

[Month, Year]

[Respondent Name]

[Respondent Address]

[Respondent City, State Zip]

Dear [Respondent Name]:

Thank you for your [recent/ongoing] participation in the Medicare Current Beneficiary Survey. Within the next few weeks, an interviewer from NORC at the University of Chicago will call you to ask you to take part in **MCBS Pulse,** a special telephone opinion survey for MCBS participants.

Medicare is interested in hearing your opinions on how well the healthcare system is working for you. The interviewer will ask you questions about:

* trust in your health care providers and insurance,
* your use of technology for your medical care, and
* your thoughts on how Medicare could improve healthcare experiences for beneficiaries like you.

This telephone survey will take 15-20 minutes of your time, and your opinion will help Medicare improve health care services for Medicare enrollees like you. Your participation in this special survey is your choice. Your Medicare benefits cannot be affected in any way by your decision to participate or the answers you provide. Your information will be kept private to the extent permitted by law, as prescribed by the Federal Privacy Act of 1974.

If you are unable for any reason to participate in the interview, a friend or relative who knows about your health care decisions can also complete the interview on your behalf.

Answers to frequently asked questions are on the back of this letter. If you have any additional questions, please call NORC toll-free at 1-877-389-3429, or email [mcbs.pulse@norc.org](mailto:mcbs.pulse@norc.org); hours of operation are weekdays from 9 AM to 9 PM CST, Saturday 9 AM to 5 PM, and Sunday 12 PM to 9 PM.

I hope you will be able to help us with this special survey and share your opinions.

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AI-generated content may be incorrect.A picture containing invertebrate, arthropod, dark, ctenophore

Description automatically generated

Marina Vornovitsky, Director

Medicare Current Beneficiary Survey

Centers for Medicare & Medicaid Services