```
        +------------------------------------------+
        |       LOCAL COMMISSIONERS MEMORANDUM      |
        +------------------------------------------+
              DSS-4037EL (Rev. 9/89)
                                    Transmittal No:  95 LCM-60

                                    Date:  June 1, 1995

                                    Division:  Management Support &
                                               Quality Improvement
```

   TO: Local District Commissioners

   SUBJECT: Questionnaire for claiming process

   ATTACHMENTS: Claiming Questions Form (available on-line)

Attached is a questionnaire created by the Automated Claiming System task
force which was formed to make recommendations on the redesign of the
financial claiming process.   The goal of the group is to make claims data
entry easier, more straightforward, and to provide more financial
information through user-friendly inquiry.

As users of the system your input is very much needed to help identify the
main areas of concern.

We would appreciate it if the staff responding to this questionnaire be
those most involved with the claiming system.   This would probably be the
Accounting Supervisor and/or the persons directly responsible for each
claim.   Please duplicate the attached questionnaire as necessary and return
all completed questionnaires by June 30, 1995 to:

            Bureau of Local Financial Operations
            ATTN: Dennis Lassi
            Floor 8C
            40 N. Pearl Street
            Albany, NY 12243

   Thank you very much for your cooperation and input.

                              _____
                              John M. Sweeney
                              Assistant Commissioner
                              Office of Financial Management

Organizational Identifier

Local District _____
                        (county)

1) Should the certification documents be produced as part of initial or
    final accept?

    +-+
    +-+ Initial
    +-+
    +-+ Final

2) Are the claim schedules disabled so frequently that it affects your
    work schedule?

    +-+
    +-+ Often   two weeks a month
    +-+
    +-+ Sometimes   one week a month
    +-+
    +-+ Slightly   two days a month
    +-+
    +-+ Never   less then one day a month

3) Besides the work of using the claiming system, for what percentage of
    the claim schedules do you find yourself manually preparing the claim
    forms?

    +-+
    +-+ All Schedules   100% of all claim schedules
    +-+
    +-+ Most Schedules   75% of all claim schedules
    +-+
    +-+ Some Schedules   50% of all claim schedules
    +-+
    +-+ A few Schedules   25% of all claim schedules
    +-+
    +-+ None   No claims are prepared manually

4)   Do you find the BICS/ACS interface useful or unnecessary?
      +-+
      +-+ Very usefulful
      +-+
      +-+ Somewhat useful
      +-+
      +-+ Slightly useful
      +-+
      +-+ Not useful at all
      +-+
      +-+ It is very confusing

5)   Is the information well displayed and useful on the inquiry screens?

      +-+
      +-+ The information is very well displayed
      +-+
      +-+ The information is somewhat well displayed
      +-+
      +-+ The information is very hard to read

6)   How long does it take to complete the monthly claim schedules in ACS?

      +-+
      +-+ 1 day a month
      +-+
      +-+ 3 days a month
      +-+
      +-+ 5 days a month
      +-+
      +-+ 10 days a month
      +-+
      +-+ 15 days a month
      +-+
      +-+ 20 days a month
      +-+
      +-+ 25 days a month
      +-+
      +-+ 30 days a month

7)   Would it be useful for the system to generate a General Ledger?

      +-+
      +-+ Very useful
      +-+
      +-+ Often Useful
      +-+
      +-+ Sometimes useful
      +-+
      +-+ Not useful

8)   How often do you inquire into the Automated Claiming System?
     +-+
     +-+ Never
     +-+
     +-+ Seldom   2 times a month
     +-+
     +-+ Regularly   5 times a month
     +-+
     +-+ Often   10 times a month
     +-+
     +-+ A great deal   25 times a month

9)   How often do you inquire about payment/settlement data not on the
     Automated Claiming System?

     +-+
     +-+ Never
     +-+
     +-+ Seldom   2 times a month
     +-+
     +-+ Regularly   5 times a month
     +-+
     +-+ Often   10 times a month
     +-+
     +-+ A great deal   25 times a month

10) If the payment/settlement data is not on the Automated Claiming System,
     how do you get the information?

     +-+
     +-+ Written Report from another Office
     +-+
     +-+ Phone call to Appropriate Staff
     +-+
     +-+ Access to various Microsystem
     +-+
     +-+ Other   _____

11) Would it be helpful to have current payment/settlement information
     available on the Automated Claiming System?

     +-+
     +-+ Yes
     +-+
     +-+ No

12) Would it be useful to have a history of payment/settlement information available on the Automated Claiming System?

    +-+
    +-+ Very Useful
    +-+
    +-+ Often Useful
    +-+
    +-+ Sometimes Useful
    +-+
    +-+ Not Useful

13) Do you find that the current format of the Notice of Claim Settlement is?

    +-+
    +-+ Very Useful
    +-+
    +-+ Somewhat Useful
    +-+
    +-+ Slightly Useful
    +-+
    +-+ Not Useful at all
    +-+
    +-+ It is very Confusing

14) Do you find that the current process of mailing of notice of claim settlements is?
    +-+
    +-+ Adequate
    +-+
    +-+ Needs Improvement

15) Would it be useful to have ceiling data available on the Automated Claiming System?

    +-+
    +-+ Very Useful
    +-+
    +-+ Somewhat Useful

The following items have been identified as possible problems/shortcomings within the current automated claiming system. Please indicate whether or not you have any concerns with these areas, and rate them in order of importance to you. Use a scale of 1-8 with #1 having the highest priority.

Rating (1-8)

1. The claim schedules are time consuming to prepare   _____

2. The system is down frequently   _____

3. The BICS/ACS interface is useful   _____

4. The Certification should be at final accept   _____

5. The system should generate a General Ledger   _____

6. The system should generate a Claims Register   _____

7. There is not enough inquiry available   _____

8. The screens are hard to read. (i.e. no comas)   _____

Additional Comments/Problems/Concerns:

_____

_____

_____

_____

_____

_____

_____

```
+------------------------------------------+
¦          LOCAL COMMISSIONERS MEMORANDUM        ¦
+------------------------------------------+
          DSS-4037EL (Rev. 9/89)
                                    Transmittal No:

                                    Date:

                                    Division:  Management Support &
                                               Quality Improvement

     TO:       Local District Commissioners

     SUBJECT:  Questionnaire for claiming process


     ATTACHMENTS:  Claiming Questions Form
```

Attached is a questionnaire created by the Automated Claiming System task force which was formed to make recommendations on the redesign of the financial claiming process. The goal of the group is to make claims data entry easier, more straightforward, and to provide more financial information through user-friendly inquiry.

As users of the system your input is very much needed to help identify the main areas of concern.

We would appreciate it if the staff responding to this questionnaire be those most involved with the claiming system. This would probably be the Accounting Supervisor and/or the persons directly responsible for each claim. Please duplicate the attached questionnaire as necessary and return all completed questionnaires by June 30, 1995 to:

          Bureau of Local Financial Operations
          ATTN: Dennis Lassi
          Floor 8C
          40 N. Pearl Street
          Albany, NY 12243

     Thank you very much for your cooperation and input.

                              _____
                              John M. Sweeney
                              Assistant Commissioner
                              Office of Financial Management