











As a managing employer in the CDASS program, please rate the services provided to you by the Financial Management Services (FMS) vendor you were affiliated with throughout the majority of 2023.

Please rate your experiences, using a 5 to 1 scale, with 5 being best (Excellent/Most Satisfied) and 1 being worst (Very Poor/Least Satisfied). Use N/A if the question does not apply. A place for comments has been provided on the back of the survey. Please complete the survey below and return it in the envelope provided by May 10, 2024.

For best results, please use <b>BLACK</b> ink. Fill circles in like	e this: 🔍 Not 1	ike this:(🗘) 🕻	
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2. Please rate trainings and/or resources provided by your FMS at enrollment.	Always 5	<b>S</b>	ometim 3	es 2	Never 1	N/A
Enrollment materials are easy to read/understand.			0			<u> </u>
Training I received about how my attendant/s track and submit		O	O	O	O	O
their work hours was helpful.	- O	0	0	0	0	0
I know how to contact my FMS if I have questions.  The enrollment process for myself and my attendant/s was	0	0	0	0	0	0
easy to complete.	- O	0	0	0	0	0

<b>3.</b> Please rate the assistance provided by your FMS to the questions	Excellent	t	Average		Very Po	or
you have about online resources.	5	4	3	2	1	N/A
Using my FMS' website.	0	0	0	0	0	0
Online or mobile app timesheet submission.	0	0	0	0	0	0

<b>4.</b> When contacting your FMS with a question or concern, staff	Always	So	ometim	es	Never	
members	5	4	3	2	1	N/A
Are respectful?	- 0	0	0	0	0	0
Answer the phone?	0	0	0	0	0	0
Return your call or email within one (1) business day?	. 0	0	0	0	0	0
Clearly answer your question or concern?	- 0	0	0	0	0	0

<b>5.</b> Please rate these services provided by your FMS.	Excelle	nt	Averag	e	Very Po	or
	5_	4	3	2	1	N/A
Assistance completing FMS enrollment paperwork.		0	0	0	0	0
Timeliness in processing FMS enrollment paperwork.		0	0	0	0	0
Paying your Attendants - on time.	O	0	0	0	0	0
Paying your Attendants - accurately.	O	0	0	0	0	0
Providing accurate and timely tax documentation.		0	Ο	0	0	0

This survey is administered by Consumer Direct Care Network Colorado. If you have questions about this survey, please call us at 1-844-381-4433 for assistance.

	Very Satisfied		Neither Satisfied No Dissatisfied		Very Dissatisfie	ed –
<b>6.</b> My overall satisfaction with my FMS can be described as:	<b>5</b> O	<b>4</b>	<b>3</b>	0	<b>1</b>	N/A
7. Federal law requires attendants to use Electronic Visit Verification (EVV) for clocking in and out of work shifts. Colorado FMS' provide three (3) EVV technologies: Mobile App, Telephony, and FMS Porta Please rate your satisfaction with your FMS' EVV technologies and services:	e	ly 4	Neither Agree Nor Disagree 3	. 2	Strongly Disagree 1	
I was adequately prepared to use my FMS' EVV technologies.	O	0	0	0	0	0
All of my FMS' EVV technologies are accessible to my attendants.	- O	0	0	0	0	0
All of my FMS' EVV technologies are easy to use.	<b>—</b> 0	0	0	0	0	0
The EVV Mobile App my FMS uses has been reliable.	_ o	0	0	0	0	0
EVV Support Services provided by my FMS has been helpful.	<b>–</b> 0	0	0	0	0	0
Please use this space for any additional feedback about your experience that your comments will not be read immediately by your FMS vendo please contact your FMS customer service center directly.		_	•			;

Name (Optional\*) - please print:

Member O Authorized Representative O

Who completed this survey? \*Do not write your name if you'd prefer that your comments remain anonymous.

If you have additional comments or suggestions, please submit them on another piece of paper with this survey.

Thank you for completing this survey.

Your responses will help improve the CDASS Program! Please return in the enclosed envelope by May 10, 2024



