



<Date>

<Beneficiary or Representative Name>

<Beneficiary or Representative Address>

<Beneficiary or Representative City, State and Zip>

IMPORTANT: <Beneficiary First and Last Name> Starting Hospice

On <NOE Claim Receipt Date>, Medicare received a hospice benefit Notice of Election claim showing that you chose to start hospice care. Hospice provides care focused on managing your pain and symptoms, instead of treatments to cure your terminal illness. **Medicare wants to be sure you're aware that the hospice benefit was started.**

Our records show you chose this hospice provider:

- Hospice name: <Hospice Provider Name>
- Hospice address: <Hospice Address>, <Hospice City, State and Zip>

What to do next:

- If this is correct: you don't need to do anything.
- If this is incorrect: call us at 1-800-MEDICARE (1-800-633-4227) right away to report a "questionable hospice election." TTY users can call 1-877-486-2048.

Get help & more information

For questions about the Medicare hospice benefit or help understanding this notice, call 1-800-MEDICARE (1-800-633-4227). Or visit Medicare.gov and search for "hospice."