

Attachment A3e: Ticket Act Provider Survey for P&A Agencies Receiving PABSS Funding: Reminder Email (Week 6)

To: [FILL organizational contact email address]
Subject: PABSS program: your response is needed

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



Dear Ticket Act Service Provider:

I am writing to follow up on an invitation to take part in the Ticket Act Provider Survey for Protection and Advocacy (P&A) Agencies receiving Protection and Advocacy for Beneficiaries of Social Security (PABSS) Funding. We have not yet heard from your P&A agency and want to ensure we have reached the right person to respond on behalf of your P&A agency. We will follow up by phone in the week ahead to answer any questions you may have. More information on the survey, including your personalized link, is below.

About the survey: This national survey is part of an [evaluation](#) the Social Security Administration (SSA) is conducting about Ticket to Work and Work Incentives Improvement Act programs. SSA hired Mathematica, an independent research firm, to conduct the evaluation and to carry out this survey. The survey has questions about your P&A agency overall and your approach to intake and service provision. By taking part in the survey, you will help SSA better understand the extent to which Ticket Act services are meeting Supplemental Security Income and Social Security Disability Insurance beneficiaries' needs, features of the Ticket Act programs that work well, and areas for improvement.

To complete the survey:

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

The survey is ending soon. Please complete it by [FILL END DATE].

Taking part is voluntary. The survey takes about 28 minutes to complete, on average. Mathematica will send you \$40 for completing it. 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.

Have questions or need help? If you have questions, or if someone else at your P&A agency should complete the survey, please call me at XXX-XXX-XXX.

Sincerely,

Holly Matulewicz
Survey Director at Mathematica

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/>.*