Sample population definition: Individuals who began receiving benefits in the last 12 months.

Benefit Information

- 1. How did you FIRST learn about VA benefit programs? (Mark only one) If you are unsure, please indicate the first way you remember learning about VA benefit programs.
 - a. VA website
 - b. VetSuccess.gov
 - c. eBenefits.va.gov
 - d. Mail (from VA)
 - e. VA phone number (800-827-1000)
 - f. Transition Assistance Program/Disabled Transition Assistance Program briefings
 - g. Veterans Service Organizations, e.g., Disabled American Veterans, Veterans of Foreign Wars, Paralyzed Veterans of America, etc. (Specify)
 - h. VA medical center
 - i. VA Vet center
 - j. In person at a Regional Office
 - k. Social media websites (e.g., Facebook, Twitter, etc.)
 - I. Visit from a VA employee
 - m. Other Veterans
 - n. Internet (excluding VA and social media sites)
 - o. Friends or family
 - p. Other publications (e.g., Army Times, local newspaper, etc.)
 - q. Other (Specify)
 - r. Don't know or not sure
- 2. What method(s) do you MOST FREQUENTLY use to obtain general information about VA's benefits or services? (Mark all that apply)
 - a. Phone
 - b. Mail
 - c. E-mail
 - d. In person at a Regional Office
 - e. Veterans Service Organizations, e.g., Disabled American Veterans, Veterans of Foreign Wars, Paralyzed Veterans of America, etc. (Specify)
 - f. Disabled Veterans' Outreach Program
 - g. VA website
 - h. VetSuccess.gov
 - i. eBenefits.va.gov
 - j. Social media websites (e.g., Facebook, Twitter, etc.)
 - k. Other websites (excluding VA or social media sites)
 - I. VA medical center

- m. VA Vet center
- n. Friends or family
- o. Other publications (e.g., Army Times, local newspaper, etc.)
- p. Other (Specify)
- g. Don't know or not sure
- r. None of the above
- 3. How frequently would you like to you receive communications (e.g., e-mails, letters, newsletters, etc.) about VA benefits or services? (Mark only one)
 - a. Weekly
 - b. Monthly
 - c. Quarterly (every 3 months)
 - d. Semi-annually (twice per year)
 - e. Annually (once per year)
 - f. Never
 - g. Don't know or not sure
- 4. How would you like to receive information from VA about benefits or services? (Mark all that apply)
 - a. Phone
 - b. Mail
 - c. E-mail
 - d. VA website
 - e. Social media websites (e.g., Facebook, Twitter, etc.)
 - f. In person at a Regional Office
 - g. Veterans Service Organizations, e.g., Disabled American Veterans, Veterans of Foreign Wars, Paralyzed Veterans of America, etc. (Specify)
 - h. Other (Specify)
 - i. Don't know or not sure

The following question asks you to rate various aspects of your experience with benefits, using a scale of 1 to 10 where 1 is <u>Unacceptable</u>, 10 is <u>Outstanding</u>, and 5 is <u>Average</u>.

- 5. Please rate your experience in obtaining information about your benefit on the following items: (Mark only one per row)
 - a. Ease of accessing information
 - b. Availability of information
 - c. Clarity of information
 - d. Usefulness of information
 - e. Frequency of information provided by VA
 - f. Overall rating of information

Contact with VA

- During the past 6months, did you contact anyone from VA about your benefit? (Mark only one)
 - a. Yes
 - b. No

(Ask Q7-Q12 if Q6 is yes, otherwise go to Q13)

- Which of the following best describes the reason for your most recent contact? (Mark only one)
 - a. Resolve a problem
 - b. Ask a question
 - c. Request a change to your records/provide information
- 8. Can you briefly describe the nature of your most recent contact? (Mark all that apply)
 - a. Update your dependency status
 - b. Change your address or direct deposit information
 - c. Provide verification documents required for payment (e.g., income verification, medical records, etc.)
 - d. Report the death of an individual who received VA benefits
 - e. Report that you did not receive your VA check or direct deposit
 - f. Resolve a problem with your benefits
 - g. Find out about a late benefit payment
 - h. Report a problem with a VA customer service representative
 - i. Ask a general guestion
 - j. Obtain information about submitting/re-opening a claim
 - k. Other (Specify)
- Thinking about your most recent contact, how did you contact VA? (Mark only one)
 - a. Phone
 - b. Fax
 - c. Website
 - d. E-mail
 - e. Mail
 - f. In person
- 10. Was your most recent issue resolved? (Mark only one)
 - a. Yes
 - b. No

(Ask Q11 if Q10 is No, otherwise go to Q12)

- 11. Why wasn't your most recent issue resolved?
 - a. Did not receive all of the information required
 - b. Received incorrect information
 - c. Was referred to the incorrect office/person
 - d. Waiting for follow-up from VA
 - e. Other (Specify)
 - f. Don't know or not sure
- 12. Thinking of your most recent contact with the VA, how would you rate your overall customer service experience with the VA or VA representatives using a scale of 1 to 10 where 1 is <u>Unacceptable</u>, 10 is <u>Outstanding</u>, and 5 is <u>Average</u>.

