



[Month, Year]

[Mailing ID]  
[Respondent Name]  
[Respondent Address]  
[Respondent City, State Zip]

Dear ["Mr."/"Ms."] [Last Name]:

Thank you for your continued participation in the Medicare Current Beneficiary Survey. The Medicare program is always trying to improve! This survey is an important way for the Centers for Medicare & Medicaid Services to learn about how well Medicare is meeting health care needs of people like you. The data collected are used to understand how Medicare and other sources of coverage help you and your family manage the cost of health care.

Participation in the survey is your way of telling us how Medicare is doing! One of our interviewers will recontact you in [Month, Year]. As you review your health events and speak with your interviewer, you are making a meaningful difference in lives of others like you across the country.

We sincerely thank you for your time and we look forward to speaking with you again soon. If you have any questions, please do not hesitate to contact NORC toll-free at 1-844-777-2151, or by email at [mcbs@norc.org](mailto:mcbs@norc.org).

Sincerely,

A handwritten signature in black ink, appearing to read "Marina Vornovitsky".

Marina Vornovitsky  
Director, Medicare Current Beneficiary Survey  
Centers for Medicare and Medicaid Services