

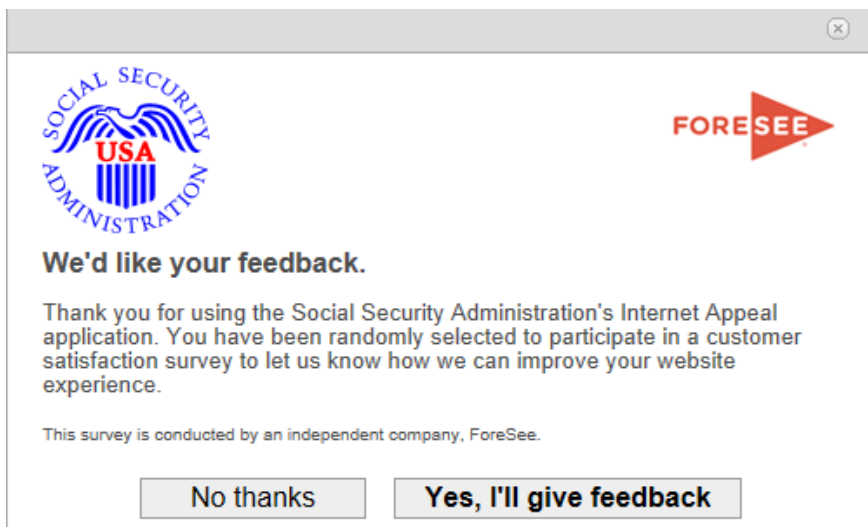
Note: Changes to the invitation text will require an update to the foresee-surveydef.j

Survey Invitation Text

Thank you for using the Social Security Administration's ~~Internet Appeal application~~ --> [online disability appeal](#). You have been randomly selected to participate in a customer satisfaction survey to let us know how we can improve your website experience.

s file. Upon request ForeSee can provide an updated file for SSA to implement.

SSA iAppeals Invitation Text



The image shows a screenshot of a web-based invitation text box. At the top left is the Social Security Administration logo, featuring an eagle with wings spread, holding a shield with the letters 'USA' on it, surrounded by the words 'SOCIAL SECURITY ADMINISTRATION'. To the right of the logo is the ForeSee logo, which consists of the word 'FORESEE' in a bold, sans-serif font next to a red arrow pointing to the right. Below the logos, the text reads: 'We'd like your feedback.' followed by a paragraph: 'Thank you for using the Social Security Administration's Internet Appeal application. You have been randomly selected to participate in a customer satisfaction survey to let us know how we can improve your website experience.' Below this paragraph is a smaller line of text: 'This survey is conducted by an independent company, ForeSee.' At the bottom of the box are two buttons: 'No thanks' and 'Yes, I'll give feedback'.

SOCIAL SECURITY ADMINISTRATION

FORESEE

We'd like your feedback.

Thank you for using the Social Security Administration's Internet Appeal application. You have been randomly selected to participate in a customer satisfaction survey to let us know how we can improve your website experience.

This survey is conducted by an independent company, ForeSee.

No thanks **Yes, I'll give feedback**

Model Instance Name:

SSA - iAppeals

MID: ZpNoNJE50NYgMZApls95Eg==

Date: 8/11/2010



Welcome and Thank You Text

Directions:

This welcome text is shown at the top of the questionnaire window and the thank you text at the bottom. This is a good place to mention the site/company/agency name so the visitor knows whom they are taking the survey for. Feel free to modify the standard Welcome text shown in the box below. These changes will be done by ForeSee.

Welcome Text

Thanks for using the Social Security Administration's online disability appeal. You've been randomly chosen to take part in a brief survey to let us know what we're doing well and where we can improve.

Please take a few minutes to share your opinions, which are essential in helping us provide the best online experience possible.

Thank You Text

Thank you for taking our survey - and for helping us serve you better.

Please note you will not receive a response from us based on your survey comments. If you would like us to contact you about your feedback, please visit the Contact Us section of our web site, <http://www.socialsecurity.gov/pgm/reach.htm>

SSA iAppeals Welcome Text



Customer Satisfaction Survey

Thanks for using the Social Security Administration's Internet Appeal application. You've been randomly chosen to take part in a brief survey to let us know what we're doing well and where we can improve.

Please take a few minutes to share your opinions, which are essential in helping us provide the best online experience possible.

Required questions are denoted by an *



1: *Please rate the **visual appeal** of the SSA Internet Appeal forms.

1=Poor Excellent=10
1 2 3 4 5 6 7 8 9 10 Don't Know

2: *Please rate the **balance of graphics and text** on the SSA Internet Appeal forms.

1=Poor Excellent=10
1 2 3 4 5 6 7 8 9 10 Don't Know

Thank You Text Example

20: *How would you rate the amount of time it took you to complete your Internet Appeal?

- Less than you expected
- About what you expected
- More than you expected
- Haven't completed the form yet

21: Now that you have used the Internet Appeal process, what specific improvements, if any, would you recommend?

1,000 Characters Remaining

Thank you for taking our survey - and for helping us serve you better.

Please note you will not receive a response from us based on your survey comments. If you would like us to contact you about your feedback, please visit the Contact Us section of our web site, <http://www.socialsecurity.gov/pgm/reach.htm>

Cancel

Submit

Copyright 2013 - all rights reserved
OMB Control # 1090-0008
[ForeSee](#) [Privacy](#) [Survey Support](#)

Model Instance Name:

SSA - iAppeals

MID: ZpNoNJE50NYgMZApls95Eg==

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Directions:

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Welcome Text

Thanks for using the Social Security Administration's **Internet Appeal application** --> **online disability appeal**. You've been randomly chosen to take part in a brief survey to let us know what we're doing well and where we can improve.

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Thank You Text

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SSA iAppeals Welcome Text



Customer Satisfaction Survey

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1: *Please rate the **visual appeal** of the SSA Internet Appeal forms.

1=Poor Excellent=10
1 2 3 4 5 6 7 8 9 10 Don't Know

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- More than you expected
- Haven't completed the form yet

21: Now that you have used the Internet Appeal process, what specific improvements, if any, would you recommend?

