

Appendix D.2 Voicemail and Email Messages for Nursing Home Non-respondents

Voicemail Script Sent to Non-Respondents After Launch

Hello, you should have recently received a letter from the Centers for Medicare & Medicaid Services, or CMS, about an important national telephone survey on CMS's quality improvement support services to healthcare providers.

We are calling you on behalf of CMS to schedule a convenient time for you to complete this 20-minute survey.

Please call 844-615-3115 (again, that number is 844-615-3115) to schedule a convenient time when you can complete this important survey or respond to the email which we will send after this call. This is not a phishing attempt. If you are concerned about this being a phishing attempt, there will be a link provided in the coming email where you access confirmation of this survey activity on the CMS website.

We hope you will participate in the survey and provide information that will directly contribute to the choices that CMS leadership makes on services that impact you, your work, and Medicare beneficiaries.

Thank you.

Email Reminder Sent to Non-Respondents After Launch

Dear [Name of Respondent],

You should have recently received a letter from the Centers for Medicare & Medicaid Services, or CMS, about an important national telephone survey being conducted in relation to CMS's quality improvement activities.

This email is a follow-up to the voicemail message that we left previously on behalf of CMS asking for help to complete this 20-minute survey about quality improvement efforts in your nursing home. This survey has been approved by the Office of Management and Budget (OMB), as required by the Paperwork Reduction Act. The OMB approval number for this survey is 0938-xxxx.

You may confirm this is not a phishing attempt via a public message confirming this survey activity posted on the CMS website at this link: {insert link}

This survey is voluntary, but please know that your facility was carefully chosen to ensure that our findings represent different types of facilities across the nation. We hope you will participate in the survey and provide information that will help CMS improve its programs.

Please let us know if there is a preferred time for us to call you to complete this important survey. You can either respond back to this email (CMS.LTCare_QIsurvey@bah.com) or call us at 844-615-3115 to schedule a time that would be convenient for you.

Thank you for your participation in this study.

Best regards,

(Signature to be decided upon)