

## PRENOTIFICATION LETTER

Dear Medicare Beneficiary:

In a few days, you will receive a questionnaire in the mail called the Patient Activation Survey. When it arrives, we would greatly appreciate it if you would take the time, about 15-20 minutes, to fill out this questionnaire.

As a Medicare beneficiary, you deserve to get the highest quality medical care when you need it, from doctors that you trust. The Centers for Medicare & Medicaid Services (CMS), is the federal agency that administers the Medicare program and our responsibility is to ensure that you get that high quality care at a reasonable price. One of the ways we can fulfill that responsibility is to find out directly from you about your experiences.

The questionnaire will be for a survey that CMS is conducting of people with Medicare to learn more about your participation in your health and health care decisions . This survey is called the “Patient Activation Survey.” Your name was selected at random by CMS from all Medicare beneficiaries. The accuracy of the results depends on getting answers from you and other Medicare beneficiaries selected for this survey. This is your opportunity to help us serve you better.

All information you provide will be held in confidence by CMS and is protected by the Privacy Act. **You do not have to participate in this survey. Your help is voluntary, and your decision to participate or not to participate will have no effect on your Medicare benefits.**

We hope that you will take the opportunity to answer the questionnaire and help us to ensure that you get the highest quality care. Your knowledge and experiences could help other Medicare beneficiaries to make more informed health choices.

Abt is a survey research organization working with us to carry out this survey. If you have any questions about the survey, please feel free to call XXX of Abt at 1-800-XXX-XXX.

Thank you for your help with this important survey.

Sincerely,

THANK YOU/REMINDER POST CARD

We recently mailed you a **Patient Activation+ Survey**. Thank you for completing and returning your survey.

If you have not completed the survey, please complete it as soon as possible. Your response is very important to us, and the survey will only take about 20 minutes to complete.

If you have any questions or need help, please call XXXXXX at (toll-free number).