1,000 Characters Remaining

Thank you for taking our survey - and for helping us serve you better.

Please note you will not receive a response from us based on your survey comments. If you would like us to contact you about your feedback, please visit the Contact Us section of our web site, <http://www.socialsecurity.gov/pgm/reach.htm>

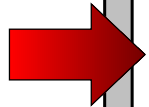
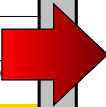
Cancel

Submit

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OMB Control # 1090-0008
[ForeSee](#) [Privacy](#) [Survey Support](#)

Model questions utilize the ACSI methodology to determine scores and impacts

ELEMENTS (drivers of satisfaction)	CUSTOMER SATISFACTION	FUTURE BEHAVIORS
Look and Feel (1=Poor, 10=Excellent, Don't Know)	Satisfaction	Use other online applications (1=Very Unlikely, 10=Very Likely)
Please rate the visual appeal of the online disability appeal.	What is your overall satisfaction with the online disability appeal? <i>(1=Very Dissatisfied, 10=Very Satisfied)</i>	How likely are you to use other on-line applications/forms on the Social Security web site?
Please rate the balance of graphics and text on the online disability appeal.	How well does the online disability appeal meet your expectations ? <i>(1= Falls Short, 10=Exceeds)</i>	
Please rate the readability of the pages on the online disability appeal.	How does the online disability appeal compare to your idea of an ideal online form ? <i>(1=Not Very Close, 10=Very Close)</i>	
Site Performance (1=Poor, 10=Excellent, Don't Know)		
Please rate how quickly pages load on the online disability appeal.		
Please rate the consistency of speed from page to page of the online disability appeal.		
Please rate the ability to load pages without getting error messages of the online disability appeal.		
Online Application Process (1=Poor, 10=Excellent, Don't Know)		
Please rate the clarity of the instructions to complete the online disability appeal.		
Please rate the simplicity of completing the online disability appeal.		
Please rate the number of steps for entering the information into the online disability appeal.		



Model Instance Name:
iAppeals v2

MID: Existing Measure - Please fill in; New Measure - DOT will fill in

Partitioned (Y/N)? N

FPI Included(Y/N)?

NOTE: All non-partitioned surveys will NOT be imputed and the elements will be rotated as a default unless otherwise specified and approved by Research.

Date: 6/12/2013

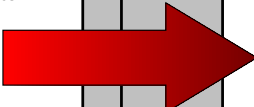


Element rotation scheme has been added

iAppeals v2

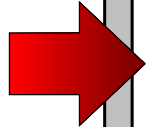
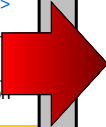
Model questions utilize the ACSI methodology to determine scores and impacts

ELEMENTS (drivers of satisfaction)		CUSTOMER SATISFACTION		FUTURE BEHAVIORS	
MQ Label		MQ Label		MQ Label	
	Look and Feel (1=Poor, 10=Excellent, Don't Know)		Satisfaction		Use other online applications (1=Very Unlikely, 10=Very Likely)
Look and Feel - Appeal	Please rate the visual appeal of the online disability appeal.	Satisfaction - Overall	What is your overall satisfaction with the online disability appeal? (1=Very Dissatisfied, 10=Very Satisfied)	Use Other Online Services	How likely are you to use other Social Security online services ?
Look and Feel - Balance	Please rate the balance of graphics and text in the online disability appeal.	Satisfaction - Expectations	How well does the online disability appeal meet your expectations ? (1=Falls Short, 10=Exceeds)		
Look and Feel - Readability	Please rate the readability of the pages in the online disability appeal.	Satisfaction - Ideal	How does the online disability appeal compare to your idea of an ideal online form ? (1=Not Very Close, 10=Very Close)		
	Site Performance (1=Poor, 10=Excellent, Don't Know)				
Site Performance - Loading	Please rate how quickly pages load in the online disability appeal.				
Site Performance - Consistency	Please rate the consistency of speed from page to page in the online disability appeal.				
Site Performance - Errors	Please rate the ability to load pages without getting error messages in the online disability appeal.				
	Plain Language (1=Poor, 10=Excellent, Don't Know)				
Plain Language - Clear	Please rate the clarity of the wording in the online disability appeal.				
Plain Language - Understandable	Please rate how well you understand the wording in the online disability appeal.				
Plain Language - Concise	Please rate the online disability appeal on its use of short, clear sentences .				



Model questions utilize the ACSI methodology to determine scores and impacts

ELEMENTS (drivers of satisfaction)	CUSTOMER SATISFACTION	FUTURE BEHAVIORS
<p>Look and Feel (1=Poor, 10=Excellent, Don't Know) Please rate the visual appeal of the SSA-Internet-Appeal-forms --> online disability appeal.</p>	<p>Satisfaction What is your overall satisfaction with the SSA-Internet-Appeal-forms --> online disability appeal? <i>(1=Very Dissatisfied, 10=Very Satisfied)</i></p>	<p>Use other online applications (1=Very Unlikely, 10=Very Likely) How likely are you to use other on-line applications/forms on the Social Security web site?</p>
<p>Please rate the balance of graphics and text on the SSA-Internet-Appeal-forms --> online disability appeal.</p>	<p>How well do--> does the SSA-Internet-Appeal-forms--> online disability appeal meet your expectations? <i>(1=Falls Short, 10=Exceeds)</i></p>	
<p>Please rate the readability of the pages on the SSA-Internet-Appeal-forms --> online disability appeal.</p>	<p>How do --> does the SSA-Internet-Appeal-forms --> online disability appeal compare to your idea of an ideal online form? <i>(1=Not Very Close, 10=Very Close)</i></p>	
<p>Site Performance (1=Poor, 10=Excellent, Don't Know) Please rate how quickly pages load on the SSA-Internet-Appeal-forms --> online disability appeal.</p>		
<p>Please rate the consistency of speed from page to page of the SSA-Internet-Appeal-forms --> online disability appeal.</p>		
<p>Please rate the ability to load pages without getting error messages on the SSA-Internet-Appeal-forms --> online disability appeal.</p>		
<p>Online Application Process (1=Poor, 10=Excellent, Don't Know) Please rate the clarity of the instructions to complete the SSA-Internet-Appeal-forms --> online disability appeal.</p>		
<p>Please rate the simplicity of completing the SSA-Internet-Appeal-forms --> online disability appeal.</p>		
<p>Please rate the number of steps for entering the information into the SSA-Internet-Appeal-forms --> online disability appeal.</p>		



