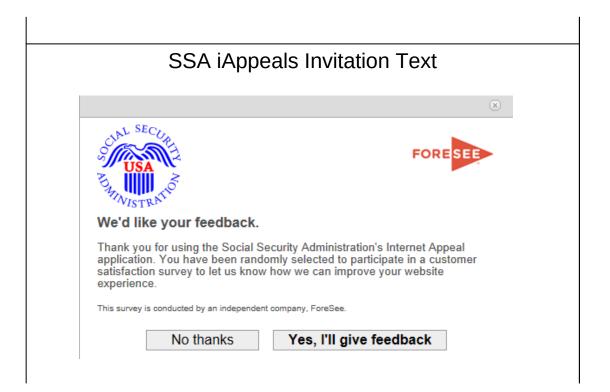
Note: Changes to the invitation text will require an update to the foresee-surveydef.j

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.



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: *Pl | ease r | ate th | e visu | al app | eal of | the S | SA Int | ernet / | Appeal | forms. |
|-----------------|--------|--------|--------|--------|-------------|--------|--------|---------|--------|------------------------|
| 1=1 | oor | | | | | | Ex | cellent | t=10 | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Don't Know |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | | |
| 2: *Pl Appea | | | e bala | nce of | f grap | hics a | nd te | xt on t | he SS | A Internet |
| Appea | | | e bala | nce of | f grap | hics a | | xt on t | | A Internet |
| Appea | l form | | e bala | nce of | f grap 6 | hics a | | | | A Internet Don't Know |

Thank You Text Example

| 20: *How wor | uld you | rate the | amount | of | time | it | took | you | to | complete | you |
|---------------|---------|----------|--------|----|------|----|------|-----|----|----------|-----|
| Internet Appe | al? | | | | | | | | | | |
| | | | | | | | | | | | |

Less than you expected

About what you expectedMore 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



Copyright 2013 - all rights reserved OMB Control # 1090-0008 ForeSee Privacy Survey Support 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 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.

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: *Pl | ease r | ate the | e visu | al app | eal of | the S | SA Int | ernet / | Appeal | forms. |
|--------|---------------|---------|----------|--------|--------|--------|--------|----------------|---------|------------|
| 1= | Poor | | | | | | Ex | cellen | t=10 | |
| 1 ① | 2 ⊚ | 3 © | 4 | 5 | 6 © | 7 © | 8 | 9 © | 10 © | Don't Know |
| | | | | | | | | | | |
| | ease r | | e bala | nce of | f grap | hics a | nd te | xt on t | he SS | A Internet |
| Appea | | | e bala | nce of | f grap | hics a | | ct on t | | A Internet |

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/com/reach.htm

Cancel



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MID: tEtMY0Q8EMsQlUkRVwUM4w4C

Date: 3/1/2013



Model questions utilize the ACSI methodology to determine scores and impacts **ELEMENTS** (drivers of satisfaction) CUSTOMER SATISFACTION **FUTURE BEHAVIORS** Use other online applications (1=Very Unlikely, 10=Very Likely) Look and Feel (1=Poor, 10=Excellent, Don't Know) What is your **overall satisfaction** with the online disability appeal? How likely are you to use other on-line applications/forms on the Social Please rate the visual appeal of the online disability appeal. (1=Very Dissatisfied, 10=Very Satisfied) Security web site? How well does the online disability appeal **meet your expectations**? Please rate the balance of graphics and text on the online disability appeal. (1=Falls Short, 10=Exceeds) How does the online disability appeal compare to your idea of an ideal online form? Please rate the readability of the pages on the online disability appeal. (1=Not Very Close, 10=Very Close) 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 o 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

FC

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.

Element rotation scheme has been added

Date: 6/12/2013 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 Use Other Online Look and Feel (1=Poor, 10=Excellent, Don't Know) Use other online applications (1=Very Unlikely, 10=Very Likely) Services Look and Feel - Appeal Please rate the visual appeal of the online disability appeal. Satisfaction What is your overall satisfaction with the online Overall disability appeal? (1=Very Dissatisfied, 10=Very 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 How does the online disability appeal compare to your Ideal 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 -Please rate the consistency of speed from page to page in the online disability Consistency Site Performance -Please rate the ability to load pages without getting error messages in the online Errors disability appeal Plain Language - Clear Please rate the clarity of the wording in the online disability appeal. Plain Language -Please rate how well you understand the wording in the online disability appeal. Understandable Plain Language -Concise Please rate the online disability appeal on its use of short, clear sentences.

