



DEPARTMENT OF VETERANS AFFAIRS

**Veterans Health Administration
810 Vermont Avenue, NW
Washington, DC 20420**

Dear Medical Claims Processor,

This is a reminder that the U.S. Department of Veterans Affairs (VA) would like to gather your opinions on recent changes to the medical claims submission process. Your organization has been identified as a medical provider or claims processor that has submitted a claim to the Financial Services Center under this new process and received payment.

The VA has arranged for a brief online survey to evaluate your experience with the new claims submission process:

{Survey link goes here}

The survey should take no more than 5 minutes to complete. Your participation is voluntary and your individual responses will remain anonymous with no identifiable information collected from you. Your participation is very important in helping us understand the new process and identify areas for improvement.

The OMB control number for this public information request is 2900-XXXX. If you have questions about the survey, please send an email to {TBD EMAIL ADDRESS}

Thank you in advance for your participation!

{NAME OF SPONSOR}

{Organizational Group}

U.S. Department of Veterans Affairs