SSA - I Appeals
 MID: IE1MY0Q8EMsQIUkRVwUM4w4C
 Date: 5/7/2014

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underlined & italicized: RE-ORDER
 pink: ADDITION
 blue + -->: REWORDING

SSA - I Appeals CUSTOM QUESTION LIST

QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	CQ Label
MAC0707		Which of the following best describes your role in using the online disability appeal today?	Self Attorney or Attorney's Staff Non-Attorney Representative or Non-Attorney Representative's Staff Other Third Party Representative (e.g. Family Member, Social Service Agency Worker, Case Manager)		Radio Button One Up Vertical	Single	Y	Skip Logic	Role
MAC0708		Did you start a new online disability appeal today or did you return to work on an appeal you previously started?	I started a new appeal I returned to work on an appeal previously started	A	Radio Button One Up Vertical	Single	Y	Skip Logic	New or Repeat?
STE0058576	A	Please tell us why you did not complete your appeal during your initial session.			Text Field, 1,000 char limit		N	Skip Logic	OE_Why Returned
STE0058578		How often do you use the online disability appeal?	This was the first time Less than five times a week 5-10 times per week 11-25 times per week More than 25 times per week		Radio Button One Up Vertical	Single	Y		Frequency
MAC0709		Did you complete your online disability appeal today?	Yes, I completed my online appeal today No, I plan to complete it later No, I do not plan to complete it	B B	Radio Button One Up Vertical	Single	Y		Complete today
STE0058579	B	Please tell us why you did not complete your appeal during today's session.			Text Field, 1,000 char limit		N	Skip Logic	OE_Did not complete today
MAC0710		How much time have you spent on your online disability appeal?	Less than 20 minutes 20 - 40 minutes 40 minutes - 1 hour 1 - 2 hours 2 or more hours Not sure		Radio Button One Up Vertical	Single	Y		Time
MAC0711		Did you experience any of the following while completing the online disability appeal? Check all that apply.	The questions did not seem to be organized in a logical manner I had difficulty understanding the questions because they were not clearly written I did not have the information necessary to answer the questions I had difficulty editing the medical information (e.g. doctors, medication, etc.) I had difficulty editing other information I was unable to print I did not have enough time to complete I received an error message or was "kicked out" of the appeal The text box blanks did not allow enough characters for my answers Other I did not have any difficulties		Checkbox, one-up vertical	Multi	N	Skip Logic	Form Experience
MAC0712		So that we can better identify the difficulties you indicated above, please provide specific information if possible. (i.e. Which questions or sections were difficult? Where did you receive an error message? etc.)			Text Field, 1,000 char limit		N		Difficult
MAC0714		How helpful was the information on the online disability appeal Welcome Page?	Very helpful Somewhat helpful Not helpful at all Did not read the Welcome Page Don't remember		Drop Down, Select one	Single	Y		Welcome Page
CAS0045693		How helpful were the links to pop-up help pages (as indicated by a blue question mark) throughout the online disability appeal application?	Very helpful Somewhat helpful Not helpful at all Did not read the help links Don't remember		Drop Down, Select one	Single	Y		Pop-up Help Links

SSA - iAppeals
 MID: IEIMYOQ8EMsQIUkRVwUM4w4C
 Date: 5/7/2014

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 blue + -->: REWORDING

SSA - iAppeals CUSTOM QUESTION LIST

QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	CQ Label
MAC0713		Please rate the ease of navigating through the online disability appeal.	Very easy Somewhat easy Somewhat difficult Very difficult		Drop Down, Select one	Single	Y		Ease of Navigating
MAC0715		Did you have ALL of your personal and medical information ready when you started?	Yes No		Radio Button One Up Vertical	Single	Y	Skip Logic	Necessary Documents
STE0058580	C	What personal and/or medical information did you not have ready when you started?		C, D	Text Field, 1,000 char limit		N	Skip Logic	OE_Info Needed
STE0058581	D	Could we have provided any additional information or assistance to help you be more prepared?			Text Field, 1,000 char limit		N	Skip Logic	OE_Improve Info Needed
MAC0716		How can we improve the online disability appeal? Please be as specific as possible. (Examples: What information we could have provided upfront? Do you have any suggested changes or updates?)			Text Field, 1,000 char limit		N		Improvement

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QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	CQ Label
MAC0707		Which of the following best describes your role in using the online disability appeal today?	Self Attorney or Attorney's Staff Non-Attorney Representative or Non-Attorney Representative's Staff Other Third Party Representative (e.g. Family Member, Social Service Agency Worker, Case Manager)		Radio Button One Up Vertical	Single	Y	Skip Logic	Role
MAC0708		Did you start a new online disability appeal today or did you return to work on an appeal you previously started?	I started a new appeal I returned to work on an appeal previously started		Radio Button One Up Vertical	Single	Y	Skip Logic	New or Repeat?
	A	Please tell us why you did not complete your appeal during your initial session.			Text Field, 1,000 char limit		N	Skip Logic	OE_Why Returned
		How often do you use the online disability appeal?	This was the first time Less than five times a week 5-10 times per week 11-25 times per week More than 25 times per week		Radio Button One Up Vertical	Single	Y		Frequency
MAC0709		Did you complete your online disability appeal today?	Yes, I completed my online appeal today No, I plan to complete it later No, I do not plan to complete it		Radio Button One Up Vertical	Single	Y		Complete today
	B	Please tell us why you did not complete your appeal during today's session.			Text Field, 1,000 char limit		N	Skip Logic	OE_Did not complete today
MAC0710		How much time have you spent on your online disability appeal?	Less than 20 minutes 20 - 40 minutes 40 minutes - 1 hour 1 - 2 hours 2 or more hours Not sure		Radio Button One Up Vertical	Single	Y		Time
MAC0711		Did you experience any of the following while completing the online disability appeal? Check all that apply.	The questions did not seem to be organized in a logical manner I had difficulty understanding the questions because they were not clearly written I did not have the information necessary to answer the questions I had difficulty editing the medical information (e.g. doctors, medication, etc.) I had difficulty editing other information I was unable to print I did not have enough time to complete I received an error message or was "kicked out" of the appeal The text box blanks did not allow enough characters for my answers Other I did not have any difficulties		Checkbox, one-up vertical	Multi	N	Skip Logic	Form Experience
MAC0712		So that we can better identify the difficulties you indicated above, please provide specific information if possible. (i.e. Which questions or sections were difficult? Where did you receive an error message? etc.)			Text Field, 1,000 char limit		N		Difficult
MAC0714		How helpful was the information on the online disability appeal Welcome Page?	Very helpful Somewhat helpful Not helpful at all Did not read the Welcome Page Don't remember		Drop Down, Select one	Single	Y		Welcome Page
CAS0045693		How helpful were the links to pop-up help pages (as indicated by a blue question mark) throughout the online disability appeal application?	Very helpful Somewhat helpful Not helpful at all Did not read the help links Don't remember		Drop Down, Select one	Single	Y		Pop-up Help Links

