
[Month] [Day], [Year]

Dear [R First] [R Last]:

We greatly appreciate your past participation in the Medicare Current Beneficiary Survey (MCBS). Because you have been a part of making the MCBS such a success, we are writing to ask you to reconsider your decision not to continue.

You cannot be replaced in this project because you, and others like you, represent all of the nation's more than 49 million Medicare beneficiaries. The value of the MCBS is that we collect data from the same people *over time* and can understand how changes in health or health care policy are affecting their experiences. We cannot track changes without your participation over time, and dropping out now would decrease the value of your past contributions. We ask for your continued participation so that policymakers and researchers will be fully informed about important health care issues such as:

- The rising cost of health care,
- Access to quality care before and after health care policy changes,
- Satisfaction with services over time, and
- Changes in out-of-pocket expenses.

Your information is always kept private and confidential. The Centers for Medicare & Medicaid Services (CMS) and NORC follow all rules and regulations created by the Privacy Act of 1974, the NORC Institutional Review Board, and the U.S. Office of Management and Budget. Also, we know that your time is valuable and will do everything we can to make your participation as easy as possible.

- We will accommodate your schedule and your needs in order to complete interviews.
- You may always skip questions or sections of the survey if they make you feel uncomfortable.

An NORC interviewer will contact you soon and will do his or her best to answer any questions you may have. You may also learn more about the MCBS by web at www.mcbs.norc.org, email us at mcbs@norc.org, or call [FM 800 Number] to speak with someone directly.

Thank you for your continued support of the Medicare Current Beneficiary Survey.

Sincerely,



William Long
CMS Project Officer
Medicare Current Beneficiary Survey