

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Subject: 90-Day CPAP Treatment Milestone Achievement

Dear [Patient Name],

Congratulations! Our records indicate that you have successfully reached the 90-day milestone of your CPAP therapy. This is a significant achievement in managing your sleep apnea and improving your overall health.

By consistently using your device, you have met the initial adherence requirements often required by insurance providers. More importantly, you are now on the path to better sleep quality, increased daytime energy, and reduced long-term health risks.

**Next Steps:**

- Continue using your CPAP every night for the full duration of your sleep.
- Check your supplies (mask, filters, and tubing) for wear and tear.
- Schedule a follow-up appointment if you are experiencing any discomfort or technical issues.

We are proud of your commitment to your treatment plan. If you have any questions or need to reorder supplies, please contact our office at [Phone Number].

Keep up the great work!

Sincerely,

[Provider Name]

[Clinic/Facility Name]

[Contact Information]