

Appendix C.3 Data Collection Pre-Notification Communication
Hospital Administrator Letter

[CMS LETTERHEAD]

[DATE]

[FACILITY ADDRESS]

Dear [HOSPITAL ADMINISTRATOR NAME],

The Centers for Medicare & Medicaid Services (CMS) is conducting a brief telephone survey about quality improvement efforts in hospitals and the types of resources that are helpful in this area. The survey will be conducted among facilities that serve Medicare beneficiaries as part of CMS' efforts to improve the quality of care for beneficiaries. CMS has partnered with Booz Allen Hamilton to conduct this important survey to learn about your facility's quality improvement activities.

Within two weeks, you will be contacted to conduct the survey or to schedule a time to complete it. The survey should take 15 minutes. For this survey, we seek to talk with the person who is most knowledgeable about your facility's participation in programs or other resources used to ensure high-quality healthcare services over the last 18 months.

If your hospital is part of a corporate chain, we would like to interview someone who works at [FACILITY NAME], rather than someone at corporate headquarters who is responsible for healthcare quality for several facilities. If you think that someone other than yourself is more qualified to complete the survey, please inform us when we reach out to you and let us know who we should contact.

We hope [FACILITY NAME] will participate in the survey and provide information that will help CMS improve its programs. You should know that participation in this survey is voluntary. We will be collecting responses from many facilities and reporting only the aggregate results; your name and your organization will never be associated with the findings. What you say on the survey will be held securely and will not in any way affect your facility's relationship with CMS.

Prior to completing the survey, it may be helpful for you to review your facility's processes and protocols for quality improvement of healthcare services.

Please contact [name of contact] at [contact info] if you have any questions or concerns. Thank you in advance for your participation in this important effort.

Sincerely,

[SIGNATURE]