

**Your claim must
be submitted
online or
postmarked by:
July 8, 2026**

In Re Anne Arundel Data Breach Litigation
Case No. 1:25-cv-02274-GLR
U.S. District Court for the District of Maryland

DATA INCIDENT SETTLEMENT CLAIM FORM

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GENERAL INSTRUCTIONS

Who is eligible to file a Claim? All Settlement Class Members may file a claim. The Court has defined the Settlement Class as: all persons in the United States who provided personal information, including but not limited to PII or PHI, to Anne Arundel Dermatology, P.A. (“AAD”), or about whom AAD otherwise collected, received, or possessed personal information, including but not limited to PII or PHI, on or before December 9, 2025.

Excluded from the Settlement Class are: (i) AAD, any entity in which AAD has a controlling interest, and AAD’s officers, directors, legal representatives, successors, subsidiaries, and assigns; (ii) any judge, justice, or judicial officer presiding over the Actions and the members of their immediate families and judicial staff; and (iii) any individual who timely and validly opts out of the Settlement.

BY EXECUTING THIS CLAIM FORM, YOU ARE GIVING UP YOUR RIGHT TO SUE, CONTINUE TO SUE, OR BE PART OF ANY OTHER LAWSUIT AGAINST AAD AND OTHER RELEASED PARTIES CONCERNING THE CLAIMS RELEASED BY THIS SETTLEMENT.

“Released Parties” include AAD and each of its respective past, present, and future parents, investors, shareholders, divisions, subdivisions, companies, subsidiaries, affiliates, departments, managers, licensees, sublicensees, trustees, creditors, partners, joint venturers, principals, officers, stockholders, directors, employees, staff, agents, representatives, attorneys, predecessors, successors, assigns, assignees, heirs, executors, contractors, vendors, insurers, and reinsurers, including but not limited to any AAD-affiliated physicians, branches, clinics, offices, or medical practices and/or their staff or employees and/or each person acting or purporting to act for them or on their behalf

The Released Claims include any and all past, present, and future liabilities, causes of action, charges, complaints, suits, claims, obligations, costs, losses, damages, statutory fees, rights, judgments, attorneys’ fees, expenses, bonds, bills, penalties, fines, and all other legal responsibilities and compensation of any form whatsoever, whether known or unknown, whether presently existing or arising in the future, whether suspected or unsuspected, whether fixed or contingent, including those arising under any theory of law, whether common, constitutional, statutory, or other of any jurisdiction, foreign or domestic (including but not limited to the laws of the United States, any of the fifty U.S. states, or any subdivision thereof, or the District of Columbia or any U.S. territory), whether in law or in equity, including but not limited to all claims which Releasing Parties asserted or could have asserted in the Actions or the State Action relating to the Data Security Incident and/or AAD’s alleged disclosure of information about prospective and actual patients, including their financial information, actual or potential dermatologists, the clinics they visited or may visit, and their personal identities, without those patients’ (and other persons’) knowledge, authorization, or consent on or before February 20, 2026. The “Releases” section in the Settlement Agreement describes the legal claims that you give up if you remain in the Settlement Class. The entire text of the Settlement Agreement can be viewed at www.AnneArundelPrivacySettlement.com.

AVAILABLE BENEFITS

The Settlement will provide three categories of Settlement benefits. Settlement Class Members whose sensitive information was impacted as a result of the Data Security Incident may submit a claim for either Cash Payment A – Documented Out-of-Pocket Losses up to \$5,000.00 per claimant **OR** Cash Payment B – Alternative *Pro Rata* Cash Payment in the estimated amount of \$100.00. In addition to the Cash Payments, Settlement Class Members may submit a claim for three (3) years of free medical data monitoring regardless of whether the Settlement Class Member submits a claim for Cash Payment A or B.

