******

**THANK YOU!**

Dear <Insert Name>,

Thank you for the opportunity to work with you on <*Insert appropriate phrase such as “your Medicare Savings Program application”* >. I hope you will return to our office if we can be of assistance in the future. Here are some other things we can help with:

* Understanding and applying for benefits
* Reading and organizing paperwork
* Appealing denials of benefits
* Reviewing Medicare prescription drug plans
* And more!

***Do you know of other people who could benefit from our services? Please tell them about us or share the enclosed brochure!***

Sincerely,

<YOUR NAME>

<YOUR AGENCY CONTACT INFORMATION HERE>

******

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