SSA - iAppeals

MID: ZpNoNJE50NYgMZApls95Eg==

Date: 3/1/2013



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

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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 |
| 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 Vertic | 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? | | A | Radio Button One Up Vertical | Single | Y | Skip Logic | New or Repeat? |
| STE0058576 | Α | 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 | | Radio Button One Up Vertical | Single | Y | | Frequency |
| MAC0709 | | Did you complete your online disability appeal today? | More than 25 times per week Yes, I completed my online appeal today No, I plan to complete it later No, I do not plan to complete it | ВВ | Radio Button One Up | Single | Y | | Complete today |
| STE0058579 | В | Please tell us why you did not complete your appeal during today's session. | rio, i do not plan to complete t | | 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 Vertic | Single | Y | | Time |
| MAC0711 | | Did 特別 experis noe 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 quest 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 |
| MACU/12 | | above, please provide specific information if possible. (i.e. Which questions or sections were difficult? Where did you receive an error message? etc.) | | | , , | | | | 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 | | | 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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| | | | SSA - iAppeals CUSTOM QUESTION LIST | | | | | | |
|-------------------|------------------------|--|---|------------|---|------------------------------|-----------------|-------------------------|---------------------------|
| QID (Group ID) | Skip Logic Label | Question Text Please rate the ease of navigating through the online | Answer Choices (limited to 50 characters) | Skip to | Type (select from list) Drop Down, Select one | Single or Multi Single | Required Y/N | Special Instructions | CQ Label Ease of |
| MAC0713 | | disability appeal. | Very easy Somewhat easy Somewhat difficult Very difficult | | Brop Bown, Scient one | Jiligie | ' | | 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 | С | What personal and/or medical information did you not have ready when you started? | | | 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 | Laber | Which of the following best describes your role in using the | Self | 10 | Radio Button One Up Vertic | | Y | Skip Logic | Role |
| | | online disability appeal today? | Attorney or Attorney's Staff | i | | | - | | |
| | | | Non-Attorney Representative or Non-Attorney Representative's Staff Other Third Party Representative (e.g. Family Member, Social Service Agency Worker, Case Manager) | | | | | | |
| MAC0708 | | Did you start a new online disability appeal today or did you return to work on an appeal you previously started? | | | Radio Button One Up Vertical | Single | Y | Skip Logic | New or Repeat? |
| | | | returned to work on an appeal previously started | Α | | | | | |
| | Α | 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 | | Radio Button One Up Vertical | Single | Y | | Frequency |
| | | | Less than five times a week | 1 | | | | | |
| | | | 5-10 times per week |] | | | | | |
| | | | 11-25 times per week | | | | | | |
| MAC0709 | | Did you complete your online disability appeal today? | Yes, I completed my online appeal today | | Radio Button One Up | Single | Υ | | Complete today |
| WACUTUS | | Did you complete your orinine disability appeal today? | No, I plan to complete it later | В | · / | Sirigie | ' | | Complete today |
| | | | No, I do not plan to complete it later | B | | | | | |
| | В | Please tell us why you did not complete your appeal during | ivo, i do not pian to complete it | | Text Field, 1,000 char limit | | N | Skip Logic | OE_Did not |
| | | today's session. | | | | | | | complete today |
| MAC0710 | | How much time have you spent on your online disability appeal? | Less than 20 minutes | | Radio Button One Up Vertic | Single | Y | | Time |
| | | арреа: | 20 – 40 minutes | 1 | | | | | |
| | | | 40 minutes - 1 hour | 1 | | | | | |
| | | | 1 - 2 hours | 1 | | | | | |
| | | | 2 or more hours | 1 | | | | | |
| | | 100 | Not sure | | | | | | |
| MAC0711 | | Did MRPexperience 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 | | Checkbox, one-up vertical | Multi | N | Skip Logic | Form Experienc |
| | | | I had difficulty understanding the questions because they were not clearly written | | | | | | |
| | | | I did not have the information necessary to answer the questions | 1 | | | | | |
| | | | I had difficulty editing the medical information (e.g. doctors, medication, | | | | | | |
| | | | etc.) | | | | | | |
| | | | I had difficulty editing other information | 1 | | | | | |
| | | | I was unable to print | 1 | | | | | |
| | | | I did not have enough time to complete | 1 | | | | | |
| | | | 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 |] | | | | | 1 |
| | | | I did not have any difficulties | | | | | | |
| 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 | | Drop Down, Select one | Single | Y | | Welcome Page |
| | | | Somewhat helpful | 1 | | | | | |
| | | | Not helpful at all | - | | | | | |
| | | | Did not read the Welcome Page Don't remember | 1 | | | | | |
| 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 | | Dron Down Colont or - | Cinalo | Y | | Pop-up Help |
| CA30045093 | | алаату арран артаноп: | Somewhat helpful | 1 | Drop Down, Select one | Single | Y | | Links |
| | | | Not helpful at all | 1 | | | | | |
| | 1 | 1 | | ł | 1 | 1 | l | 1 | 1 |
| | | | Did not read the help links | | | | | | |

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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 |
| MAC0713 | | usaumy appear. | 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 |
| | С | What personal and/or medical information did you not have ready when you started? | | | 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 |

