DEPARTMENT OF HEALTH & HUMAN SERVICES | CENTERS for MEDICARE & MEDICAID SERVICES

[month year]

Dear [CONTACT NAME]:

We recently contacted you regarding the Medicare Current Beneficiary Survey (MCBS). If you have already completed the survey, thank you for taking the time. If you have not yet completed the survey, you can complete it online at any time that is convenient for you.

Please look for an email invitation (Subject: [EMAIL SUBJECT]) or use the link and PIN below to start the survey.

Link to Survey: [INSERT LINK TO SURVEY]

PIN: [PIN]

You have been invited to participate in the MCBS because one of the people eligible for Medicare and selected for this study resides in your facility. We do not contact facility residents directly, and your participation helps provide an accurate picture of how well the health care needs of people residing in long-term care facilities are being met across the United States.

Your participation is voluntary and will not affect your relationship with programs administered by CMS. Your answers are private, as prescribed by the Privacy Act of 1974. Your cooperation with the MCBS also will not violate HIPAA privacy regulations or impose additional disclosure burdens on your facility.

Please help us in this national effort to improve the Medicare program.

Sincerely,

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

If you would like more information:

Call us at: 1-844-777-2151

Email us at: mcbs@norc.org

Visit us at: norc.org/MCBS or cms.gov/MCBS

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