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| --- | --- |
| Recently, we sent you a short survey about your experiences with your healthcare provider. If you’ve completed and returned it, thank you! | |
| A doctor talking to a patient  Description automatically generated with medium confidence | If not, CMS hopes that you do so today. CMS is the federal agency that administers the Medicare program, and this survey will help your healthcare provider understand how to improve your health care experience.  If you have any questions, please call the toll-free helpline at [INSERT VENDOR PHONE HERE] or send an email to [INSERT VENDOR EMAIL HERE].  If you cannot respond because of poor health or cognitive or physical limitations, someone like a family member, friend, or caregiver knowledgeable about your care can assist. |
| *Si prefiere la encuesta en español, por favor llame al [INSERT VENDOR PHONE HERE]*. | |
| **Your healthcare provider greatly appreciates your cooperation  with the Medicare Provider Experience Survey!** | |

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| PRESORTED FIRST-CLASS MAIL |

Logo, company name

Description automatically generated

Medicare Provider Experience Survey

[INSERT VENDOR PO BOX HERE]

[INSERT VENDOR CITY, STATE AND ZIP CODE]

<<TOPLINE>>

[FNAME} [LNAME]

[ADDRESS]

[CITY], [STATE] [ZIP]