

Dear <Insert Patient Name>,

I am excited to share with you that a bill has been introduced in the U.S. Congress, HR 4803, *the Acupuncture for Our Seniors Act*, that would allow Licensed Acupuncturists to become recognized as Medicare providers. This would have a significant impact on patients' access to acupuncture that is performed by licensed acupuncturists, and has the potential to increase future insurance coverage of acupuncture services.

I am gathering testimonials – a collection of comments about the benefits and results of the treatments my patients have received. The sole reason I am here is to help my patients and others achieve their health goals. I am hoping you would be willing to provide a testimonial about your experience with acupuncture that could be shared with legislators, policy makers, or the public, to encourage the passage of HR 4803. I believe that your experience with acupuncture treatments would be an excellent resource for others who are interested in finding out more about the benefits of acupuncture.

These testimonials will be sent to the American Society of Acupuncturists (the “ASA”) for a coordinated effort by the ASA on behalf of the acupuncture profession to lobby for HR 4803, as well as other activities that the ASA believes that will promote the practice of acupuncture. Also, I would like to use these testimonials in connection with other efforts to promote my practice as well as the benefits of acupuncture.

In an attempt to simplify things for you, I have provided you with some key questions to answer in the form below. The form also includes space to write something about your experiences receiving acupuncture, if you would like. Please email the completed testimonial and the signed consent form to: patients4acupuncture@gmail.com. I am very passionate about supporting HR 4803 so that I can continue to help more people reach their health goals by making acupuncture accessible to even more Americans.

There is no obligation to provide a testimonial and your continued care by my practice will not be affected by your decision. Moreover, your decision will not affect in any way coverage you may have for acupuncture services, if any. This is a personal decision and I respect whatever you may decide.

Thank you so much for your time!

Warmest regards,

<Insert Your Name>, <Insert Your Title>