



P.O. Box 989728  
West Sacramento, CA 95798-9728

<<First Name>> <<Last Name>>  
<<Address1>>  
<<Address2>>  
<<City>>, <<State>> <<Zip>>  
<<Country>>

November 19, 2025

Dear <<First Name>> <<Last Name>>,

At Anchorage Neighborhood Health Center ("ANHC"), we value and respect the privacy of your information. ANHC is writing to notify you regarding potential unauthorized access to or acquisition of your personal information ("Incident"). However, out of an abundance of caution, and in accordance with applicable law, we are providing you this notice so that you can take steps to minimize the risk that your information will be misused. The attached sheets describe steps you can take to protect your identity, credit, and personal information. We take this matter very seriously and sincerely apologize for any concern or inconvenience it may cause you.

In addition, we are offering complimentary identity theft protection services through Experian. Experian's identity protection services include: 24 months of credit monitoring, a \$1,000,000 identity theft insurance policy, and identity restoration services. With this protection, Experian will help you resolve issues if your identity is compromised. We encourage you to contact Experian with any questions and to enroll in free identity protection services by calling <<EXP\_TFN>> or going to <<URL>> and using the Enrollment Code <<ENROLLMENT>> and the engagement number <<Engagement Num>>. Please note the deadline to enroll is <<Deadline>>.

We sincerely apologize for this situation and any concern or inconvenience it may cause you. We are committed to maintaining the security and privacy of the personal information entrusted to us. As part of our ongoing commitment to cybersecurity, and in response to this Incident, we have implemented additional enhancements and continue to regularly assess and strengthen our security measures.

We understand that you may have questions about this incident that are not addressed in this letter. For additional information, please call 1-844-976-2439, Monday through Friday 6:00 AM – 6:00 PM Pacific Time (excluding major U.S. holidays), for assistance or for any further questions you may have. We sincerely apologize for any concern or inconvenience this may have caused.

### **ADDITIONAL RECOMMENDED STEPS**

We recommend you remain vigilant and consider taking the following steps to avoid identity theft, obtain additional information, and protect your personal information:

- The following practices can provide additional safeguards to protect against medical identity theft:
  1. Regularly check the accounts you use regularly to pay for health-related expenses, including bank accounts, health savings accounts, and credit card accounts.
  2. Only share your health insurance cards with your health care providers and other family members who are covered under your insurance plan or who help you with your medical care.
  3. Review your “explanation of benefits statement” which you receive from your health insurance company. Follow up with your insurance company or care provider for any items you do not recognize. If necessary, contact the care provider on the explanation of benefits statement and ask for copies of medical records to current date.
  4. Ask your insurance company for a current year-to-date report of all services paid for you as a beneficiary. Follow up with your insurance company or the care provider for any items you do not recognize.
- Order Your Free Credit Report at [www.annualcreditreport.com](http://www.annualcreditreport.com), call toll-free at 877-322-8228, or complete the Annual Credit Report Request Form on the U.S. Federal Trade Commission's website at [www.ftc.gov](http://www.ftc.gov). When you receive your credit report, review the entire report carefully. Look for any inaccuracies and/or accounts you don't recognize and notify the credit bureaus as soon as possible in the event there are any. You have rights under the federal Fair Credit Reporting Act (“FCRA”). These include, among others, the right to know what is in your file; to dispute incomplete or inaccurate information; and to have consumer reporting agencies correct or delete inaccurate, incomplete, or unverifiable information.
- Under Massachusetts law, you have the right to obtain any police report filed in regard to this incident. If you are the victim of identity theft, you also have the right to file a police report and obtain a copy of it.
- You may also place a security freeze on your credit reports, free of charge. A security freeze prohibits a credit reporting agency from releasing any information from a consumer's credit report without written authorization. However, please be aware that placing a security freeze on your credit report may delay, interfere with, or prevent the timely approval of any requests you make for new loans, credit mortgages, employment, housing, or other services. Under federal law, you cannot be charged to place, lift, or remove a security freeze. You must place your request for a freeze with each of the three major consumer reporting agencies: Equifax, Experian, and TransUnion. To place a security freeze on your credit report, you may send a written request by regular, certified, or overnight mail at the addresses below. You may also place a security freeze through each of the consumer reporting agencies' websites or over the phone, using the contact information below:

