service you receive from the Office of Personnel Management. To date we have not heard from you. In case our other letter did not reach you or has been misplaced, a new questionnaire is enclosed. I urge you to complete it and return it in the enclosed addressed, post-paid envelope.

This survey is completely voluntary and your responses will not affect your eligibility for any Government benefits. However, as you are one of a relatively small number of annuitants randomly selected for this survey, your answers are very important. The high percentage of people who have already returned their questionnaires is encouraging, but we need your opinions too.

If you have any problems or questions regarding this survey questionnaire, please call collect at (202) 606–0283. This is a special phone number we have established just for this survey. Your questions about your claim or the benefits you are receiving should continue to be referred to OPM's Retirement Information Office at (202) 606– 0500.

Thank you for your cooperation.

Sincerely,

James B. King,

Director.

Office of Personnel Management

Client Satisfaction Survey

How Well Has the Office of Personnel Management Served You? Retirement and Insurance Service

Retirement and insurance service

Survey of How Well the Office of Personnel Management Serves Federal Annuitants

Conducted by OPM's Retirement and Insurance Service

Instructions

Please answer the questions on the following pages and return the questionnaire to us in the enclosed envelope. It should take about 25 minutes to finish. If you have trouble filling out this questionnaire, you may have a relative or friend help you. The answers you give, however, should be based on your own feelings and opinions and refer to your experience with the Office of Personnel Management (OPM).

Please return the completed questionnaire in the postage-paid envelope to: U.S. Office of Personnel Management, Client Satisfaction Survey, Room 4316, RIS/QAD, Attention: Dom Marro/Nancy Wolf, 1900 E Street, N.W., Washington, DC 20415.

If you have any questions about this questionnaire, please call collect at (202) 606–0283. We will be happy to help you.

Any questions about your claim or your benefits should be directed to OPM's Retirement Information Office at (202) 606– 0500.

Public Burden Statement

We think providing this information takes an average 25 minutes per response, including the time for reviewing instructions, getting the needed data, and reviewing the requested information. Send comments regarding our estimate or any other aspect of this form, including suggestions for reducing time needed, to the Office of Personnel Management, Reports and Forms Officer, 500 CHP, Washington, DC 20415.

Privacy Act Statement

Title 5, U.S. Code, 83 and 84 authorizes the solicitation of this information. The purpose of this collection of information is to find out how well the Office of Personnel Management is serving the Federal annuitant population. Participation is voluntary for those annuitants who are selected for the survey. The information provided by annuitants will be kept confidential and will not be released outside of the Office of Personnel Management.

Client Satisfaction Survey

Part I

Mail To/From the Office of Personnel Management (OPM).

1. Did you write to OPM regarding retirement or insurance matters within the past 12 months? (Do not include mailing in any forms you may have been asked to complete.)

- (Check One)
- a. □ No (Skip to Question #7)
- b. □ Yes.

2. If you have written to OPM, about how many times in all have you written in the past 12 months?

- (Check One)
- a.

 Once.
- b. \Box Twice.
- c. \Box Three times.
- d. \Box More than 3 times.
- 3. What did you write about?

(Check All That Apply)

- a.
 I asked a general question about my benefits.
- b.

 I asked a specific question about an action that was taken on my annuity account (such as a change in my monthly benefit).
- c. I asked that some action be taken on my annuity account (such as an address change or health benefits change).
- d. I complained or expressed concern about some aspect of the retirement or insurance program (such as the cost of or amount of insurance).
- e. I complained, expressed concern, or followed up on an action that I had requested (such as the amount of time taken to process a requested action).
- f. \Box Other (Please specify.)

4. Why did you choose to write to OPM rather than telephone?

(Check All That Apply)

- a.
 I prefer to write a letter rather than telephone.
- b. \Box I could not get through by telephone.
- d. \Box It is not convenient for me to call OPM during its regular business hours.
- e. I did not want to pay for a long distance telephone call to OPM.
- f.
 Other (Please specify.)

5. Overall, how satisfied or dissatisfied were you with the content of the response to the letter(s) you wrote to OPM within the last 12 months?

- (Check One)
- a. 🗆 Very satisfied.
- b. \Box Generally satisfied.
- c. \Box Neither satisfied nor dissatisfied.
- d. \Box Generally dissatisfied.
- e. \Box Very dissatisfied.
- f. \Box I never received a response.

6. Overall, how satisfied were you with the *amount of time* it took OPM to respond to the letter(s) you wrote within the last 12 months? (Check One)

- a. \Box Very satisfied.
- b. \Box Generally satisfied.
- c.
 Neither satisfied nor dissatisfied.
- d. \Box Generally dissatisfied.
- e.
 □ Very dissatisfied.
- f. \Box I never received a response.

7. OPM mails various informational materials and notices to its annuitant beneficiaries. In general, how easy or difficult to understand is the mail you have received from OPM?

- (Check One)
- a. \Box Very easy to understand.
- c. □ Neither easy nor difficult to understand.
- d.
 □ Generally difficult to understand.
- e. 🗆 Very difficult to understand.

8. What do you usually do with the OPM informational materials and notices sent to you?

- (Check One)
- a. \Box I read all the information that is sent to me.
- b. □ I glance at the notices to see if they apply to me but find that most of them don't.
- c. \Box I glance at the notices and find that most of them do apply to me.
- d. □ I don't read the notices. If there is something I need to know I ask about it.
- e. \Box Other (Please specify.)

9. If you have sought assistance to understand a notice you received from OPM, where did you last seek assistance? (Check One)

- a.
 I did not seek assistance (Skip to Question #11.)
- b. \Box OPM office in Washington, D.C.
- c.
 Another OPM office (that is, not in Washington, D.C.).
- d.
 The agency where I used to work.
- e. \Box Another agency.
- f.
 The National Association of Retired Federal Employees (NARFE).
- g.
 The union that represented me as an employee.
- h. \Box Someone I know who received the same notice.
- i. \Box Friends or family.
- j. 🗆 Other (Please specify.)

10. How satisfied or dissatisfied were you with the help you received from the place noted above? (Check One)