

DC Health Link
1225 I Street, NW
Suite 400
Washington, DC 20005



RE: NOTICE OF DATA BREACH

We are contacting you about a data breach involving your personally identifiable information (PII).

WHAT HAPPENED

On March 6, 2023, we received notice that data for some DC Health Link customers had been exposed on a public forum. We immediately initiated a comprehensive investigation and are working with forensic investigators and law enforcement. The investigation is ongoing and we will provide more information as we have more to share.

You are receiving this letter because we have determined that your information and information of your family members in your DC Health Link account was exposed.

We are providing credit and identity monitoring protection services that you can access immediately, at no cost to you.

WHAT INFORMATION WAS INVOLVED IN THE DATA BREACH

The personally identifiable information that was exposed included the following:

- Your name and name of your dependents enrolled on DC Health Link, Social Security Number, Date of Birth, Gender, Address, Email, and Phone Number. If your DC Health Link coverage is through an employer, then the employer name and information about the employer and work email.
- Additional information exposed included Plan name, Premium Amount, APTC, Coverage Start and End Dates, Race/Ethnicity, Citizenship, HBX ID

WHAT WE ARE DOING

In addition to immediately initiating a comprehensive investigation and working with forensic investigators and law enforcement, we contracted with Experian to provide the following to DC Health Link customers whose personally identifiable information was exposed:

- 3 years of credit and identity monitoring protection, including tracking through all three credit bureaus and dark web identity monitoring.
- To activate this protection, you must enroll using the codes provided below.

We will also be providing these services to all DC Health Link customers (including those not directly affected by the incident) out of an abundance of caution.

WHAT YOU CAN DO

You can sign up immediately for monitoring services through Experian using the following codes. We encourage you to enroll yourself, as well as all family members and dependents on your account.

Visit the Experian IdentityWorks website to enroll:

- For adult DC Health Link customers (18 and over), go to <https://www.experianidworks.com/3bplus>

- Activation Code: [REDACTED]
 - Engagement Number: [REDACTED]
 - Product: Experian IdentityWorks – Credit Plus 3B
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- For DC Health Link customers who are minors (under 18), go to <https://www.experianidworks.com/minorplus>
 - Activation Code: [REDACTED]
 - Engagement Number: [REDACTED]
 - Product: Experian IdentityWorks – Minor Plus

You will need to provide the **Activation Code** listed above for the adult or minor monitoring services you are selecting.

If you have questions about the product, need assistance with identity restoration or would like an alternative to enrolling in Experian IdentityWorks online, please contact Experian’s customer care team at **(877) 890-9332**. Be prepared to provide the **Engagement Number** listed for your services above as proof of eligibility for the identity restoration services by Experian. If asked for a “Client Name” mention **District of Columbia Health Benefit Exchange Authority**.

You can visit FTC’s website, [IdentityTheft.gov/databreach](https://www.ftc.gov/identitytheft), about steps you can take to help protect yourself from identity theft.

FOR MORE INFORMATION

For all other questions, you may call DC Health Link at (855) 532-5465 (TTY: 711).

Sincerely,
DC Health Link



Get help in your language

This Notice has Important Information. This notice has important information about your application or coverage through DC Health Link. Look for key dates in this notice. You may need to take action by certain deadlines to keep your health coverage or help with costs. You have the right to get this information and help in your language at no cost. Call (855) 532-5465.

Este aviso contiene información importante. Este aviso contiene información importante acerca de su solicitud o su seguro con DC Health Link. Preste atención a las fechas que aparecen en este aviso, puesto que podría ser necesaria alguna acción por su parte antes de determinada fecha a fin de mantener su seguro médico con nosotros o sus ayudas con el coste. Usted tiene derecho a recibir esta información y soporte en su idioma sin coste adicional. Llame al (855) 532-5465.

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本通知包含重要信息。本通知包含有关您通过 DC Health Link 提交申请和保险的重要信息。请查看本通知中的关键日期。您可能需要在特定截止日期前采取行动，以便维持您的健康保险或有助于降低费用。您有权免费以自己的母语获得本信息和帮助。请致电 (855) 532-5465。

Cet avis contient des informations importantes. Cet avis contient des informations importantes au sujet de votre demande ou de la couverture par DC Health Link. Cherchez les dates clés dans cet avis. Vous devrez peut-être prendre des mesures en respectant certaines échéances afin de maintenir votre couverture de santé ou d'assumer des coûts. Vous avez le droit d'obtenir ces informations et d'être aidé dans votre langue sans frais. Appelez le (855) 532-5465.

