

Medicaid Waiver Survey

Response Definition: Y=Yes N=No DK=Don't Know NA=Not Applicable

- | | Y | N | DK | NA |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| 1. Were you allowed to choose the Agency who helps you at home? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 2. Were papers about the waiver program left in your home? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 3. Does your case manager explain things to you so that you can understand?..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 4. If you ask for something, does your case manger help you get the things you need? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 5. Does the case manager let you know when services are going to be changed or stopped? . | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 6. Does someone call and let you know when the worker is not coming? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 7. If you have a problem, does it get fixed quickly? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 8. Are the workers doing a good job?..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 9. Are workers nice and polite to you? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 10. Do you know how to get help in case of an emergency? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 11. Did you know that Medicaid sometimes provides vouchers to assist with the cost of travel to doctor's visits? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

PLEASE PICK ONE ANSWER FOR EACH QUESTION. WRITE ADDITIONAL COMMENTS BELOW:

Name of person receiving services: .

Name of county you live in:

Name of person filling out this survey:

Are you an advocate, parent, guardian, relative or staff of an agency?

Address:

City: **Zip:**

Telephone Number:



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| 2. Were papers about the waiver program left in your home? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 3. Does your case manager explain things to you so that you can understand?..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
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| 7. If you have a problem, does it get fixed quickly?..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 8. Are the workers doing a good job?..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
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| 1. Were you told what choices you have for school or to live? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 2. Do you know your case manager? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 3. If you ask for something, does the case manager help you get it? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 4. Does the case manager visit you where you live? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 5. If you have a problem, does it get fixed quickly? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 6. Do the people that help you treat you nice? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 7. Do the people that help you do a good job? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 8. Do you feel safe with the people who help you? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 9. Do the people that help you let you learn new things if you want to? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 10. Did you know that Medicaid sometimes provides vouchers to assist with travel to doctor's visits? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 11. Do you get the services you need? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

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	Y	N	DK	NA
1. Did you pick the place you go to school or live?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Do you know your case manager?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. If you ask for something, does the case manager help you get it?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Does the case manager visit you where you live?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. If you have a problem, does it get fixed quickly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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10. Did you know that Medicaid sometimes provides assistance with the cost of travel to doctor's visits?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Do you get the services you need?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Name of county you live in:

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Name of person filling out this survey:

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Are you an advocate, parent, guardian, relative or staff of an agency?

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Telephone Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--





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| 8. Are the workers doing a good job?..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
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| 1. Were you allowed to choose the Agency who helps you at home? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 2. Did the case manager provide information about services? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 3. Does your case manager explain things to you so that you can understand? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
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| 9. Are the workers nice and polite to you? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 10. Do you know how to get help in case of an emergency? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 11. Were the private duty nursing services provided on time?..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 12. Were personal care/attendant services provided on time?..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 13. Were medical supplies provided as needed? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 14. Does assisted technology (equipment) work properly? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 15. Are you satisfied with Alabama Medicaid's TA Waiver Program? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

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