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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 | Laber | Which of the following best describes your role in using the | | | Radio Button One Up Vertic | | Y | Skip Logic | Role |
| VIACO101 | | online disability appeal today? | Attorney or Attorney's Staff Non-Attorney Representative or Non-Attorney Representative's Staff Other Third Parry Representative (e.g. Family Member, Social Service Agency Worker, Case Manager) | | Radio Button One Op Vento | Sirigie | ' | Skip Edgic | Role |
| MAC0708 | | Did you start a new online disability appeal today or did you return to work on an appeal you previously started? | | | Radio Button One Up Vertical | Single | Y | | New or Repeat? |
| MAC0709 | | Did | | - | Radio Button One Up | Single | Y | | 0 |
| WAC0709 | | Did you complete your online disability appeal today? | Yes, I completed my online appeal today | | Radio Button One Up | Single | Y | | Complete today |
| | | | No, I plan to complete it later | 1 | | | | | |
| | | | No, I do not plan to complete it | | | | | | |
| MAC0710 | | How much time have you spent on your online disability appeal? | Less than 20 minutes | | Radio Button One Up Vertic | Single | Y | | Time |
| | | | 20 – 40 minutes | | | | | | |
| | | false | 40 minutes - 1 hour | 1 | | | | | |
| | | | 1 - 2 hours | 1 | | | | | |
| | | | 2 or more hours | 1 | | | | | |
| | | | Not sure | | | | | | |
| 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 | | Checkbox, one-up vertical | Multi | N | Skip Logic | Form Experienc |
| | | | I had difficulty understanding the questions because they were not clearly written | | | | | | |
| | | | I did not have the information necessary to answer the questions | 1 | | | | | |
| | | | I had difficulty editing the medical information (e.g. doctors, medication, etc.) | | | | | | |
| | | | I had difficulty editing other information | 1 | | | | | |
| | | | I was unable to print | 1 | | | | | |
| | | | I did not have enough time to complete | 1 | | | | | |
| | | | received an error message or was "kicked out" of the appeal | | | | | | |
| | | | The text box blanks did not allow enough characters for my answers | | | | | | |
| | | | Other | 1 | | | | | |
| | | | I did not have any difficulties | 1 | | | | | |
| 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 |
| | | How helpful was the information on the online disability | Van halaful | | Drop Down, Select one | Single | <u>Y</u> | | |
| MAC0714 | | appeal Welcome Page? | Very helpful | | | | _ | | Welcome Page |
| | | | Somewhat helpful |] | | | | | |
| | 1 | | Not helpful at all | 1 | | | | | |
| | 1 | | <u>Did not read the Welcome Page</u> | 1 | | | | | |
| | 1 | | <u>Don't remember</u> | | | | | | |
| | | 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 | | Drop Down, Select one | Single | Y | | Pop-up Help Links |
| | | | Somewhat helpful | 1 | | _ | | | |
| | | | Not helpful at all | 1 | | | | | |
| | 1 | | and the second s | 1 | 1 | 1 | 1 | 1 | 1 |
| | | | Did not read the help links | | | | | | |

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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 | | usaumy appear. | Very easy Somewhat easy Somewhat difficult Very difficult | | Drop Down, Select one | <u>Single</u> | Ÿ | | 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 | | Necessary Documents |
| MAC0716 | | How can we improve the online disability appeal? Please be as specific as possible. (Examples: What information we could have provided upfron!? Do you have any suggested changes or updates?) | | | Text Field, 1,000 char limit | | N | | Improvement |

red & strike through: DELETE underlined & <u>italicized</u>: RE-ORDER ION EWORDING 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 |
|-------------------|------------------------|---|---|-------------|---|--------------------|-----------------|-------------------------|----------------------------------|
| ACQWro0006963 | | Internet Appeal Form(s) today> online disability appeal today? Select one. | Self Attorney or Attorney's Staff Non-Attorney Representative'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 H | Radio Button One Up Vertic | Single | Y | Skip Logic | Role |
| ACQWro0006964 | н | How did you first learn about the Internet Appeal? | Deability-denial-letter-from-SSA SSA-Representative SSA-Website Third-Party-Representative Other | | Radio Button One Up Vertic | Single | ¥ | 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 Vertie | Single | ¥ | 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 | | both the Internet Appeal Request and the Disability Report. | Less than 20 minutes 20 – 40 minutes 40 minutes 1 - 2 hours 1 - 2 hours 2 or more hours Note for ForeSee DOT: Please I changed position on the survey Not sure | note th | Radio Button One Up Vertic nat this question has se update. Thanks! | Single | Y | | Time |
| SAC0018 | | Which part(s) of the Internet Appeal did you complete teday? | Internet Appeal Request (reconsideration or hearing) Disability Report - Appeal (medical information) Both Not sure | A, X B | Radio Button One Up | Single | ¥ | | Form |
| SAC0019 | A | Which Internet Appeal Request form did you complete loday? | 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 Vertic | Single | ¥ | | Type of Appeal |
| ACQWr00006966 | × | Why did you only complete the Internet Appeal Request and not the Disability Report — Appeal (medical Taggetion)? | I-was not-aware of the Disability Report—Appeal I-diff-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 disabiling condition prevents me from working on the computer for ong-periods of time Other | θ | Radio Button One Up Vertic | Single | ¥ | Skip Logic | Why not DR- Appeal |
| ACQWro0020176 | 0 | Please tell us your other reasons for not completing the Disability Report - Appeal (medical information). | | Ť | Text Field, no char limit | | N | Skip Logic | Other - did not complete DR-A |