May Importanteng Impormasyon ang abisong ito. May Importanteng Impormasyon ang abisong ito tungkol sa aplikasyon mo o proteksiyon mo sa DC Health Link. Tingnan ang mga importanteng petsa na nasa abisong ito. Maaaring may mga kailangan kang gawin bago sumapit ang ilang deadline para mapanatili ang proteksiyon mo sa kalusugan o para makatulong sa mga gastusin. Karapatan mong makuha ang impormasyon na ito at makakuha ng tulong na nasa wika mo nang walang gastos. Tumawag sa (855) 532-5465.

В настоящем уведомлении содержится важная информация. В этом уведомлении содержится важная информация о вашем заявлении или страховом покрытии посредством DC Health Link. Посмотрите на ключевые даты в настоящем уведомлении. Вам, возможно, потребуются принять меры к определенным предельным срокам для сохранения страхового покрытия или помощи с расходами. Вы имеете право на бесплатное получение этой информации и помощи на вашем языке. Звоните по телефону (855) 532-5465.

Este aviso contém informações importantes. Este aviso contém informações importantes sobre o seu pedido ou cobertura através da DC Health Link. Procure as datas chave neste aviso. Poderá necessitar de tomar providências dentro de certos prazos para manter a sua cobertura de saúde ou para obter ajuda com custos. Tem o direito de obter estas informações e ajuda no seu idioma sem qualquer custo. Ligue (855) 532-5465.

Questo avviso contiene informazioni importanti. Questo avviso contiene informazioni importanti sulla tua domanda o copertura attraverso DC Health Link. Cerca le date chiave in

questo avviso.

Potrebbe essere necessario un tuo intervento entro una scadenza determinata per consentirti di mantenere la tua copertura o una sovvenzione. Hai il diritto di ottenere queste informazioni e assistenza nella tua lingua gratuitamente. Chiama (855) 532-5465.

Thông báo này có Thông tin Quan trọng. Thông báo này có thông tin quan trọng về đơn hoặc hợp đồng bảo hiểm của bạn qua DC Health Link. Xin xem những ngày quan trọng trong thông báo này. Quý vị có thể phải thực hiện theo đúng thời hạn để duy trì bảo hiểm sức khỏe hoặc giúp đỡ chi phí. Quý vị có quyền được biết thông tin này và được trợ giúp bằng ngôn ngữ của mình miễn phí. Xin gọi số (855) 532-5465.

Libihne lini li gwe banga bi niigana. Libihne lini li gwe banga bi niigana kolbaha ni ndjombi yon tole ma teeda moŋ loŋ ni DC Health Link. Yeŋ ma kel ma tobo tobo munu libihne lini. Bebeg le u ga bana nguim mam i boŋ nwaa le guim di loo di kola i nyu l teda mateda tole nsaa u mboo woŋ. U gwee kundei kosna biniguene bini ni mahola ni hop wong ngui nsaa wogui wo. Sebel l nsinga ini (855) 532-5465.

Ihe Nkwupụta a were ozi di mkpa banyere ya. Ihe Nkwupụta a were ozi di mkpa banyere ya gbasara maka arịrịọ gị ma obu ọgwụgwọ site na DC Health Link. Lee anya maka ụbọchị dị-karịrị mkpa na ihe nkwupụta a. I were ike jchọ ime ihe na ụfọdụ oge mgwucha ka idebe ọgwụgwọ ahụ ike gị ma obu enyemaka na ikwu ụgwọ. Inwere ikike inweta ozi a na enyemaka na asụsụ gị n'efu. Kpọọ (855) 532-5465.

Àkíyèsí yíí ní Ifitoniletí Pàtàkì Nínú. Àkíyèsí yíí ní ifitoniletí pàtàkì nípá lẹta-isèbèèrè tàbí idójútòfò rẹ nípá DC Health Link nínú. Se àwàrí àwọn ọjọ pàtàkì tí n bẹ nínú àkíyèsí yíí. O le ní láti gbe awọn igbese ní íbámu pẹlu awọn ọjọ tó gbeyin kan ní pàtó láti le pa idójútòfò ìlera rẹ tàbí iseranwọ fun ọ mọ pẹlu sísanwo. O ní ẹtọ lati rí iranwọ àti ifitónilétí yíí gbà ní èdè rẹ láisanwó. Pè sórí (855) 532- 5465.