Benefit Entitlement

- 13. Have you submitted a claim for an Aid and Attendance or Housebound benefit in the past 6 months? (Mark only one)
 - a. Yes
 - b. No
 - c. Don't know or not sure

(Ask Q14-17 if Q13 is Yes, otherwise go to Q18)

- 14. What is your preferred method to submit a claim? (Mark only one)
 - a. Mail
 - b. In person at a Regional Office
 - c. In person at a Veterans Service Organization, e.g., Disabled American Veterans, Veterans of Foreign Wars, Paralyzed Veterans of America, etc.
 - d. Other (Specify)
 - e. Don't know or not sure
- 15. Did VA require you to provide additional medical evidence after you submitted your claim? (Mark only one)
 - a. Yes
 - b. No
 - c. Don't know or not sure

(Ask Q16 if Q15 is Yes, otherwise go to Q18)

- 16. Were you required to undergo a VA medical evaluation as a result of your claim? (Mark only one)
 - a. Yes
 - b. No

- c. Don't know or not sure
- d. Not applicable

(Ask Q17 if Q16 is Yes, otherwise go to Q18)

- 17. Did the exam seem appropriate and/or address your claimed condition(s)?
 - a. Yes
 - b. No
 - c. Don't know or not sure
- 18. If you were previously found ineligible for VA pension benefits, did you understand why you were found ineligible? (Mark only one)
 - a. Yes
 - b. No
 - c. Don't know or not sure
 - d. Not applicable (Web survey only) (Skip to Q20)
- 19. In the past 6 months, have you submitted any documentation required to verify your eligibility for benefits (e.g., income verification, marriage certificate, medical records, dependent information, etc.)? (Mark only one)
 - a. Yes
 - b. No
 - c. Don't know or not sure

(Ask Q20 if Q19 is Yes, otherwise go to Q23)

- 20. Was there any change (increase or decrease) to your pension benefits based on the verification of the documents submitted?
 - a. Yes
 - b. No
 - c. Don't know or not sure

(Ask Q21 if Yes to Q20, otherwise go to Q22)

- 21. Were you informed as to the reason why your benefit payment changed? (Mark only one)
 - a. Yes
 - b. No
 - c. Don't know or not sure

The following question asks you to rate various aspects of your experience with benefits, using a scale of 1 to 10 where 1 is <u>Unacceptable</u>, 10 is <u>Outstanding</u>, and 5 is <u>Average</u>.

- 22. Please rate your pension benefit on the following items: (Mark only one per row)
 - a. Amount of pension benefit payment
 - b. Timeliness of receiving benefit payment
 - c. Overall rating of your benefit

Overall Experience with Benefit

23. Thinking about ALL aspects of your experience with your pension benefits, please rate VA overall, using a 1 to 10 scale where 1 is <u>Unacceptable</u>, 10 is <u>Outstanding</u>, and 5 is <u>Average</u>. (Mark only one)

Overall Experience with VA

- 24. Taking into consideration all of the non-medical benefits (e.g., education, compensation and pension, home loan guaranty, vocational rehabilitation and employment, insurance, etc.) you have applied for or currently receive, please rate your experience with VA overall, using a scale of 1 to 10 where 1 is Unacceptable, 10 is Outstanding, and 5 is Average. (Mark only one)
- 25. How likely are you to inform other Veterans or beneficiaries about your experience with VA benefits or services? (Mark only one)
 - a. Definitely will not
 - b. Probably will not
 - c. Probably will
 - d. Definitely will
- 26. Do you have any other comments or concerns about your experience? (Open Capture)

Additional Questions

- 27. How are you currently using your benefit payment? (Mark all that apply)
 - a. Rent/mortgage payment
 - b. Paying bills
 - c. Paying down debt
 - d. Medical expenses
 - e. Education expenses
 - f. Establishing savings
 - g. Other (Specify)
 - h. Prefer not to answer

i. Don't know or not sure

As a reminder, your responses will be kept completely confidential and your email address will not be sent to VA with any responses on this survey.

- 28. Would you like to provide an e-mail address so VA can contact you with general information about VA benefits and services? (Mark only one)
 - a. Yes
 - b. No
 - c. I do not have an e-mail address
 - d. Prefer not to answer

(Ask Q29 if Q28 is Yes)

- 29. Please enter your preferred e-mail address where you would like to be contacted: (Open Capture)
 - a. E-mail: