

## **ATTACHMENT 5D**

### **K-BAP EMAIL INVITATION LETTER**

Dear [Title] [Name],

Thank you for agreeing to participate in the [City Name] HIV survey – a relatively simple, but important project that ultimately seems to improve care for patients in the [City Name] area. We are asking for approximately 20-30 minutes of your time, the time it will take you to answer the questions in your survey.

The Center for Disease Control and Prevention (CDC) has commissioned a special survey of providers to help us learn more about providers' practices as they relate to HIV prevention and treatment in [City Name]. You have been selected as a part of a representative sample of providers in [City Name]. As you may know, [City Name] has one of the highest incidence rates of HIV infections in the nation, and understanding current care practices is critical to preventing new infections. Your feedback is very important to help us understand how HIV is treated in [City Name]. Ultimately, data from this survey can be used to better understand the needs of HIV-at-risk and HIV-infected persons and the effectiveness of care in both preventing new HIV infections and treating HIV-positive persons. We hope that you will answer all of the questions. However, you may refuse to answer any of the questions or stop completing the questionnaire at any time.

Because of your expertise as a provider, your responses are very important to us. You can complete the survey online by clicking the link below. Clicking the link also constitutes your informed consent for participation in this survey. All survey responses will be kept private. Your name and contact information will be kept separate from your survey responses and kept private to the extent allowed by law.

Click here to take the survey: URL

Password:\_\_\_\_\_

We realize that your schedule is extremely busy and that there are many demands for your time. Participating in this survey is voluntary, but we hope you can help us. There is no penalty for declining to participate. Your responses matter, and your participation involves minimal risk. At the end of the survey, you will be given the opportunity to complete a free Continuing Education (CE)-eligible course on HIV prevention and treatment. Within the next year, we may also email you some follow-up questions about any changes in your HIV prevention and treatment practices.

To thank you for your participation, we have mailed \$20.00 in cash as a token of our appreciation for completing the survey. This was mailed on [Date] to:

[Name]

[Practice Address]

If you have any questions about the survey or experience technical difficulties with the online survey and need assistance, please call 877-828-5101 or email the Study Director at [cdc.survey@altarum.org](mailto:cdc.survey@altarum.org). You

may also contact either of the persons listed below with any questions regarding this research study or your participation.

Thank you for your time.

Sincerely,

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