Equifax Security Freeze, P.O. Box 105788, Atlanta, GA 30348  
1-800-349-9960  
<https://www.equifax.com/personal/credit-report-services/>

Experian Security Freeze, P.O. Box 9554, Allen, TX 75013  
1-888-397-3742  
<https://www.experian.com/freeze/center.html>

4. If you have moved in the past five (5) years, the addresses where you have lived over the prior five years;
5. Proof of current address, such as a current utility bill, telephone bill, rental agreement, or deed;
6. A legible photocopy of a government issued identification card (state driver's license or ID card, military identification, etc.);
7. Social Security Card, pay stub, or W2;
8. If you are a victim of identity theft, include a copy of either the police report, investigative report, or complaint to a law enforcement agency concerning identity theft.

The credit reporting agencies have one (1) to three (3) business days after receiving your request to place a security freeze on your credit report, based upon the method of your request. The credit bureaus must also send written confirmation to you within five (5) business days and provide you with a unique personal identification number (PIN) or password (or both) that can be used by you to authorize the removal or lifting of the security freeze. It is important to maintain this PIN/password in a secure place, as you will need it to lift or remove the security freeze.

- To lift the security freeze in order to allow a specific entity or individual access to your credit report, you must make a request to each of the credit reporting agencies by mail, through their website, or by phone (using the contact information above). You must provide proper identification (including name, address, and social security number) and the PIN number or password provided to you when you placed the security freeze, as well as the identities of those entities or individuals you would like to receive your credit report. You may also temporarily lift a security freeze for a specified period of time rather than for a specific entity or individual, using the same contact information above. The credit bureaus have between one (1) hour (for requests made online) and three (3) business days (for request made by mail) after receiving your request to lift the security freeze for those identified entities or for the specified period of time.
- To remove the security freeze, you must make a request to each of the credit reporting agencies by mail, through their website, or by phone (using the contact information above). You must provide proper identification (name, address, and social security number) and the PIN number or password provided to you when you placed the security freeze. The credit bureaus have between one (1) hour (for requests made online) and three (3) business days (for requests made by mail) after receiving your request to remove the security freeze.
- Place a Fraud Alert on Your Credit File. In addition to the security freeze detailed above, a fraud alert helps protect you against an identity thief opening new credit in your name. With this alert, when a merchant checks your credit history when you apply for credit, the merchant will receive a notice that you may be a victim of identity theft and to take steps to verify your identity. You can place a fraud alert by contacting the credit bureaus. The credit bureaus may require that you provide proper identification prior to honoring your request.

Equifax	P.O. Box 740241 Atlanta, GA 30374	1-800-525-6285	<a href="http://www.equifax.com">www.equifax.com</a>
Experian	P.O. Box 9532 Allen, TX 75013	1-888-397-3742	<a href="http://www.experian.com">www.experian.com</a>
TransUnion	P.O. Box 2000 Chester, PA 19016	1-800-680-7289	<a href="http://www.transunion.com">www.transunion.com</a>

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security freezes from the consumer reporting agencies, your state Attorney General, and the FTC. If you detect any incident of identity theft or fraud, promptly report the incident to your local law enforcement authorities, your state Attorney General, and/or the Federal Trade Commission. You can learn more about how to protect yourself from becoming an identity theft victim (including how to place a fraud alert or security freeze) by contacting the FTC at 1-877-IDTHEFT (1-877-438-4338), or [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft). The mailing address for the FTC is: Federal Trade Commission, Consumer Response Center, 600 Pennsylvania Avenue, NW Washington, DC 20580.