



September 26, 2008

New York State Consumer Protection Board (CPB)
SECURITY BREACH NOTIFICATION
1740 Broadway, 15th Floor
New York, NY 10019

Dear Sir or Madam:

Attached, please find for your information, a completed NYS Security Breach Reporting Form.

Please do not hesitate to call me on 212.476.1668 if you have any questions.

Sincerely

A handwritten signature in black ink that reads "Chrisan E. Trojian /br". The signature is written in a cursive style.

Chrisan E. Trojian
Government Relations Director
Empire Blue Cross Blue Shield
One Liberty Plaza
NY, NY 10006

A handwritten mark in black ink, resembling a stylized letter 'C' or a checkmark, located below the typed name and title.

NEW YORK STATE SECURITY BREACH REPORTING FORM

Pursuant to the Information Security Breach and Notification Act (General Business Law §899-aa; State Technology Law §208)

Name of Entity: Empire BlueCross Blue Shield

Street Address: 165 Broadway

City: New York State: NY Zip Code: 10006

Sector (please select one): Local Government State Government Federal Government

Not-for-profit Commercial Educational

Type of Business (please select one): Biotech/Pharm Education Financial Services

Health Care Insurance Retail/Internet Telecom. Transportation

Other _____

Persons Affected: Total: 18 Dates Breach Occurred: 7/10/08

NY residents: 17 Breach Discovered: 7/14/08

Consumer Notification: 9/25/08

Reason for delay, if any, in sending notice: Empire was communicating with the mail carrier to locate the missing box.

Description of Breach (please select all that apply): Hacking incident; Inadvertent disclosure;

Stolen computer, CD, tape, etc; Lost computer, CD, tape, etc; Insider wrongdoing;

other (specify): box containing medical records [Attach additional description if necessary]

Information Acquired (please select all that apply): Name; SSN; Driver's license no.;

Account number; Credit or Debit card number; Other (specify): Protected health information.

Manner of Notification to Affected Persons (Attach Copy) Written; Electronic (email);

Telephone; Substitute notice (provide justification). List dates of any previous (within 12 months) breach notifications:

Credit Monitoring or Other Service Offered: Yes; No; Duration: 1 Year

Service: Credit Monitoring Provider: Equifax

Submitted by: Chrishan E. Trojian Title: Government Relations Director

Firm Name (if other than entity): _____

Telephone: 212-476-1688 Email: chrishan.trojian@empireblue.com

Dated: 09/25/08