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| | | sarvey (see that tas). | | | | | | | |
|----------------|---------------|--|--|------|----------------------------------|-----------|----------|-------------------------|------------------------|
| | | | | | | | | | |
| QID | Skip Logic | | Answer Choices | Skip | | Single or | Required | Special | |
| (Group ID) | Label | Question Text | (limited to 50 characters) | to | Type (select from list) | Multi | Y/N | 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 | Very-Helpful | | Drop Down, Select one | Single | ¥ | Multiple List | Helpful - Video |
| | | completing your appeal? | | | | | | Groups | |
| | | | | | | | | | |
| | | The "Preparing to File Your Appeal Online" video | | | | | | | |
| | | | Somewhat Helpful | - | | | | | |
| | | | Not Helpful at all Didn't use | 1 | | | | | |
| | | | Don't remember | 1 | | | | | |
| MMW0751 | | The "Checklist: Information You Will Need" | Very Helpful | | Drop Down, Select one | Single | ¥ | Multiple List Groups | Helpful - Checklist |
| | | | Somewhat Helpful | 1 | | | | | |
| | | | Not Helpful at all |] | | | | | |
| | | | Didn't use | | | | | | |
| MMW0752 | - | The "Tips for Using the Website" link | Don't remember Very Helpful | | Drop Down, Select one | Circula. | ¥ | Multiple List | Helpful - Tips |
| MMVVU752 | | The "Hips for Using the Website" link | Somewhat Helpful | 1 | Drop Down, Select one | Single | + | Groups | Heipiui - Hps |
| | | | Not Helpful at all | 1 | | | | | |
| | | | Didn't use | 1 | | | | | |
| | | | Don't remember | | | | | | |
| 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 | 1 | Radio Button One Up Vertic | Single | ¥ | | Site Experience |
| | | and microsty open online. | Appeal | | | | | | |
| | | | Other | 1 | | | | | |
| SAC0024 | | Did you experience any problems using the Internet Appeal | The information on form(s) did not seem to be organized in a logical | | Checkbox, one-up vertical | Multi | N | Skip Logic | Form Experience |
| | | > of the following while completing the online disability appeal? Check all that apply. | manner> The questions did not seem to be organized in a logical manner | Ŧ | | | | | |
| | | | I had difficulty understanding the questions because they were not clearly written | Ŧ | | | | | |
| | | | I did not have the information necessary to answer the questions | Ŧ | | | | | |
| | | | 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 | 1 | | | | | |
| | | | The language used on the form(s) was too technical | Ŧ | | | | | |
| | | | Other | Ŧ | | | | | |
| | | | I did not have any problems using the Internet Appeal> difficulties | | | | | | |
| | | So that we can better identify the difficulties you indicated | | | Text Field, 1,000 char limit | | N | | Difficult |
| | | above, please provide specific information if possible. (i.e. Which questions or sections were difficult? Where did you | | | | | | | |
| | | receive an error message? etc.) | | | | | | | |
| | | | | | | | | | |
| ACQWre0006968 | Ŧ | Please tell us about any technical problems you may have | I did not have any technical problems | | Checkbox, one-up-vertical | Multi | N | Skip Logic | Technical |
| ACQVIIIOOOOOOO | 1 . | experienced. Check all that apply. | could not navigate back to previous information | 1 | Checkbox, one up vertical | Widit | . " | OKIP LOGIC | Technical |
| | | | I was unable to print | 1 | | | | | |
| | | | The pages loaded slowly | 1 | | | | | |
| | | | I ran out of time on the screen and was locked out | | | | | | |
| | | Disease tell us shout any other technical prokings | Other | e | Tout Field, no ober fire! | | | Chin Logia | Other Teebris |
| ACQWro0006969 | e | Please tell us about any other technical problems you experienced. | | | Text Field, no char limit | | | Skip Logic | Other Technica |
| ACQWre0006970 | | How would you rate the amount of time it took you to | Less than you expected | | Radio Button One Up Vertic | Single | ¥ | | Expectation |
| | | complete your Internet Appeal? | About what you expected |] | | | | | |
| | | | More than you expected Haven't completed the form yet | 1 | | | | | |
| | | | mavent completed the form yet | 1 | | | | | |
| | 1 | 1 | | J | I . | l | l | T. | ı |

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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 |
|-------------------|------------------------|--|---|------------|---------------------------------|--------------------|-----------------|-------------------------|------------------------|
| | | 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 upfort? Do you have any suggested changes or updates?) | | | Text Field, 1,000 char limit | | N | | Improvement |

