OMB Control Number: 0938-NEW Expiration Date: TBD





Si usted tiene preguntas acerca de esta encuesta o desea recibirla en español, por favor llame al Social & Scientific Systems, Inc. al 1-855-443-2692

[DATE]

ID# [FIRST NAME] [LAST NAME] [ADDRESS] [CITY, STATE AND ZIP]

## IMPORTANT MESSAGE ABOUT YOUR MONTANA HEALTH AND ECONOMIC LIVELIHOOD PARTNERSHIP (HELP) PLAN

Dear [HONORIFIC.] [LAST NAME]:

Would you like to help improve health care and services for the HELP program? As a current or previous member of the Montana Health and Economic Livelihood Partnership (HELP) Plan you have much to share and can make an important contribution to improving this program. This survey is from the Centers for Medicare & Medicaid Services (CMS) and is being conducted by a research firm called Social & Scientific Systems, Inc. Please note that this survey is different from the Blue Cross Blue Shield of Montana HELP Plan participant survey.

Please take a few minutes to complete the survey about the care you currently receive or have received in the HELP program. Your answers will help us improve the health care and services provided. The survey will also help other people learn more about HELP. After completing it, please return it in the enclosed, postage-paid envelope. We will send you a \$10 Visa® gift card to thank you for your participation.

All of your answers are protected by the Federal Privacy Act. No one will be able to link your answers to your identity. Your participation is voluntary and will not affect any health care or benefits you receive. It is important that your answers reflect **your own opinions** about the care you receive.

For your convenience, if you prefer to complete the survey online rather than on paper, you can type the link below into your Internet browser's address bar and use your personal login ID and password to access the survey.

<final link to be inserted later>
Login = ID# Password = ????????

If you have any questions about this survey or wish to receive the survey in Spanish, please call the survey help desk at 1-855-443-2692. Thank you in advance for your willingness to help improve health care and services provided by the HELP program by completing this survey!

Sincerely,

<insert signature image>

Paul Gorrell, PhD Vice President, Health Policy and Data Analysis Social & Scientific Systems, Inc.