

Attachment A2b: Ticket Act Provider Survey for WIPA Projects:
Invitation Email (Week 1.5)

Attachment A2b: Ticket Act Provider Survey for WIPA Projects: Invitation Email (Week 1.5)

To: [FILL organizational contact email address]
Subject: Follow up to invitation letter from SSA

OMB Control #: XXXX-XXXX;
Expiration Date: 06/30/20xx



Dear Ticket Act Service Provider:

This email is a follow up to the invitation letter from Susan Wilschke, Associate Commissioner of the Office of Research, Demonstration, and Employment Support at the Social Security Administration (SSA).

We are inviting you to take part in the Ticket Act Provider Survey for Work Incentives Planning and Assistance (WIPA) Projects. This national survey is part of an evaluation SSA is conducting about Ticket to Work and Work Incentives Improvement Act programs. SSA has hired Mathematica, an independent research firm, to carry out the evaluation and to field this survey.

Why this matters. Survey results will help SSA gain insights about WIPA projects' experiences providing Ticket Act program services, the extent to which Ticket Act services meet Supplemental Security Income and Social Security Disability Insurance beneficiaries' needs, features of the Ticket Act programs that work well, and areas for improvement.

About the survey. We are asking you to take part in this voluntary survey, responding on behalf of your WIPA project. The survey takes about 38 minutes to complete, including time spent looking up information or consulting with others, as needed. Mathematica will send you a \$40 check for completing the survey.

To begin the survey:

Go to: [FILL personalized URL] **or** **Scan this QR Code:**

Taking part in the survey is voluntary. You may skip any questions you do not want to answer. To protect your privacy, Mathematica will not share your answers in any way that reveals who you are unless required to do so by Federal laws, regulations, and directives.

More information is available. SSA is hosting an informational website on the evaluation overall. To learn more, go to <https://www.ssa.gov/disabilityresearch/ticketevaluation.html>.

We look forward to learning more about your WIPA project's experiences through this survey. If you have any questions, please call me at XXX-XXX-XXX.

Sincerely,

Holly Matulewicz
Survey Director at Mathematica

Attachment A2b: Ticket Act Provider Survey for WIPA Projects: Invitation Email (Week 1.5)

Please note that this email mailbox is not a secure means of communication with us. It is possible that information you include in an email can be intercepted by others outside of our organization and used by those third parties for purposes you did not intend. For this reason, if you choose to communicate via email, please limit personal information about yourself and include only the minimal information that is necessary to convey your question. Please do not send any personal information such as full name, date of birth, or Social Security number via email.

Privacy Notice: *Confirmit (Forsta) is a nongovernment application that may have different privacy policies from those of the SSA. This application is not under SSA's control and may not follow SSA's privacy, security, or accessibility policies located on their official website at <https://www.ssa.gov/privacy>. Once you access this application, you are subject to Confirmit's (Forsta) policies. As such, by using this application, you may be providing non-government third parties access to your personally identifiable information (PII). Mathematica is taking precautions to protect your privacy and PII, such as by using secure equipment and limiting access to your information. To minimize any risk of access by unauthorized third parties, we recommend that you use a reliable, secured, and private internet connection and complete the survey in a private location. General information about SSA programs may be found at <http://www.ssa.gov/>.*