

Dear Claimant,

Our records indicate that you recently received a Proposed Decision and Order from the Federal Black Lung Program. We are very interested in receiving feedback on your experience with the Federal Black Lung Program. Your participation in the enclosed Customer Experience Survey will help us improve the claimant/customer experience. We appreciate your assistance in helping us determine what is working and what may be improved. The following survey is confidential, and we are not collecting any personal information.

Please return this survey using the enclosed postage paid envelope within 60 days. Thank you for your participation.