

Care Management Satisfaction Survey



Please take this survey and tell us how happy you are with your Care Management Team.

1. How happy are you with the help you got from your Care Manager?

- Very happy
- Happy
- Unhappy
- Very unhappy

Please tell us why you feel this way:

2. Did you understand what your Care Manager told you about your health condition?

- Yes – Very well
- Yes – Sometimes
- No – Not really
- No – Not at all

Please tell us why you feel this way:

3. Have you been able to follow any of your Care Manager's health care advice to improve your health?

- Yes – Very well
- Yes – Sometimes
- No – Not really
- No – Not at all

Please tell us why you feel this way:

4. How happy were you with the health goals you worked on with your Care Manager to help you learn about your health conditions?

- Very happy
- Happy
- Unhappy
- Very unhappy

Please tell us why you feel this way:

5. Was your Care Manager free to speak with you at the time you agreed on?

- Always
- Sometimes
- Not often
- Never

Please tell us why you feel this way:

6. Did your Care Manager help you get the health care services you needed?

- Always
- Sometimes
- Not often
- Never

Please tell us why you feel this way:

(continued)

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Put in <<Case Type>>

7. If you needed more services, how happy were you with the help your Care Manager offered?

- Very happy
- Happy
- Unhappy
- Very unhappy

Please tell us why you feel this way:

8. How happy were you with any learning tools your Care Manager gave you?

- Very happy
- Happy
- N/A
- Unhappy
- Very unhappy

Please tell us why you feel this way:

9. Did your Care Manager ask you about your likes, dislikes or beliefs when you talked?

- Yes – Very well
- Yes – Sometimes
- No – Not really
- No – Not at all

Please tell us why you feel this way:

10. How happy overall are you with the help you got from Care Management?

- Very happy
- Happy
- Unhappy
- Very unhappy

Please tell us why you feel this way:

11. Before working with your Care Manager, how was your overall health?

- Good
- Fair
- Poor

12. After working with your Care Manager, how is your overall health?

- Good
- Fair
- Poor

13. Before working with your Care Manager, how well were you able to care for yourself and your family? This includes things like cooking, cleaning, shopping, bathing and dressing.

- Good
- Fair
- Poor

14. After working with your Care Manager, how well are you able to care for yourself and your family? This includes things like cooking, cleaning, shopping, bathing and dressing.

- Good
- Fair
- Poor

Did we do better than you expected?

- Yes
- No

If not, what could we have done better?

Is there anything else about the Care Management program or your Care Manager you would like to share? Please leave your name and phone number if you would like someone to call you about this survey. Thank you for your time.

Name: _____

Phone number: _____