



DEPARTMENT OF HEALTH & HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

[DATE]

[Facility Director] [or Current Facility Director]
[Facility Name 1]
[Facility Name 2]
[Attn Name]
[Address1] [Address2]
[City], [State] [Postal Code]

Dear [Facility Director]:

I am writing to express my personal appreciation for your facility's participation in the 2019 National Survey of Substance Abuse Treatment Services (N-SSATS).

Your participation helps assure that the results of the 2019 survey are complete and accurate. The information you provided will help SAMHSA, other Federal, state and local agencies, and behavioral health care professionals assess the current availability of substance abuse treatment and services, as well as identify unmet substance abuse client needs in the United States.

We appreciate your support and commitment of time and effort involved in responding to this important national survey.

Thank you again, and I hope we can count on your continued participation in the future.

Sincerely,

Cathie Alderks, Ph.D.

Pashi Alderta

Project Officer

Behavioral Health Services Information System Center for Behavioral Health Statistics and Quality

SAMHSA