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MAC0715		Did you have ALL of your personal and medical information ready when you started?	Yes No		Radio Button One Up Vertical	Single	Y	Skip Logic	Necessary Documents
	C	What personal and/or medical information did you not have ready when you started?		C, D	Text Field, 1,000 char limit		N	Skip Logic	OE_Info Needed
	D	Could we have provided any additional information or assistance to help you be more prepared?			Text Field, 1,000 char limit		N	Skip Logic	OE_Improve Info Needed
MAC0716		How can we improve the online disability appeal? Please be as specific as possible. (Examples: What information we could have provided upfront? Do you have any suggested changes or updates?)			Text Field, 1,000 char limit		N		Improvement

SSA - iAppeals
 MID: ZpNoNJE50NYgMZApIs95Eg==
 Date: 3/1/2013

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SSA - iAppeals CUSTOM QUESTION LIST

QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	CQ Label
MAC0707		Which of the following best describes your role in using the online disability appeal today?	Self Attorney or Attorney's Staff Non-Attorney Representative or Non-Attorney Representative's Staff Other Third Party Representative (e.g. Family Member, Social Service Agency Worker, Case Manager)		Radio Button One Up Vertical	Single	Y	Skip Logic	Role
MAC0708		Did you start a new online disability appeal today or did you return to work on an appeal you previously started?	I started a new appeal I returned to work on an appeal previously started		Radio Button One Up Vertical	Single	Y		New or Repeat?
MAC0709		Did you complete your online disability appeal today?	Yes, I completed my online appeal today No, I plan to complete it later No, I do not plan to complete it		Radio Button One Up Vertical	Single	Y		Complete today
MAC0710		How much time have you spent on your online disability appeal? <input type="text" value="false"/>	Less than 20 minutes 20 - 40 minutes 40 minutes - 1 hour 1 - 2 hours 2 or more hours Not sure		Radio Button One Up Vertical	Single	Y		Time
MAC0711		Did you experience any of the following while completing the online disability appeal? Check all that apply.	The questions did not seem to be organized in a logical manner I had difficulty understanding the questions because they were not clearly written I did not have the information necessary to answer the questions I had difficulty editing the medical information (e.g. doctors, medication, etc.) I had difficulty editing other information I was unable to print I did not have enough time to complete I received an error message or was "kicked out" of the appeal The text box blanks did not allow enough characters for my answers Other I did not have any difficulties		Checkbox, one-up vertical	Multi	N	Skip Logic	Form Experience
MAC0712		So that we can better identify the difficulties you indicated above, please provide specific information if possible. (i.e. Which questions or sections were difficult? Where did you receive an error message? etc.)			Text Field, 1,000 char limit		N		Difficult
MAC0714		<u>How helpful was the information on the online disability appeal Welcome Page?</u>	<u>Very helpful</u> <u>Somewhat helpful</u> <u>Not helpful at all</u> <u>Did not read the Welcome Page</u> <u>Don't remember</u>		<u>Drop Down, Select one</u>	<u>Single</u>	<u>Y</u>		<u>Welcome Page</u>
		<u>How helpful were the links to pop-up help pages (as indicated by a blue question mark) throughout the online disability appeal application?</u>	<u>Very helpful</u> <u>Somewhat helpful</u> <u>Not helpful at all</u> <u>Did not read the help links</u> <u>Don't remember</u>		<u>Drop Down, Select one</u>	<u>Single</u>	<u>Y</u>		<u>Pop-up Help Links</u>

SSA - iAppeals
 MID: ZpNoNJE50NYgMZApIs95Eg==
 Date: 3/1/2013

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SSA - iAppeals CUSTOM QUESTION LIST

QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	CQ Label
MAC0713		<i>Please rate the ease of navigating through the online disability appeal.</i>	<i>Very easy</i> <i>Somewhat easy</i> <i>Somewhat difficult</i> <i>Very difficult</i>		<i>Drop Down, Select one</i>	<i>Single</i>	<i>Y</i>		<i>Ease of Navigating</i>
MAC0715		Did you have ALL of your personal and medical information ready when you started?	Yes No		Radio Button One Up Vertical	Single	Y		Necessary Documents
MAC0716		How can we improve the online disability appeal? Please be as specific as possible. (Examples: What information we could have provided upfront? Do you have any suggested changes or updates?)			Text Field, 1,000 char limit		N		Improvement

Note for ForeSee DOT. Please note there is also a change to the welcome text of the survey (see that tab).

