Please email your completed form to the Compliance Department at: customercomments@bbahc.org or mail to: BBAHC Compliance
PO Box 130
Dillingham, Alaska 99576

Bristol Bay Area Health Corporation

Our Mission: We provide quality health care with competence, compassion, and sensitivity.

Customer Comment Form

Today's Date

Thank you for taking the time to complete this questionnaire. Your input is valuable to help us make your experience better.

Our success is based upon our patient recommendations. How likely are you to recommend BBAHC's Hospital or Clinics to your family or friends for their patient care?

☐ Extremely Likely ☐ Very Likely ☐ Neither Likey nor Unlikely ☐ Unlikely ☐ Extremely Unlikey

Are you a Veteran? Yes ☐ No ☐

Our practice values happy, satisfied patients. What could we have done to make your experience with BBAHC's Clinic or Hospital better for you? When leaving a comment, please provide as much information as possible. Include names, addresses, phone numbers, dates, times, places and suggestions. (Use the back of this page if needed.)

If you wish to be contacted regarding the results of your comments, please tell us your name and address. This information will be kept confidential.

Name: _____ Phone: _____

Address: _____

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