এই নোটিশটোতে পূর্ণ তথ্য আছে। DC Health Link এর মাধ্যমে আপনার আবেদন পূর্ণ বা কভারেজ সীমিত

এই নোটিশে পূর্ণ তথ্য আছে। মূল তারিখগুলির জন্য এই নোটিশটো দেখুন। কিছু নির্দিষ্ট সময়সীমা অক্ষরে

আপনার কভারেজ বা তার মূল্যের ক্ষেত্রে আপনার কোন কমপ্ল্যান্ট করা যোজনা হতে পারে।

আপনার এই তথ্যটি বিনামূল্যে আপনার ভাষায় পাওয়ার অধিকার আছে। (855) 532-5465 নম্বরে কল করুন।

この通知には重要な情報が含まれています。この通知には DC Health Link の申請または補償範囲に関する重要な情報が含まれています。この通知に記載されている重要な日付をご確認ください。健康保険や有料サポートを維持するには、特定の期日までに行動を取らなければならない場合があります。ご希望の言語による情報とサポートが無料で提供されます。(855) 532-5465 までお電話ください。

본 통지서는 중요한 정보를 포함하고 있습니다. 이 통지서는 DC Health Link 관련 귀하 또는 귀하의 보험 적용 대상자에 대한 정보가 들어 있습니다. 이 통지서에 나와 있는 중요 날짜를 참조하시기 바랍니다. 건강 보험을 유지하거나 보험료 지원을 받으시려면 해당 만료일자까지 연장하시기 바랍니다. 이에 대한 정보를 귀하의 언어로 비용 부담없이 지원을 받으실 수 있습니다. 해당 언어의 통역사에게 문의하시려면 (855) 532-5465로 전화하십시오.

ไปประกาศนียบัตร อุตสาหกรรม ไปประกาศนียบัตร อุตสาหกรรม เกี่ยวกับ การสมัครหรือ ขอบเขตประกัน สุขภาพของคุณกับ DC

Health Link โปรดดูกำหนดการในไปประกาศนี้ให้ดี
คุณอาจจะต้องดำเนินการภายในกำหนดระยะเวลาที่สั้นลงเพื่อหลีกเลี่ยงการขอร้องความช่วยเหลือ
เกี่ยวกับค่าใช้จ่าย คุณสมทหรือจะได้รับข้อ มูลและความช่วยเหลือเกี่ยวกับเรื่องนี้ในภาษาของคุณโดยไม่ต้องเสียอะไร โทร (855) 532- 5465

Die Nachricht enthält wichtige Informationen bezüglich Ihres Antrags bei oder Ihres Versicherungsschutzes durch DC Health Link. Suchen Sie nach Schlüsseldaten in dieser Nachricht. Sie müssen eventuell vor einer bestimmten Frist reagieren, um Ihren Versicherungsschutz aufrechtzuerhalten oder um Hilfe bezüglich der Kosten zu erhalten. Sie haben das Recht, diese Information und Hilfe kostenfrei in Ihrer Sprache zu erhalten. Wählen Sie hierfür (855) 532-5465.

يحتوي هذا الإشعار معلومات هامة. يحتوي هذا الإشعار معلومات هامة بخصوص طلبك أو تغطيتك من خلال DC Health Link. ابحث عن التواريخ الهامة في هذا الإشعار. قد تحتاج لاتخاذ اجراء في تواريخ معينة للحفاظ على تغطيتك الصحية او للمساعدة في دفع التكاليف. لك الحق في الحصول على هذه المعلومات والمساعدة بلغتك من دون أي تكلفة. اتصل بـ (855) 532-5465.

The D.C. Health Benefit Exchange Authority (DC HBX) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. This agency does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

DC HBX:

- Provides free support and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact:

DC Health Link Contact Center
Phone: (855) 532-5465
TTY: 711
Email: info@dhealthlink.com

If you believe that the D.C. Health Benefit Exchange Authority 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 in person or by mail, fax, or email. with: Jennifer Libster, Associate General Counsel, D.C. Health Benefit Exchange Authority, 1225 Eye Street NW, Suite 400, Washington DC 20005, (202) 715-7576, TTY: 711, 1557.grievance@dc.gov; Fax: (202) 730-1658. You must file a grievance within 60 days of the date you became aware of the alleged discriminatory action. Jennifer Libster is also available to help you with the grievance filing process.

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
1-800-868-1019, 1-800-537-7697 (TDD).

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.