SSA - I Appeals CUSTOM QUESTION LIST

QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	CQ Label
ACQWro0006963		Which of the following best describes your role in using the Internet Appeal Form(s) today --> online disability appeal today? Select one.	Self Attorney or Attorney's Staff Non-Attorney Representative or Non-Attorney Representative's Staff Other Third Party Representative (e.g. Family Member, Social Service Agency Worker, Case Manager)	H S S H	Radio Button One Up Vertical	Single	Y	Skip Logic	Role
ACQWro0006964	H	How did you first learn about the Internet Appeal?	Disability denial letter from SSA SSA Representative SSA Website Third Party Representative Other		Radio Button One Up Vertical	Single	Y	Skip Logic	Role
ACQWro0006965	S	How often do you use the Internet Appeal?	This was the first time. Less than five times a week 5-10 times per week 11-25 times per week More than 25 times per week		Radio Button One Up Vertical	Single	Y	Skip Logic	Role
		Did you start a new online disability appeal today or did you return to work on an appeal you previously started?	I started a new appeal I returned to work on an appeal previously started		Radio Button One Up Vertical	Single	Y		New or Repeat?
		Did you complete your online disability appeal today?	Yes, I completed my online appeal today No, I plan to complete it later No, I do not plan to complete it		Radio Button One Up Vertical	Single	Y		Complete today
SAC0026		So far, how much time have you spent on your Internet Appeal --> online disability appeal? Please think about both the Internet Appeal Request and the Disability Report.	Less than 20 minutes 20 - 40 minutes 40 minutes - 1 hour 1 - 2 hours 2 or more hours Not sure		Radio Button One Up Vertical	Single	Y		Time
			Note for ForeSee DOT: Please note that this question has changed position on the survey. Please update. Thanks!						
SAC0018		Which part(s) of the Internet Appeal did you complete today?	Internet Appeal Request (reconsideration or hearing) Disability Report - Appeal (medical information) Both Not sure	A, X B	Radio Button One Up	Single	Y		Form
SAC0019	A	Which Internet Appeal Request form did you complete today?	Request for reconsideration Request for hearing by administrative law judge Not sure I did not complete the Internet Appeal Request form today		Radio Button One Up Vertical	Single	Y		Type of Appeal
ACQWro0006966	X	Why did you only complete the Internet Appeal Request and not the Disability Report - Appeal (medical information)?	I was not aware of the Disability Report - Appeal I did not understand the questions I did not have new medical information to provide I did not have the information necessary to answer the questions My disabling condition prevents me from working on the computer for long periods of time Other		Radio Button One Up Vertical	Single	Y	Skip Logic	Why not DR- Appeal
ACQWro0020176	O	Please tell us your other reasons for not completing the Disability Report - Appeal (medical information).			Text Field, no char limit		N	Skip Logic	Other - did not complete DR-A

Note for ForeSee DOT. Please note there is also a change to the welcome text of the survey (see that tab).

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QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	CQ Label
MMW0750		Before completing your application today, did you use any of the features listed below, and if so, how helpful was it in completing your appeal? The "Preparing to File Your Appeal Online" video _____	Very Helpful Somewhat Helpful Not Helpful at all Didn't use Don't remember		Drop-Down, Select one	Single	Y	Multiple-List Groups	Helpful—Video
MMW0751		The "Checklist—Information You Will Need" _____	Very Helpful Somewhat Helpful Not Helpful at all Didn't use Don't remember		Drop-Down, Select one	Single	Y	Multiple-List Groups	Helpful—Checklist
MMW0752		The "Tips for Using the Website" link _____	Very Helpful Somewhat Helpful Not Helpful at all Didn't use Don't remember		Drop-Down, Select one	Single	Y	Multiple-List Groups	Helpful—Tips
ACQWr0006967		Please tell us about any problems you experienced finding the Internet Appeal online.	I did not have any problems finding the Internet Appeal. It was not clear where to go from the SSA website to get to the Internet Appeal. Other		Radio Button One Up Vertical	Single	Y		Site Experience
SAC0024		Did you experience any problems using the Internet Appeal --> of the following while completing the online disability appeal? Check all that apply.	The information on form(s) did not seem to be organized in a logical manner --> The questions did not seem to be organized in a logical manner I had difficulty understanding the questions because they were not clearly written I did not have the information necessary to answer the questions I had difficulty editing the medical information (e.g. doctors, medication, etc.) I had difficulty editing other information I was unable to print I did not have enough time to complete I received an error message or was "kicked out" of the appeal The text box blanks did not allow enough characters for my answers The language used on the form(s) was too technical Other I did not have any problems using the Internet Appeal --> difficulties	F F F F F F F F F F F	Checkbox, one-up vertical	Multi	N	Skip Logic	Form Experience
		So that we can better identify the difficulties you indicated above, please provide specific information if possible. (i.e. Which questions or sections were difficult? Where did you receive an error message? etc.)			Text Field, 1,000 char limit		N		Difficult
ACQWr0006968	F	Please tell us about any technical problems you may have experienced. Check all that apply.	I did not have any technical problems I could not navigate back to previous information I was unable to print The pages loaded slowly I ran out of time on the screen and was locked out Other		Checkbox, one-up vertical	Multi	N	Skip Logic	Technical
ACQWr0006969	C	Please tell us about any other technical problems you experienced.		G	Text Field, no char limit			Skip Logic	Other Technical
ACQWr0006970		How would you rate the amount of time it took you to complete your Internet Appeal?	Less than you expected About what you expected More than you expected Haven't completed the form yet		Radio Button One Up Vertical	Single	Y		Expectation

Note for ForeSee DOT. Please note there is also a change to the welcome text of the survey (see that tab).

QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	CQ Label
		Please rate the ease of navigating through the online disability appeal.	Very easy Somewhat easy Somewhat difficult Very difficult		Drop Down, Select one	Single	Y		Navigating
		How helpful was the information on the online disability appeal Welcome Page?	Very helpful Somewhat helpful Not helpful at all Did not read the Welcome Page Don't remember		Drop Down, Select one	Single	Y		Welcome Page
		Did you have ALL of your personal and medical information ready when you started?	Yes No		Radio Button One Up Vertical	Single	Y		Necessary Documents
SAC0032		Now that you have used the Internet Appeal process, what specific improvements, if any, would you recommend?--> How can we improve the online disability appeal? Please be as specific as possible. (Examples: What information we could have provided upfront? Do you have any suggested changes or updates?)			Text Field, 1,000 char limit		N		Improvement

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Date: 11/29/2011

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QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N
ACQWro0006963		Which of the following best describes your role in using the Internet Appeal Form(s) today? Select one.	Self Attorney or Attorney's Staff Non-Attorney Representative or Non-Attorney Representative's Staff Other Third Party Representative (e.g. Family Member, Social Service Agency Worker, Case Manager)	H S S H	Radio Button One Up Vertical	Single	Y
ACQWro0006964	H	How did you first learn about the Internet Appeal?	Disability denial letter from SSA SSA Representative SSA Website Third Party Representative Other		Radio Button One Up Vertical	Single	Y
ACQWro0006965	S	How often do you use the Internet Appeal?	This was the first time. Less than five times a week 5-10 times per week 11-25 times per week More than 25 times per week		Radio Button One Up Vertical	Single	Y
SAC0018		Which part(s) of the Internet Appeal did you complete today?	Internet Appeal Request (reconsideration or hearing) Disability Report - Appeal (medical information) Both Not sure	A, X B	Radio Button One Up Vertical	Single	Y
SAC0019	A	Which Internet Appeal Request form did you complete today?	Request for reconsideration Request for hearing by administrative law judge Not sure I did not complete the Internet Appeal Request form today		Radio Button One Up Vertical	Single	Y
ACQWro0006966	X	Why did you only complete the Internet Appeal Request and not the Disability Report - Appeal (medical information)?	I was not aware of the Disability Report - Appeal I did not understand the questions I did not have new medical information to provide I did not have the information necessary to answer the questions My disabling condition prevents me from working on the computer for long periods of time Other		Radio Button One Up Vertical	Single	Y
	O	Please tell us your other reasons for not completing the Disability Report - Appeal (medical information).			Text Field, no char limit		N
MMW0750		Before completing your application today, did you use any of the features listed below, and if so, how helpful was it in completing your appeal? The "Preparing to File Your Appeal Online" video <input type="checkbox"/> true <input type="checkbox"/> false	Very Helpful Somewhat Helpful Not Helpful at all Didn't use Don't remember		Drop Down, Select one	Single	Y
MMW0751		The "Checklist: Information You Will Need"	Very Helpful Somewhat Helpful Not Helpful at all Didn't use Don't remember		Drop Down, Select one	Single	Y

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MMW0752		The "Tips for Using the Website" link	Very Helpful Somewhat Helpful Not Helpful at all Didn't use Don't remember		Drop Down, Select one	Single	Y
ACQWro0006967		Please tell us about any problems you experienced finding the Internet Appeal online.	I did not have any problems finding the Internet Appeal It was not clear where to go from the SSA website to get to the Internet Appeal Other		Radio Button One Up Vertical	Single	Y
SAC0024		Did you experience any problems <i>using</i> the Internet Appeal? Check all that apply.	I did not have any problems using the Internet Appeal I had difficulty understanding the questions because they were not clearly written The language used on the form(s) was too technical The information on form(s) did not seem to be organized in a logical manner I did not have the information necessary to answer the questions Other	T T T T T	Checkbox, one-up vertical	Multi	N
ACQWro0006968	T	Please tell us about any <i>technical</i> problems you may have experienced. Check all that apply.	I did not have any technical problems I could not navigate back to previous information I was unable to print The pages loaded slowly I ran out of time on the screen and was locked out Other	C	Checkbox, one-up vertical	Multi	N
ACQWro0006969	C	Please tell us about any other technical problems you experienced.			Text Field, no char limit		
SAC0026		So far, how much time have you spent on your Internet Appeal? Please think about both the Internet Appeal Request and the Disability Report.	Less than 20 minutes 20 – 40 minutes 40 minutes - 1 hour 1 - 2 hours 2 or more hours Not sure		Radio Button One Up Vertical	Single	Y
ACQWro0006970		How would you rate the amount of time it took you to complete your Internet Appeal?	Less than you expected About what you expected More than you expected Haven't completed the form yet		Radio Button One Up Vertical	Single	Y

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QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N
ACQWro0006963		Which of the following best describes your role in using the Internet Appeal Form(s) today? Select one.	Self Attorney or Attorney's Staff Non-Attorney Representative or Non-Attorney Representative's Staff Other Third Party Representative (e.g. Family Member, Social Service Agency Worker, Case Manager)	H S S H	Radio Button One Up Vertical	Single	Y
ACQWro0006964	H	How did you first learn about the Internet Appeal?	Disability denial letter from SSA SSA Representative SSA Website Third Party Representative Other		Radio Button One Up Vertical	Single	Y
ACQWro0006965	S	How often do you use the Internet Appeal?	This was the first time. Less than five times a week 5-10 times per week 11-25 times per week More than 25 times per week		Radio Button One Up Vertical	Single	Y
SAC0018		Which part(s) of the Internet Appeal did you complete today?	Internet Appeal Request (reconsideration or hearing) Disability Report - Appeal (medical information) Both Not sure	A, X B	Radio Button One Up Vertical	Single	Y
SAC0019	A	Which Internet Appeal Request form did you complete today?	Request for reconsideration Request for hearing by administrative law judge Not sure I did not complete the Internet Appeal Request form today		Radio Button One Up Vertical	Single	Y
ACQWro0006966	X	Why did you only complete the Internet Appeal Request and not the Disability Report - Appeal (medical information)?	I was not aware of the Disability Report - Appeal I did not understand the questions I did not have new medical information to provide I did not have the information necessary to answer the questions My disabling condition prevents me from working on the computer for long periods of time Other		Radio Button One Up Vertical	Single	Y
		Before completing your application today, did you use any of the features listed below, and if so, how helpful was it in completing your appeal?					
		The "Preparing to File Your Appeal Online" video false	Very Helpful Somewhat Helpful Not Helpful at all Didn't use Don't remember		Drop Down, Select one	Single	Y
		The "Checklist: Information You Will Need"	Very Helpful Somewhat Helpful Not Helpful at all Didn't use Don't remember		Drop Down, Select one	Single	Y
		The "Tips for Using the Website" link	Very Helpful Somewhat Helpful Not Helpful at all Didn't use		Drop Down, Select one	Single	Y

