



Enhanced Care Management (ECM) Member Satisfaction Survey

We would like your feedback about your experience with Enhanced Care Management (ECM) and the ECM staff at the facility where you received care. Your feedback is important to us. Your feedback will help us determine what has worked well for you and where we can improve in supporting our members. Your answers are private.

Please give an answer to each question below:

1. I am satisfied with the ECM provider that has helped me manage my health challenges. I feel that they understand my needs and provide me with timely support.
☐ 3 – Agree
☐ 2 – Neutral
☐ 1 – Disagree
2. I am satisfied with the services I received from my ECM lead care manager (services may have included: meals, personal care, transportation, mental health, etc.).
☐ 3 – Agree
☐ 2 – Neutral
☐ 1 – Disagree
3. I am confident in the abilities of my ECM team who have supported me (the team may have included nurse, social worker, physical therapist, occupational therapist, etc.).
☐ 3 – Agree
☐ 2 – Neutral
☐ 1 – Disagree
4. My ECM lead care manager, ECM provider, and the members of my ECM care team treat me with dignity, respect, and listens to my concerns.
☐ 3 – Agree
☐ 2 – Neutral
☐ 1 – Disagree
5. My team referred me to medical and community resources that were valuable and helped me.
☐ 3 – Agree
☐ 2 – Neutral
☐ 1 – Disagree
6. After working with the ECM lead care manager and provider, I feel I can better maintain my personal independence.
☐ 3 – Agree
☐ 2 – Neutral
☐ 1 – Disagree
☐ N/A – personal independence was not a health challenge of mine

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7. After working with the ECM lead care manager and provider, I have a better understanding of my medications.
- ☐ 3 – Agree
 - ☐ 2 – Neutral
 - ☐ 1 – Disagree
 - ☐ N/A – I don't take medications and/or understanding my medications was not a health challenge of mine
8. My health has improved since working with the ECM lead care manager and provider.
- ☐ 3 – Agree
 - ☐ 2 – Neutral
 - ☐ 1 – Disagree
9. My relationship with my primary care provider (PCP) has improved since working with the ECM lead care manager and provider.
- ☐ 3 – Agree
 - ☐ 2 – Neutral
 - ☐ 1 – Disagree
10. I feel that my providers and I work better together since working with the ECM lead care manager and provider.
- ☐ 3 – Agree
 - ☐ 2 – Neutral
 - ☐ 1 – Disagree
11. I have had more success in reaching my health goals since working with the ECM lead care manager and provider.
- ☐ 3 – Agree
 - ☐ 2 – Neutral
 - ☐ 1 – Disagree
12. Additional Comments:
- Is there anything else you wish to share about your experience with ECM?