele nimewo Sèvis Manm ki sou do kat ID Manm ou an oswa 1-800-565-9140 (TTY: 1-800-848-0298).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Członkowie mogą dzwonić pod numer działu Member Service podany na odwrocie karty identyfikacyjnej członka lub numer 1-800-565-9140 (TTY: 1-800-848-0298).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Caso seja membro, ligue para o telefone do serviço de Atendimento ao Membro informado no verso de seu cartão de identificação de membro ou para 1-800-565-9140 (TTY: 1-800-848-0298).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Se è un membro, chiami il numero del Servizio per i membri riportato sul retro della Sua scheda identificativa del membro oppure il numero 1-800-565-9140 (TTY: 1-800-848-0298).

Dlí baa akó nínízin: Dlí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, él ná hóló.

Naaltsöös bee ná ha'dít'éego, Naaltsoos Bá Hada'dít'éhígíí ninaaltsoos nitł'ízí bee nééhozinígíí bine'déé' Naaltsoos Bá Hada'dít'éhígíí Bee Áka'anída'awo'í bibéésh bee hane'í biká'ígíí bee hodílnih doodago 1-800 -565-9140 (Doo Adinits'agóógo o TTY: 1-800-848-0298) bee hodíilnih.