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QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N
ACQWro0006967		Please tell us about any problems you experienced finding the Internet Appeal online.	Don't remember I did not have any problems finding the Internet Appeal It was not clear where to go from the SSA website to get to the Internet Appeal Other		Radio Button One Up Vertical	Single	Y
SAC0024		Did you experience any problems <i>using</i> the Internet Appeal? Check all that apply.	I did not have any problems using the Internet Appeal I had difficulty understanding the questions because they were not clearly written The language used on the form(s) was too technical The information on form(s) did not seem to be organized in a logical manner I did not have the information necessary to answer the questions Other	T T T T T	Checkbox, one-up vertical	Multi	N
ACQWro0006968	T	Please tell us about any <i>technical</i> problems you may have experienced. Check all that apply.	I did not have any technical problems I could not navigate back to previous information I was unable to print My re-entry number did not work The pages loaded slowly I ran out of time on the screen and was locked out I was unable to return to the Internet Appeal after signing out Other	C	Checkbox, one-up vertical	Multi	N
ACQWro0006969	C	Please tell us about any other technical problems you experienced.			Text Field, no char limit		
SAC0026		So far, how much time have you spent on your Internet Appeal? Please think about both the Internet Appeal Request and the Disability Report.	Less than 20 minutes 20 – 40 minutes 40 minutes - 1 hour 1 - 2 hours 2 or more hours Not sure		Radio Button One Up Vertical	Single	Y
ACQWro0006970		How would you rate the amount of time it took you to complete your Internet Appeal?	Less than you expected About what you expected More than you expected Haven't completed the form yet		Radio Button One Up Vertical	Single	Y

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QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N
		Which of the following best describes your role in using the Internet Appeal Form(s) today? Select one.	Self Attorney or Attorney's Staff Non-Attorney Representative or Non-Attorney Representative's Staff Other Third Party Representative (e.g. Family Member, Social Service Agency Worker, Case Manager)	H S S H	Radio Button One Up Vertical	Single	Y
	H	How did you first learn about the Internet Appeal?	Disability denial letter from SSA SSA Representative SSA Website Third Party Representative Other		Radio Button One Up Vertical	Single	Y
	S	How often do you use the Internet Appeal?	This was the first time. Less than five times a week 5-10 times per week 11-25 times per week More than 25 times per week		Radio Button One Up Vertical	Single	Y
SAC0016		How did you first learn about the Internet Appeal forms?	From the SSA website From an SSA representative SSA Speaker at a Conference Disability denial notice from SSA Direct Mail I received from Social Security Webcast Other Direct Contact Initiated by Social Security Professional Association Other, please specify	A	Radio Button One Up Vertical	Single	Y
SAC0017	A	Other source			Text Field — limited to 100 characters	Single	N
SAC0018		Which form(s) did you work on today? --> Which part(s) of the Internet Appeal did you complete today?	Internet Appeal Request (reconsideration or hearing) Disability Report - Appeal (medical information) Both Not sure	A, X B	Checkbox, one-up-vertical Radio Button One Up Vertical	Multi Single	Y
SAC0019	A	Which Internet Appeal Request form did you complete today?	Request for reconsideration Request for hearing by administrative law judge Not sure I did not complete the Internet Appeal Request form today		Radio Button One Up Vertical	Single	Y
	X	Why did you only complete the Internet Appeal Request and not the Disability Report - Appeal (medical information)?	I was not aware of the Disability Report - Appeal I did not understand the questions I did not have new medical information to provide I did not have the information necessary to answer the questions My disabling condition prevents me from working on the computer for long periods of time Other		Radio Button One Up Vertical	Single	Y
SAC0020	B	Did you complete the Disability Appeal Report form today?	Yes No Not sure		Radio Button One Up Vertical	Single	Y
SAC0021		Did you visit the ssa.gov homepage today before arriving at the Internet Appeal Request form today?	Yes No Not sure		Radio Button One Up Vertical	Single	Y

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QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N
SAC0022		Please tell us about your experience today as you navigated the site to get to the Internet Appeal forms. (check all that apply)	I started in the Internet Appeal section and therefore did not need to navigate the site It was not clear where to go on the SSA website to get to the Internet Appeals section The language used on the site was too technical The information on the site did not seem to be organized in a logical manner It was not clear to me where the links would lead None of the above		Checkbox, one-up vertical	Multi	Y
		Please tell us about any problems you experienced finding the Internet Appeal online.	I did not have any problems finding the Internet Appeal It was not clear where to go from the SSA website to get to the Internet Appeal Other		Radio Button One Up Vertical	Single	Y
SAC0024		Please tell us what you experienced while working on your Internet Appeal form(s) today. --> Did you experience any problems using the Internet Appeal? Check all that apply.	I did not have any problems using the Internet Appeal I had difficulty understanding the questions --> I had difficulty understanding the questions because they were not clearly written The language used on the form(s) was too technical The information on form(s) did not seem to be organized in a logical manner I experienced technical difficulties (e.g. broken links, error messages) I was not able to save my information I could not navigate back to previous information I did not have the information necessary to answer the questions Other None of the above	T T T T T	Checkbox, one-up vertical	Multi	N
	T	Please tell us about any technical problems you may have experienced. Check all that apply.	I did not have any technical problems I could not navigate back to previous information I was unable to print My re-entry number did not work The pages loaded slowly I ran out of time on the screen and was locked out I was unable to return to the Internet Appeal after signing out Other		Checkbox, one-up vertical	Multi	N
	C	Please tell us about any other technical problems you experienced.			Text Field, no char limit		
AED12764		Please share with us any additional details about your experience today that you feel we should be aware of to help improve the site.			Text Field, no char limit		N
SAC0026		About how much time, in total, have you spent working on both the Internet Appeal Request form and the Disability Appeal Report, since you initially started? --> So far, how much time have you spent on your Internet Appeal? Please think about both the Internet Appeal Request and the Disability Report.	Less than 20 minutes 20 - 40 minutes 40 minutes - 1 hour 1 - 2 hours 2 or more hours Not sure		Radio Button One Up Vertical	Single	Y
		How would you rate the amount of time it took you to complete your Internet Appeal?	Less than you expected About what you expected More than you expected		Radio Button One Up Vertical	Single	Y