QUESTIONS? VISIT WWW.ANNEARUNDELPRIVACYSETTLEMENT.COM OR CALL TOLL-FREE 1-844-467-4798

BENEFITS

Free Medical Data Monitoring Service. Settlement Class Members may elect to enroll in credit monitoring and identity theft protection services. All Settlement Class Members are eligible to receive three (3) years of medical data monitoring services, specifically CyEx Medical Shield Complete, which includes the following features:

- (1) real time monitoring of the credit file at one bureau;
- (2) dark web scanning with immediate notification of potential unauthorized use;
- (3) comprehensive public record monitoring;
- (4) medical record monitoring;
- (5) health insurance plan number monitoring;
- (6) medical beneficiary identifier monitoring;
- (7) health savings account monitoring;
- (8) identity theft insurance (no deductible) up to \$1,000,000.00; and
- (9) access to fraud resolution agents to help investigate and resolve instances of identity theft.

Cash Payment A – Documented Out-of-Pocket Losses. If your sensitive information was impacted and you incurred actual, documented out-of-pocket losses due to the Data Security Incident, you may file a claim for reimbursement. The loss must have occurred between February 14, 2025, and July 8, 2026. The maximum amount of this reimbursement is \$5,000.00.

You must provide documentation and an attestation under penalty of perjury related to the Data Security Incident.

This benefit covers out-of-pocket expenses like:

- (1) unreimbursed losses relating to fraud or identity theft;
- (2) bank or other financial institution charges incurred as a result of the Data Security Incident;
- (3) professional fees including attorneys' fees, accountants' fees, and fees for credit repair services;
- (4) costs associated with freezing or unfreezing credit with any credit reporting agency and costs of credit reports;
- (5) credit monitoring costs that were incurred on or after mailing the notice of the cybersecurity incident, through the date of claim submission; and
- (6) miscellaneous expenses such as notary, fax, postage, copying, internet usage, mileage, and long-distance telephone charges;

You must submit documentation, such as receipts, to verify the costs you incurred. You may submit "self-prepared" documents to clarify or support other submitted documentation, but self-prepared documents by themselves are not sufficient to file a valid claim.

Cash Payment B – Alternative *Pro Rata* Cash Payment. In the alternative to Cash Payment A, Settlement Class Members may elect to receive Cash Payment B, which is a *pro rata* cash payment in the estimated amount of \$100.00. All Approved Claims for Alternative Pro Rata Cash Payments (Cash Payment B) will be subject to a *pro rata* increase or decrease from the estimated \$100.00 amount after payment for Approved Claims for Documented Out-of-Pocket Losses (Cash Payment A), any Service Awards awarded to Settlement Class Representatives, any attorneys' fees and costs awarded to Settlement Class Counsel, and all Costs of Notice and Administration. Any *pro rata* adjustments to Cash Payment B will be on an equal percentage basis.

If you have more expenses than rows, you may attach additional sheets of paper to account for them. Please print your name and sign the bottom of each additional sheet of paper.

* If your request for Cash Payment A – Documented Out-of-Pocket Losses is denied, you will receive Cash Payment B – Alternative Pro Rata Cash Payment.

IV. Cash Payment B – Alternative Pro Rata Cash Payment

Check this box if you are claiming the *pro rata* cash payment and did **not** request Cash Payment A – Documented Out-of-Pocket Losses.

V. ATTESTATION & SIGNATURE

I swear and affirm that the information provided in this Claim Form, and any supporting documentation provided is true and correct to the best of my knowledge. I understand that my claim is subject to verification and that I may be asked to provide supplemental information by the Settlement Administrator before my claim is considered complete and valid.

Signature

Printed Name

Date

**THE EASIEST WAY TO SUBMIT YOUR CLAIMS IS ONLINE AT
www.AnneArundelPrivacySettlement.com**

You may also print out and complete this Claim Form, and submit it by U.S. mail to:

AAD Settlement Administrator
P.O. Box 1788
Baton Rouge, LA 70821

The deadline to submit a Claim Form online is **July 8, 2026**. If you are mailing your Claim Form, it must be mailed with a postmark date no later than **July 8, 2026**.

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