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| | Skip | | | | | | |
|-------------------|----------------|---|--|------------|-----------------------------|--------------------|-----------------|
| QID (Group ID) | 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 | Self | Н | Radio Button One Up Vertica | Single | Υ |
| | | Internet Appeal Form(s) today? Select one. | Attorney or Attorney's Staff | s | | 3 - | |
| | | | Non-Attorney Representative or Non-Attorney Representative's Staff | s | | | |
| | | | Other Third Party Representative (e.g. Family Member, Social Service | Н | | | |
| | | | Agency Worker, Case Manager) | | | | |
| ACQWro0006964 | Н | How did you first learn about the Internet Appeal? | Disability denial letter from SSA | | Radio Button One Up Vertica | Single | Y |
| · | | '' | SSA Representative | 1 | · | | |
| | | | SSA Website | 1 | | | |
| | | | Third Party Representative | 1 | | | |
| | | | Other | 1 | | | |
| ACQWro0006965 | S | How often do you use the Internet Appeal? | This was the first time. | | Radio Button One Up Vertica | Single | Y |
| | | | Less than five times a week | 1 | | | |
| | | | 5-10 times per week | 1 | | | |
| | | | 11-25 times per week | 1 | | | |
| | | | More than 25 times per week | 1 | | | |
| SAC0018 | | Which part(s) of the Internet Appeal did you complete | Internet Appeal Request (reconsideration or hearing) | A, X | | | Y |
| | | today? | Disability Report - Appeal (medical information) | В | | Single | |
| | | | Both | 1 | Radio Button One Up | _ | |
| | | | | | Vertical | | |
| | | | Not sure | 1 | | | |
| SAC0019 | Α | Which Internet Appeal Request form did you complete | Request for reconsideration | | Radio Button One Up Vertica | Single | Υ |
| | | today? | Request for hearing by administrative law judge | 1 | | | |
| | | | Not sure | 1 | | | |
| | | | I did not complete the Internet Appeal Request form today | | | | |
| ACQWro0006966 | Х | Why did you only complete the Internet Appeal Request | I was not aware of the Disability Report - Appeal | | Radio Button One Up Vertica | Single | Υ |
| | | and not the Disability Report - Appeal (medical | I did not understand the questions | | | | |
| | | information)? | 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 | 0 | | | |
| | 0 | Please tell us your other reasons for not completing the | | | Text Field, no char limit | | N |
| | | Disability Report - Appeal (medical information). | | | | | |
| | | | | | | | |
| MMW0750 | | Before completing your application today, did you use any | Very Helpful | | Drop Down, Select one | Single | Y |
| | | of the features listed below, and if so, how helpful was it in | | | | | |
| | | completing your appeal? | | | | | |
| | | The " Preparing * o File Your Appeal Online" video false | | | | | |
| | | false false | | | | | |
| | | | Somewhat Helpful | | | | |
| | | | Not Helpful at all | - | | | |
| | | | Didn't use | | | | |
| | | | Don't remember | | | | |
| MMW0751 | | The "Checklist: Information You Will Need" | Very Helpful | | Drop Down, Select one | Single | Y |
| | | | Somewhat Helpful | - | | | |
| | | | Not Helpful at all | - | | | |
| | | | Didn't use | 1 | | | |
| | | | Don't remember | 1 | | | |
| | | | Dont remember | | | | |

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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 |
|-------------------|------------------------|--|--|-------------|-----------------------------|--------------------|-----------------|
| 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 Vertica | 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 | Checkbox, one-up vertical | Multi | N |
| ACQWro0006968 | | 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 | С | Checkbox, one-up vertical | Multi | N |
| ACQWro0006969 | | 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 Vertica | 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 Vertica | Single | Y |



