

🍀 Soliant°

<<Name>> <<Address 1>> <<Address 2>> <<City>><<State>><<Zip>>

Dear <<<Name>>:

We are writing to inform you of a potential data event experienced by Soliant Health, LLC ("Soliant") that may have involved some of your personal information as described below. We take the privacy and security of all information very seriously, and while we have no evidence to suggest that any information was subject to actual or attempted misuse as a result of this incident, this letter includes information about the incident and steps you can take to help protect your information.

The type of information affected included your first name or first initial and last name in combination one or more of the following: Social Security number.

We understand you may have questions about this incident. You may write to us at 5550 Peachtree Parkway, Peachtree Corners, Georgia 30092.

We sincerely regret any concern this incident may cause you. The privacy and security of information is important to us, and we will continue to take steps to protect information in our care.

Sincerely,

Ron Washburn Executive Vice President <<Date>>

STEPS YOU CAN TAKE TO HELP PROTECT YOUR INFORMATION

Activate Identity Monitoring Services

1. Website and Enrollment. Go to <u>https://app.idx.us/account-creation/protect</u> and follow the instructions for enrollment using your Enrollment Code provided at the top of the letter.

2. Activate the credit monitoring provided as part of your IDX identity protection membership. The monitoring included in the membership must be activated to be effective. Note: You must have established credit and access to a computer and the internet to use this service. If you need assistance, IDX will be able to assist you.

3. Telephone. Contact IDX at 1-800-939-4170 to speak with knowledgeable representatives about the appropriate steps to take to protect your credit identity.

Monitor Your Accounts

We encourage you to remain vigilant against incidents of identity theft and fraud by reviewing your credit reports/account statements and explanation of benefits forms for suspicious activity and to detect errors. Under U.S. law, you are entitled to one free credit report annually from each of the three major credit reporting bureaus, TransUnion, Experian, and Equifax. To order your free credit report, visit <u>www.annualcreditreport.com</u> or call 1-877-322-8228. Once you receive your credit report, review it for discrepancies and identify any accounts you did not open or inquiries from creditors that you did not authorize. If you have questions or notice incorrect information, contact the credit reporting bureau.

You have the right to place an initial or extended "fraud alert" on a credit file at no cost. An initial fraud alert is a one-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert lasting seven years. Should you wish to place a fraud alert, please contact any of the three credit reporting bureaus listed below.

As an alternative to a fraud alert, you have the right to place a "credit freeze" on a credit report, which will prohibit a credit bureau from releasing information in the credit report without your express authorization. The credit freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a credit freeze may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit. Pursuant to federal law, you cannot be charged to place or lift a credit freeze on your credit report. To request a credit freeze, you will need to provide the following information:

- 1. Full name (including middle initial as well as Jr., Sr., III, etc.);
- 2. Social Security number;
- 3. Date of birth;
- 4. Address for the prior two to five years;
- 5. Proof of current address, such as a current utility or telephone bill;
- 6. A legible photocopy of a government-issued identification card (e.g., state driver's license or identification card); and
- 7. A copy of either the police report, investigative report, or complaint to a law enforcement agency concerning identity theft, if you are a victim of identity theft.

Should you wish to place a fraud alert or credit freeze, please contact the three major credit reporting bureaus listed below:

TransUnion	Experian	Equifax
1-800-680-7289	1-888-397-3742	1-888-298-0045
www.transunion.com	www.experian.com	www.equifax.com
TransUnion Fraud Alert	Experian Fraud Alert	Equifax Fraud Alert
P.O. Box 2000	P.O. Box 9554	P.O. Box 105069
Chester, PA 19016-2000	Allen, TX 75013	Atlanta, GA 30348-5069
TransUnion Credit Freeze	Experian Credit Freeze	Equifax Credit Freeze
P.O. Box 160	P.O. Box 9554	P.O. Box 105788
Woodlyn, PA 19094	Allen, TX 75013	Atlanta, GA 30348-5788

Additional Information

You can further educate yourself regarding identity theft, fraud alerts, credit freezes, and the steps you can take to protect your personal information by contacting the credit reporting bureaus, the Federal Trade Commission (FTC), or your state Attorney General. The FTC also encourages those who discover that their information has been misused to file a complaint with them. The FTC may be reached at 600 Pennsylvania Ave. NW, Washington, D.C. 20580; <u>www.identitytheft.gov</u>; 1-877-ID-THEFT (1-877-438-4338); and TTY: 1-866-653-4261.

You have the right to file a police report if you ever experience identity theft or fraud. Please note that in order to file a report with law enforcement for identity theft, you will likely need to provide some proof that you have been a victim. Instances of known or suspected identity theft should also be reported to law enforcement, your state Attorney General, and the FTC. This notice has not been delayed by law enforcement.