

Rate Social Security's Service

ABOUT OUR SURVEY



Social Security would like to know how well we served you when you filed your application for retirement benefits. The survey asks you to rate the service you received in person, on the telephone, or on our website. The survey also asks you to share how the pandemic affected your decision to retire. The survey should take about 10 minutes to finish.

- Answer all questions as directed. You may be told to skip over some questions. When that happens, you will see an arrow with a note telling you what question to answer next:

Example: Yes
 No → **SKIP to Question 1**

INSTRUCTIONS FOR MARKING YOUR ANSWERS

- Use a pen with blue or black ink or a number 2 pencil.
- Do not use a pen with ink that soaks through the paper.
- Make no stray marks.
- Keep all entries within the appropriate boxes.

FILING FOR RETIREMENT BENEFITS DURING THE COVID-19 PANDEMIC

1. Did you stop working before or after the COVID-19 pandemic was declared a national emergency on March 13, 2020?

Mark **ONLY one answer.**

- I stopped working **before** the pandemic was officially declared
- I stopped working **after** the pandemic was officially declared
- I am **still currently** working

2. What effect, did the COVID-19 pandemic have on your employment status prior to filing for retirement benefits?

Mark **ONLY one answer.**

- I was laid off/furloughed
- My hours/wages were reduced
- I closed/lost my business
- I was already retired from employment
- None, I am still employed

3. What effect did the COVID-19 pandemic have on your plans about when to file for retirement benefits?

Mark **ONLY one answer.**

- I filed **earlier** than I had planned
- I filed **later** than I had planned
- The pandemic had **no effect** on when I decided to file for retirement

SATISFACTION WITH SOCIAL SECURITY'S TELEPHONE SERVICE

9. Did you ever call Social Security about your application for retirement benefits?

Mark **ONLY one answer.**

- Yes
 No → **SKIP to Question 12.**

10. Did you call Social Security's national toll-free number, a local office, or both?

Mark **ONLY one answer.**

- National toll-free number
 Local Social Security office
 Both
 Not sure

11.

Please
rate the

following aspects of Social Security's telephone service.

Mark <input checked="" type="checkbox"/> one answer for each item.	Excellent	Very Good	Good	Fair	Poor	Very Poor
The automated system that answered your call	<input type="checkbox"/>					
How long it took you to get through to an employee	<input type="checkbox"/>					
How clearly the agent explained things	<input type="checkbox"/>					

SATISFACTION WITH SOCIAL SECURITY'S IN-PERSON SERVICE

12. Did you ever visit a Social Security office about your application for retirement benefits?

Mark **ONLY one answer.**

- Yes
 No → **SKIP to Question 16.**

13. Did you have an appointment when you visited a Social Security office about your application for retirement benefits?

Mark **ONLY one answer.**

- Yes → **SKIP to Question 15.**
 No

14. Did you know that you needed an appointment when you visited a Social Security office?

Mark **ONLY one answer.**

- Yes → **SKIP to Question 16.**
 No → **SKIP to Question 16.**

15. Please rate the following aspects of your visit to the Social Security office.

Mark <input checked="" type="checkbox"/> one answer for each item.	Excellent	Very Good	Good	Fair	Poor	Very Poor
Office privacy	<input type="checkbox"/>					
Waiting time to be served in the office	<input type="checkbox"/>					
How clearly the staff explained things	<input type="checkbox"/>					

OVERALL SATISFACTION WITH THE APPLICATION EXPERIENCE

16. Please rate the following aspects of your experience filing for retirement benefits.

Mark <input checked="" type="checkbox"/> ONLY one answer for each item.	Excellent	Very Good	Good	Fair	Poor	Very Poor
How quickly you received Social Security's decision on your application	<input type="checkbox"/>					
Clarity of Social Security's letter explaining the amount of your benefits and when they would be paid	<input type="checkbox"/>					
Social Security's service overall	<input type="checkbox"/>					

17. Are you more or less likely to use service options like phone, internet, or video since the global pandemic in 2020?

Mark ONLY one answer.

Much more likely	More likely	Unchanged	Less likely	Much less likely
<input type="checkbox"/>				

DOING BUSINESS ONLINE

18. Do you currently use the Internet?

Mark ONLY one answer.

- Yes
- No → **STOP END OF SURVEY**

19. Social Security offers a service called **my Social Security** (www.socialsecurity.gov/myaccount) where people can create a secure online account with a user name and password to conduct various types of business. Have you already created an online account with Social Security?

Mark **ONLY one answer.**

- Yes → **STOP END OF SURVEY**
 No

20. How likely would you be to create an online account for handling future Social Security business?

Mark **ONLY one answer.**

- Very Likely → **STOP END OF SURVEY**
 Somewhat Likely → **STOP END OF SURVEY**
 Not Very Likely → **GO to Question 21.**
 Not at All Likely → **GO to Question 21.**

21. What is the **main** reason why you **might not be likely** to create an online account with Social Security?

Mark **ONLY one answer.**

- Prefer to speak to a person
 Concerned about security and/or privacy of my information
 Problem with computer or Internet access
 Concerned completing online business might be too hard, complicated
 Some other reason you might not use it **Please explain** _____

Thank you for your time and attention with this survey. Please return the completed questionnaire in the enclosed postage-paid envelope as soon as possible to:

Social Security Survey	
<i>[Contractor Return Address]</i>	
<p>PRIVACY ACT STATEMENT</p> <p>The Social Security Administration is authorized to collect the information for this survey under Executive Order 12862, "Setting Customer Service Standards." Your response to these questions is strictly voluntary. The information you provide will be used to help us improve the service that we give you. Your response will not be disclosed to any other government or private agency.</p>	<p>PAPERWORK REDUCTION ACT STATEMENT</p> <p>This information collection meets the requirements of 44 U.S.C. § 3507, as amended by Section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 10 minutes to read the instructions, gather the facts and answer the questions. You may send comments on our time estimate above to: Social Security Administration, 6401 Security Blvd., Baltimore, MD 21235-6401. (<i>Send only comments relating to our time estimate to this address, not the completed form.</i>)</p>
<p>OMB CONTROL NO: 0960-0526 EXPIRATION DATE: TBD</p>	