

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0960-0788)

TITLE OF INFORMATION COLLECTION: Electronic Payment Customer Satisfaction Survey

PURPOSE:

To find ways of improving customer satisfaction with electronic payment of Supplemental Security Income (SSI) payments and Old Age, Survivors, and Disability Insurance (OASDI) benefits and to better understand why some claimants are reluctant to receive electronic payment.

- SSA would like to survey OASDI and SSI applicants who decline using electronic payment on their opinions and experiences with electronic payment; ease or difficulties in enrolling for electronic payment; and reluctance or barriers that might exist to enrolling for or using electronic payment.
- SSA plans to use the survey data to evaluate customer satisfaction with direct deposit and Direct Express programs and to evaluate the degree to which these programs seem capable of meeting customers’ needs.

DESCRIPTION OF RESPONDENTS:

SSA’s field-office staff will survey applicants and representative payees who decline to enroll for electronic payment during the claimant’s initial application for OASDI or SSI. The collection of survey data will occur

- *only* in a sample of field offices (selected randomly nationwide) and
- *only* when the potential respondent comes in contact with the field office in the *natural* course of filing a claim.

Participation in the survey will be voluntary.

TYPE OF COLLECTION: (Check one)

- | | |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> Other: _____ |

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other Federal agencies. (While SSA is conducting this survey in response to the upcoming deadline requiring Federal benefit-check recipients’ switch to electronic payments, findings from this activity should not compromise compliance with the Department of Treasury electronic payment initiative.)

4. The results are not intended to be disseminated to the public. SSA does not intend to release a formal report regarding this survey. However, summary results may be discussed at a future congressional hearing on this subject.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: **Faye Lipsky, Reports Clearance Officer, Social Security Administration**

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? [] Yes [X] No
2. If yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [] Yes [] No
3. If applicable, has a System of Records Notice been published? [] Yes [] No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [] Yes [X] No

BURDEN HOURS

Category of Respondent	Number of Respondents ¹	Participation Time (minutes)	Burden (hours)
Individuals	4,000	2	133
Totals			133

FEDERAL COST: The estimated cost to the Federal government is \$18,500. We plan to conduct the survey only once.

The selection of your targeted respondents

1. Do you have a customer list or something similar that defines the universe of potential respondents? [] Yes [X] No
Do you have a sampling plan for selecting from this universe? [X] Yes [] No

Sampling plan:

We will draw a random sample of about 300 of our field offices nationwide. During the 8-week survey period, we will ask the staff of these offices to pose the survey questions to each OASDI

¹ Roughly 12,000,000 initial claims per year
 × 8 weeks in survey period / 52 weeks per year
 × 300 field offices participating / about 1260 field offices total
 × average 6% refusal-rate for electronic payment
 × estimated 15% response rate (for interviewers and claimants compounded)
 ≈ 4,000 respondents

or SSI claimant or representative payee who declines electronic payment 1) when filing a claim in person or by telephone or 2) when following up on an Internet claim. We plan to conduct this survey only once, probably during February and March 2013.

Our field staff will enter the survey data into an intranet-based form. This form will automatically capture additional information (e.g., an identifier for the office submitting each response). We will use the survey data to estimate, for each of several subpopulations, the proportion of individuals citing each of several reasons for refusing electronic payment.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)

- Web-based or other forms of Social Media
- Telephone
- In-person
- Mail
- Other, Explain

2. Will interviewers or facilitators be used? Yes No