

The following survey has been designed to collect your honest feedback about the assessment recently performed. Participation in this survey is completely voluntary and all responses remain confidential. The information gathered through this survey will be used anonymously by the Maine Assessing Services Agency (ASA) and the State of Maine's Department of Health and Human Services, through the Office of Aging and Disability (OADS).

If you have any questions about Maine ASA services, we invite you to learn more on the Maximus website: <https://maximus.com/svcs/maine>. For specific questions about submission of this survey, please contact the Maine ASA Help Desk for more information by email: Ask-MaineASA@maximus.com or by phone: 833.525.5784.

Thank you for your assistance by sharing your valuable feedback.

Customer Satisfaction Survey

Assessor's name: _____

Name of person completing this survey: _____

Relationship to person who received the assessment:

Self Legal Guardian Caregiver Family Other (please specify)

Assessment Date & Time __/__/__ __:__ am/pm

Did the assessment start on time?




Yes No, and I was notified that the assessment would be delayed or postponed No, and I was NOT notified that the assessment would be delayed or postponed

How long was the assessment?

Less than 1 hour 1 - 1.5 hours 1.5 - 2 hours 2 - 2.5 hours 2.5 - 3 hours More than 3 hours

Assessment type:

Telephone In person Zoom

Rate your agreement with the following statements:	1 Disagree 	2 Somewhat Disagree	3 Neutral 	4 Somewhat Agree	5 Agree 
The customer service representative was professional and courteous.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The customer service representative was knowledgeable about the intake and assessment process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The assessment occurred at a time, date, and location that worked well for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The assessor was knowledgeable about the assessment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The assessor was able to answer my questions regarding the assessment and my home care options.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The assessor treated me with dignity and respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The assessor showed interest and took the time to learn about my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After the assessment was complete, I felt like my care needs were understood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At the end of the assessment, the assessor clearly explained what types of care I would be eligible for and what options are available for my care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

You can also submit a survey online at: <https://www.surveymonkey.com/r/MEASA2122>

We welcome any additional feedback regarding the assessment, the assessor, scheduling, etc. If you would like to be contacted about your assessment experience, please provide your name and contact information by email: Ask-MaineASA@maximus.com or call us at: **833.525.5784**