[FIRST AND LAST NAME]  
[LINE ONE OF ADDRESS]  
[LINE TWO OF ADDRESS (IF ANY)]  
[CITY, STATE ZIP]

Dear [ENROLLEE FIRST AND LAST NAME],

You will soon receive a survey about the care you received through [QHP ISSUER NAME] from July to December 2020. This is your opportunity to help your health plan serve you better. This survey is part of a national ongoing effort to understand the experiences people have with their health plan.

You have been chosen as part of a random sample of people in your health plan. Your answers are important, and we cannot replace you with anyone else. The survey should take you about 12 minutes to complete. **Your participation is voluntary.** However, your answers will help others make important choices about their health care and will help health plans improve the care they provide. We hope you will help us. Your answers will be part of a pool of information from others who are enrolled in your health plan. The information you provide will only be shared with authorized persons. Your health plan will not see your responses.

To save time and paper, you can complete this survey online right now by visiting [**SURVEY URL**]. On this website, you will be asked for this private [TYPE OF LOGIN CREDENTIAL(S)]. You may have received an invitation to your email address. If so, it will take you directly to the same survey.

Respond now at [**SURVEY URL**]

[LOGIN CREDENTIAL(S)]

[QHP ISSUER NAME] contracted with [VENDOR NAME] to conduct this survey. If you have any questions about the survey, call [VENDOR NAME] toll free at (XXX) [XXX-XXXX], between [XX:XX] a.m. and [XX:XX] p.m. [VENDOR LOCAL TIME], Monday through Friday (excluding federal holidays), or email [VENDOR EMAIL].

**Thank you for your help!**

Sincerely,

[SIGNATURE]

[NAME AND TITLE OF SENIOR EXECUTIVE FROM VENDOR or QHP ISSUER]

[VENDOR or QHP ISSUER NAME]

Para solicitar una encuesta en papel y en español, o para responder la encuesta en español por teléfono, llame al número siguiente: (XXX) [XXX-XXXX]. Para responder la encuesta en español por internet, vaya a este sitio web: [**SURVEY URL**] y utilice esta información de acceso privada: [LOGIN CREDENTIAL(S)]

[IF OFFERING IN CHINESE] 如需索取中文版调查问卷，或以中文进行电话调查问卷，请联络：  
(XXX) [XXX-XXXX]。