Special Instructions Skip Logic

Skip Logic

Skip Logic

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Multiple List Groups

Multiple List Groups





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|---------------|-------|--|---|------|------------------------------|-----------|----------|
| | | | | | | | |
| | | | | | | | |
| | Skip | | | | | | |
| QID | Logic | | Answer Choices | Skip | | Single or | Required |
| (Group ID) | Label | Question Text | (limited to 50 characters) | to | Type (select from list) | Multi | Y/N |
| ACQWro0006963 | | Which of the following best describes your role in using the | Self | н | Radio Button One Up Vertica | Single | Y |
| | | Internet Appeal Form(s) today? Select one. | Attorney or Attorney's Staff | S | | | |
| | | | Non-Attorney Representative or Non-Attorney Representative's Staff Other Third Party Representative (e.g. Family Member, Social Service | S | | | |
| | | | Agency Worker, Case Manager) | H | | | |
| ACQWro0006964 | Н | How did you first learn about the Internet Appeal? | Disability denial letter from SSA | | Radio Button One Up Vertica | Single | Y |
| | | | SSA Representative | | | | |
| | | | SSA Website | _ | | | |
| | | | Third Party Representative | - | | | |
| ACQWro0006965 | S | How often do you use the Internet Appeal? | Other This was the first time. | | Radio Button One Up Vertica | Single | Y |
| 7000000902 | 3 | now often do you use the internet Appear? | Less than five times a week | - | readio Bullon One Op Vertice | Sirigle | |
| | | | 5-10 times per week | - | | | |
| | | | 11-25 times per week | - | | | |
| | | | More than 25 times per week | - | | | |
| SAC0018 | | Which part(s) of the Internet Appeal did you complete | Internet Appeal Request (reconsideration or hearing) | A, X | | | Y |
| | | | Disability Report - Appeal (medical information) | B | | Single | |
| | | | Both | | Radio Button One Up | ŭ | |
| | | | | | Vertical . | | |
| | | | Not sure | | | | |
| SAC0019 | Α | Which Internet Appeal Request form did you complete | Request for reconsideration | | Radio Button One Up Vertica | Single | Y |
| | | today? | Request for hearing by administrative law judge | | | | |
| | | | Not sure | | | | |
| | | | I did not complete the Internet Appeal Request form today | | | | |
| ACQWro0006966 | Х | Why did you only complete the Internet Appeal Request and not the Disability Report - Appeal (medical | I was not aware of the Disability Report - Appeal | _ | Radio Button One Up Vertica | Single | Y |
| | | information)? | I did not understand the questions I did not have new medical information to provide | | | | |
| | | in a series of the series of t | 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 | | | | |
| | | 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 | | Drop Down, Select one | Single | V |
| | | false | Somewhat Helpful | - | Drop Down, Sciect one | Sirigie | , i |
| | | | Not Helpful at all | | | | |
| | | | Didn't use | | | | |
| | | | Don't remember | | | | |
| | | The "Checklist: Information You Will Need" | Very Helpful | | Drop Down, Select one | Single | Υ |
| | | | Somewhat Helpful | | | | |
| | | | Not Helpful at all | | | | |
| | | | Didn't use | | | | |
| | | | Don't remember | | | | |
| | | The "Tips for Using the Website" link | Very Helpful | | Drop Down, Select one | Single | Υ |
| | | | Somewhat Helpful | | | | |
| | | | Not Helpful at all | | | | |
| | | | Didn't use | | | | |

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| | Skip | | | | | | |
|-------------------|----------------|---|--|------------|-----------------------------|--------------------|-----------------|
| QID (Group ID) | Logic Label | Question Text | Answer Choices (limited to 50 characters) | Skip to | Type (select from list) | Single or Multi | Required Y/N |
| | | | Don't remember | | | | |
| 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 | - | Radio Button One Up Vertica | Single | Y |
| SAC0024 | | | Other | | | | |
| 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 | т | Checkbox, one-up vertical | Multi | N |
| | | | The language used on the form(s) was too technical | Т | | | |
| | | | The information on form(s) did not seem to be organized in a logical manner | т | | | |
| | | | I did not have the information necessary to answer the questions | T | | | |
| | | | Other | Т | | | |
| ACQWro0006968 | | Please tell us about any technical problems you may have | I did not have any technical problems | _ | Checkbox, one-up vertical | Multi | N |
| | | experienced. Check all that apply. | I could not navigate back to previous information | | | | |
| | | | I was unable to print | 1 | | | |
| | | | My re-entry number did not work | 1 | | | |
| | | | The pages loaded slowly | 1 | | | |
| | | | I ran out of time on the screen and was locked out | | | | |
| | | | I was unable to return to the Internet Appeal after signing out | 1 | | | |
| | | | Other | С | | | |
| ACQWro0006969 | | 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 | Less than 20 minutes | 1 | Radio Button One Up Vertica | Single | Υ |
| | | Appeal? Please think about both the Internet Appeal | 20 – 40 minutes | 1 | | | |
| | | Request and the Disability Report. | 40 minutes - 1 hour | 1 | | | |
| | | | 1 - 2 hours | | | | |
| | | | 2 or more hours | 1 | | | |
| | | | Not sure | | | | |
| ACQWro0006970 | | How would you rate the amount of time it took you to | Less than you expected | - | Radio Button One Up Vertica | Single | Υ |
| | | complete your Internet Appeal? | About what you expected | 1 | | | |
| | | | More than you expected | 1 | | | |
| ļ | | | Haven't completed the form yet | | | | I I |



