

You have been randomly selected to participate in a brief survey about your recent healthcare visit. Your feedback will improve the quality of healthcare throughout our military community.

We would like to know how easy it was for you to make appointments and get care. How was your experience with the provider and staff? Did you feel listened to? How clearly did the providers explain what you needed to know?

These are the kinds of things that only you can tell us. You'll also have an opportunity to give written feedback about the facility and the provider.

The results from this survey are summarized to evaluate and improve your healthcare. We are committed to providing you with the best quality health care available, and your input will help us achieve this goal.

Please visit the following site to complete your survey:

<https://usdresweb.ipsosinteractive.com/surveys/?pid=S22001388&id=3975825286&PASSWORD=C7ETYKC9>

Note: If clicking does not work, copy and paste the entire URL into your browser.

For your added convenience, you can also complete this survey online at:

<https://joes.ipsosinteractive.com/>

Once there, please enter your survey ID and password:

Survey ID: 3975825286

Password: C7ETYKC9

If you have any questions or concerns about this survey, are unable to access the survey online, or feel you received this message in error, please contact our helpdesk at joes.survey@na.ipsos-research.com or by phone at (800) 280-8116.

Ipsos Sample Identification: 3975825286

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Privacy Advisory: Your contact information was used to ask for your participation in this survey about your recent visit. Your responses are voluntary and your decision to participate or not will not affect your opportunity to receive future medical benefits. Your answers will be held in the strictest confidence and you will not be identified in any release of survey data. The results of this survey compiled and reported in groups only. Any written comments you include will be reviewed, but your personal information will be kept confidential unless you provide contact information. Please note, if during this survey you indicate a direct threat to harm yourself or others, we are required to forward information about that threat to appropriate authorities for action, which will likely include their contacting you.