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QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N
SAC0027		When did you initially file for Disability Benefits?	Haven't completed the form yet Within the last 3 months Within the last 3 - 6 months Within the last 6 - 12 months More than a year ago Not sure		Radio-Button-One-Up-Vertic	Single	Y

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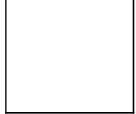
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SSA - iAppeals CUSTOM QUESTION LIST

QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N
SAC0016		How did you first learn about the Internet Appeal forms?	From the SSA website From an SSA representative SSA Speaker at a Conference Disability denial notice from SSA Direct Mail I received from Social Security Webcast Other Direct Contact Initiated by Social Security Professional Association Other, please specify	A	Radio Button One Up Vertical	Single	Y
SAC0017	A	Other source			Text Field – limited to 100 characters	Single	N
SAC0018		Which form(s) did you work on today ?	Internet Appeal Request Disability Report - Appeal Not sure	A B	Checkbox, one-up vertical	Multi	Y
SAC0019	A	Which Internet Appeal Request form did you complete today?	Request for reconsideration Request for hearing by administrative law judge Not sure I did not complete the Internet Appeal Request form today		Radio Button One Up Vertical	Single	Y
SAC0020	B	Did you complete the Disability Appeal Report form today?	Yes No Not sure		Radio Button One Up Vertical	Single	Y
SAC0021		Did you visit the ssa.gov homepage today before arriving at the Internet Appeal Request form today?	Yes No Not sure		Radio Button One Up Vertical	Single	Y
SAC0022		Please tell us about your experience today as you navigated the site to get to the Internet Appeal forms. (check all that apply)	I started in the Internet Appeal section and therefore did not need to navigate the site It was not clear where to go on the SSA website to get to the Internet Appeals section The language used on the site was too technical The information on the site did not seem to be organized in a logical manner It was not clear to me where the links would lead None of the above		Checkbox, one-up vertical	Multi	Y
SAC0024		Please tell us what you experienced while working on your Internet Appeal form(s) today.	I had difficulty understanding the questions I experienced technical difficulties (e.g. broken links, error messages) I was not able to save my information I could not navigate back to previous information I did not have the information necessary to answer the questions None of the above		Checkbox, one-up vertical	Multi	N
AED12764		Please share with us any additional details about your experience today that you feel we should be aware of to help improve the site.			Text Field, no char limit		N
SAC0026		About how much time, in total, have you spent working on both the Internet Appeal Request form and the Disability Appeal Report, since you initially started?	Less than 20 minutes 20 – 40 minutes 40 minutes - 1 hour 1 - 2 hours 2 or more hours		Radio Button One Up Vertical	Single	Y

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QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N
		raise	Not sure				
SAC0027		When did you initially file for Disability Benefits ?	Within the last 3 months Within the last 3 - 6 months Within the last 6 - 12 months More than a year ago Not sure		Radio Button One Up Vertical	Single	Y



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SSA - iAppeals CUSTOM QUESTION LIST

QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N
SAC0016		How did you first learn about the Internet Appeal forms?	From the SSA website From an SSA representative SSA Speaker at a Conference Disability denial notice from SSA Direct Mail I received from Social Security Webcast Other Direct Contact Initiated by Social Security Professional Association Other, please specify	A	Radio Button One Up Vertical	Single	Y
SAC0017	A	Other source			Text Field – limited to 100 characters	Single	N
SAC0018		Which form(s) did you work on today ?	Internet Appeal Request form Disability Appeal Report form --> Disability Report - Appeal Not sure	A B	Checkbox, one-up vertical	Multi	Y
SAC0019	A	Which Internet Appeal Request form did you complete today?	Request for reconsideration Request for hearing by administrative law judge Not sure I did not complete the Internet Appeal Request form today		Radio Button One Up Vertical	Single	Y
SAC0020	B	Did you complete the Disability Appeal Report form today?	Yes No Not sure		Radio Button One Up Vertical	Single	Y
SAC0021		Did you visit the ssa.gov homepage today before arriving at the Internet Appeal Request form today?	Yes No Not sure		Radio Button One Up Vertical	Single	Y
SAC0022		Please tell us about your experience today as you navigated the site to get to the Internet Appeal forms. (check all that apply)	I started in the Internet Appeal section and therefore did not need to navigate the site It was not clear where to go on the SSA website to get to the Internet Appeals section The language used on the site was too technical The information on the site did not seem to be organized in a logical manner It was not clear to me where the links would lead None of the above Other (please specify)	A	Checkbox, one-up vertical	Multi	Y
	A	Other navigation			Text Field – limited to 100 characters	Single	N
SAC0024		Please tell us what you experienced while working on your Internet Appeal form(s) today.	I had difficulty understanding the questions I experienced technical difficulties (e.g. broken links, error messages) I was not able to save my information I could not navigate back to previous information I did not have the information necessary to answer the questions None of the above Other (please specify)	A	Checkbox, one-up vertical	Multi	N
	A	Other experience			Text Field – limited to 100 characters	Single	N

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SSA - iAppeals CUSTOM QUESTION LIST

QID (Group ID)	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N
		Please share with us any additional details about your experience today that you feel we should be aware of to help improve the site.			Text Field, no char limit		N
SAC0026		About how much time, in total, have you spent working on both the Internet Appeal Request form and the Disability Appeal Report, since you initially started?	Less than 20 minutes 20 – 40 minutes 40 minutes - 1 hour 1 - 2 hours 2 or more hours Not sure		Radio Button One Up Vertical	Single	Y
SAC0027		When did you initially file for Disability Benefits ?	Within the last 3 months Within the last 3 - 6 months Within the last 6 - 12 months More than a year ago Not sure		Radio Button One Up Vertical	Single	Y



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Special Instructions

Base Element Order	Version 2	Version 3	Version 4
Look and Feel	Plain Language	Site Performance	Look and Feel
Site Performance	Site Performance	Look and Feel	Plain Language
Plain Language	Look and Feel	Plain Language	Site Performance