Special Instructions Skip Logic

Skip Logic

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Multiple List Groups

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Special Instructions

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| Skip Logic Label | | | | | | |
|------------------------|--|---|--|--|--|--|
| Logic | | | | | | |
| Logic | | | | I I | | |
| Logic | | 1 | | | | |
| | | Answer Choices | Skip | | Single or | Require |
| Lubci | Question Text | (limited to 50 characters) | to | Type (select from list) | Multi | Y/N |
| | Which of the following best describes your role in using the | Self | Н | Radio Button One Up Vertica | Single | Υ |
| | Internt Appeal Form(s) today? Select one. | Attorney or Attorney's Staff | S | | | |
| | | Non-Attorney Representative or Non-Attorney Representative's Staff | S | | | |
| | | Other Third Party Representative (e.g. Family Member, Social Service Agency Worker, Case Manager) | н | | | |
| Н | How did you first learn about the Internet Appeal? | Disability denial letter from SSA | | Radio Button One Up Vertica | Single | Υ |
| | | SSA Representative | | | | |
| | | SSA Website | | | | |
| | | Third Party Representative | | | | |
| | | Other | | | | |
| S | How often do you use the Internet Appeal? | This was the first time. | | Radio Button One Up Vertica | Single | Υ |
| | | Less than five times a week | | | | |
| | | 5-10 times per week | | | | |
| | | 11-25 times per week | | | | |
| | | | | | | |
| | How did you first learn about the Internet Appeal forms? | | | Radio Button One Up Vertica | Single | ¥ |
| | | From an SSA representative | | | | |
| | | SSA Speaker at a Conference | | | | |
| | | | | | | |
| | | , | _ | | | |
| | | | | | | |
| | | | _ | | | |
| | | | | | | |
| | | Other, please specify | A | | | |
| A | Other source | | | Text Field – limited to 100 | | |
| | | | | | | Н |
| | | | | Checkbox, one-up vertical | | Y |
| | the internet Appeal did you complete today? | | _ B | | Single | |
| | | Both | | | | |
| | | | _ | Vertical | | |
| | | | | | | |
| | | | 4 | Radio Button One Up Vertica | Single | Y |
| | | | - | | | |
| | | | _ | | | |
| | | | | | 6: 1 | |
| Х | | , 1 11 | - | Radio Button One Up Vertica | Single | Υ |
| | | | - | | | |
| | information): | · | - | | | |
| | | | - | | | |
| | | long periods of time | | | | |
| | | | | | | |
| B | Did you complete the Disability Appeal Report form today? | | | Radio Button One Up Vertica | Single | ¥ |
| | | | | | | |
| | | | | | | |
| | | | 4 | Radio Button One Up Vertica | Single | ¥ |
| | the Internet Appeal Request form today? | Ne Net-sure | _ | | | |
| | S | How often do you use the Internet Appeal? How did you first learn about the Internet Appeal forms? Which form(s) did you work on today?> Which part(s) of the Internet Appeal did you complete today? A Which Internet Appeal Request form did you complete today? X Why did you only complete the Internet Appeal Request and not the Disability Report - Appeal (medical information)? B Did you complete the Disability Appeal Report form today? | Agency Worker, Case Manager) H How did you first learn about the Internet Appeal? SSA Website Third Party Representative SSA Website Third Party Representative Other Other 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 More than 25 times per week From the SSA website From an SSA representative SSA Speaker at a Conference Disability denial notice from SSA Direct Mail Freedwed from Social Security Webeast Other Direct Contact Initiated by Social Security Prefessional Association Other, please speeily Which form(s) did you work on today?> Which part(s) of Internet Appeal Request (reconsideration or hearing) Disability Report - Appeal (medical information) Both Not sure Request for hearing by administrative law judge Not sure I did not complete the Internet Appeal Request and not the Disability Report - Appeal (medical information) I did not have new feedical information to provide I did not have the information necessary to answer the questions My disabiling condition prevents me from working on the computer for long periods of time Other Did you visit the ssa.gov homepage today before arriving at Yes Not sure Did you visit the ssa.gov homepage today before arriving at Yes Not sure Did you visit the ssa.gov homepage today before arriving at Yes | Agency Worker, Case Manager) How did you first learn about the Internet Appeal? Sa Representative SSA Representative SSA Website Third Party Representative Other This was the first time. Less than five times a week 5-10 times per week 1-1-25 times per week More than 25 times per week More than 25 times per week From the SSA website From an SSA representative SSA Speaker at a Conference Disability denial notice from SSA Direct Mail- received from—Social-Security Professional-Association Other-Direct Contact-Initiated by-Social-Security Pr | Agency Worker, Case Manager) Now did you first learn about the Internet Appeal? So How often do you use the Internet Appeal? So How often do you use the Internet Appeal? This was the first time. Less than five times a week. 5-10 times per week 1-12-55 times per week 1-12 | Agency Worker, Case Manager) Flow did you first learn about the Internet Appeal? San Representative San Webstee Third Party Representative San Webstee San Webstee Third Party Representative San Webstee San Webstee San Webstee Third Party Representative San Webstee San Webstee From the SSA webstee From the SSA webstee San Webstee From the SSA webstee San Webst |

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| QID (Group ID) | Skip Logic Label | Ouestion Text | Answer Choices (limited to 50 characters) | Skip to | Type (select from list) | Single or Multi | Require Y/N |
|--------------------|------------------------|---|--|------------|-----------------------------|--------------------|----------------|
| SAC0022 | Laber | 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 | | Checkbox, one up vertical | Multi | ¥ |
| | | | 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 | - | | | |
| | | 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 | | Radio Button One Up Vertica | Single | Y |
| AC0024 | | Please tell us what you experienced while working on | Other I did not have any problems using the Internet Appeal | | Checkbox, one-up vertical | Multi | N |
| .0002 | | your Internet Appeal form(s) today. > Did you experience any problems <i>using</i> the Internet Appeal? | had difficulty understanding the questions>I had difficulty understanding the questions because they were not clearly written | Т | one up verteal | manu | |
| | | Check all that apply. | 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 | T | Т | | |
| | | | l-experienced technical difficulties (e.g. broken links, error messages) l-was not able to save my information | | | | |
| | | | l-could not navigate back to previous information I did not have the information necessary to answer the questions | Т | | | |
| | | | Other None of the above | Т | | | |
| | Т | 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 | | Checkbox, one-up vertical | Multi | N |
| | | experienced. Oneok an trial apply. | Wy re-entry number did not work | | | | |
| | | false | 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 | С | | | |
| | С | Please tell us about any other technical problems you experienced. | | | Text Field, no char limit | | |
| ED12764 | | 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 |
| C0026 | | 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 | Less than 20 minutes 20 – 40 minutes | | Radio Button One Up Vertica | Single | Y |
| | | 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 | 40 minutes - 1 hour 1 - 2 hours 2 or more hours | | | | |
| | | the Disability Report. How would you rate the amount of time it took you to | Not sure Less than you expected | | Radio Button One Up Vertica | Single | Y |
| | | complete your Internet Appeal? | About what you expected More than you expected | 1 | | | |

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





Skip Logic

Skip Logic

OPS Group

OPS Group









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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 | Require Y/N |
|-------------------|------------------------|---|--|------------|--|--------------------|----------------|
| AC0016 | | How did you first learn about the Internet Appeal forms? | From the SSA website | | Radio Button One Up Vertica | Single | Υ |
| (100010 | | Tow do you not can about the interior appeal forms. | From an SSA representative SSA Speaker at a Conference Disability denial notice from SSA Direct Mail I received from Social Security Webcast | | That Sultan Gile op Vento | Cirigic | , i |
| | | | Other Direct Contact Initiated by Social Security Professional Association Other, please specify | A | | | |
| AC0017 | Α | Other source | | | Text Field – limited to 100 characters | Single | N |
| AC0018 | | Which form(s) did you work on today? | Internet Appeal Request Disability Report - Appeal Not sure | A B | Checkbox, one-up vertical | Multi | Y |
| AC0019 | А | 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 Vertica | Single | Y |
| AC0020 | В | Did you complete the Disability Appeal Report form today? | Yes No Not sure | | Radio Button One Up Vertica | Single | Y |
| AC0021 | | 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 Vertica | Single | Y |
| AC0022 | | 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 | | Checkbox, one-up vertical | Multi | Y |
| AC0024 | | Please tell us what you experienced while working on your Internet Appeal form(s) today. | None of the above 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 |
| ED12764 | | 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 |
| AC0026 | | 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 | | Radio Button One Up Vertica | Single | Y |

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| QID (Group ID) | Skip Logic Label | Qu | uestion Text | Answer Choices (limited to 50 characters) Not sure | Skip to | Type (select from list) | Single or Multi | Required Y/N |
|-------------------|------------------------|--|--------------|---|------------|-----------------------------|--------------------|-----------------|
| 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 Vertica | Single | Y |



Special Instructions OPS Group

OPS Group





Special Instructions

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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 |
|-------------------|------------------------|--|--|------------|--|--------------------|-----------------|
| SAC0016 | | How did you first learn about the Internet Appeal forms? | From the SSA website | | Radio Button One Up Vertica | Single | Y |
| | | | 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 | | | |
| SAC0017 | Α | Other source | | | Text Field – limited to 100 characters | Single | N |
| SAC0018 | | Which form(s) did you work on today? | Internet Appeal Request form | Α | Checkbox, one-up vertical | Multi | Y |
| | | (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Disability Appeal Report form> Disability Report - Appeal | В | , , , , , , , | | |
| | | | Not sure | ┪ - | | | |
| SAC0019 | Α | Which Internet Appeal Request form did you complete | Request for reconsideration | | Radio Button One Up Vertica | Single | Y |
| | | | Request for hearing by administrative law judge | | | - 3 - | |
| | | | Not sure | | | | |
| | | | I did not complete the Internet Appeal Request form today | _ | | | |
| SAC0020 | В | Did you complete the Disability Appeal Report form today? | Yes | | Radio Button One Up Vertica | Single | Y |
| | | , the second sec | No | | | - 3 - | |
| | | | Not sure | | | | |
| SAC0021 | | Did you visit the ssa.gov homepage today before arriving at | Yes | | Radio Button One Up Vertica | Single | Y |
| | | the Internet Appeal Request form today? | No | | · | | |
| ļ | | | Not sure | | | | |
| SAC0022 | | Please tell us about your experience today as you navigated the site to get to the Internet Appeal forms. | I started in the Internet Appeal section and therefore did not need to navigate the site | | Checkbox, one-up vertical | Multi | Y |
| | | (check all that apply) | 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 | | | |
| | A | Other navigation | | | Text Field — limited to 100 characters | Single | N |
| SAC0024 | | Please tell us what you experienced while working on | I had difficulty understanding the questions | | Checkbox, one-up vertical | Multi | N |
| | | your Internet Appeal form(s) today. | 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 | | | |
| | A | Other experience | | | Text Field – limited to 100 | | |

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



Special Instructions OPS Group

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| 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 |