

NATIONAL BENEFICIARY SURVEY FINAL ROUND 2 QUESTIONNAIRE

December 1, 2006

National Beneficiary Survey

- TABLE OF CONTENTS -

Section	Page
A.	Screener
B.	Disability and Current Work StatusB-1
C.	Current Employment
D.	Jobs/Other Jobs During 2003
E.	Awareness of SSA Work Incentive Programs and Ticket to Work E-1
F.	Ticket Non-Participants in 2003 F-1
G.	Employment-Related Services and Supports Used in 2003G-1
Н.	Ticket Participants in 2003H-1
I.	Health and Functional StatusI-1
J.	Health InsuranceJ-1
K.	Income and Other Assistance
L.	Sociodemographic InformationL-1
M.	Closing Information and Observations M-1

SECTION A: SCREENER

PRELOADED INFORMATION

```
S1 (A01_a) CLUSTERED SAMPLE
               YES = 01
                               (00, if you prefer) FYI: ONLY NON CLUSTERED = OUTCOMES ONLY
               NO
                     = 02
PARTICIPANTS
S2 (A01_b) SAMPLE GROUP
               S2 = 01 - Round 2 Beneficiaries (new)
               S2 = 02 - Round 1 Longitudinal Participants (responded to Round 1)
               S2 = 03 - Round 2 Participants (new) + Round 1 Longitudinal Participants who did NOT respond to
R1 and did not
                        have a status between 410 and 490 or in the 200s with a hard refusal designation.
S3 (A01_c) REGION - VALUES = 01 - 08, where Region 8 = unclustered sample, that is where S1 = 02
S4 (A01 d) PSU - VALUES = 01010 - 55018; PSU=0 is unclustered sample, aka Region 8
S5 (A01 e) SDATE (DATE SAMPLE PULLED - believed to be June 30, 2004)
S6 (A02) ROUND OF DATA COLLECTION
               Round 1 = 01
               Round 2 = 02 - This is Round 2
               Round 3 = 03
               Round 4 = 04
S7 (A03)
            PHASE - VALUES = 1, 2, 3 (based on state of residence at time of sample selection - Frank/Nuria to
set this value)
S8 (A04_a) FULLNAME (original - may be updated in another block: Current Full Name)
S9 (A04_b) FIRST NAME (original - may be updated in another block: Current First Name)
S10 (A04 c) LASTNAME (original - may be updated in another block: Current Last Name)
S11 (A04 d) BIRTHDATE (original - may be updated in another block: Current Birth Date)
S11a CURRENT AGE: IF A71 = 02 OR 03, USE A68 OR A69 TO CALCULATE CURRENT AGE
S12 (A04_e) GENDER
S13 (A04_f) BSTATUS (Benefit Type)
               BSTATUS = 01 - SSI ONLY BENEFITS
               BSTATUS = 02 - SSDI ONLY BENEFITS
               BSTATUS = 03 - CONCURRENT (BOTH SSI AND SSDI) BENEFITS
S14 (A04_g) SSIAGE (from SSI records –age first received SSI benefits)
S15 (A04_h) TSTATUS (TICKET STATUS AS OF DATE SAMPLE PULLED)
               TSTATUS = 01 PARTICIPANT
               TSTATUS = 02 NONPARTICIPANT
S16 (A04_I) LOCALPAA (LOCAL PROTECTION & ADVOCACY GROUPS) (based on state of residence at A67a)
S17 (A04 j) ENSAMPLE (EN TICKET ASSIGNED TO AT TIME SAMPLE DRAWN)
S18 (A04_k) STATE MED (STATE NAME FOR MEDICAID) (based on state of residence at A67a)
S19 (A04 I) VRNAME (STATE NAME FOR VRA) (based on state of residence at A67a)
S20 (A04 m) Sample Member's Address at time sample was drawn (may be updated in Section A)
S21 (A04 n) Sample Member's Phone Number at time sample was drawn
S22 PROXY - FULL NAME
S23 PROXY - PHONE NUMBER
S24 PROXY - ADDRESS 1, ADDRESS 2, CITY, STATE, ZIP
S25 INTERPRETER NAME - RETAIN SAMPLE MEMBER PHONE NUMBER ASSOCIATED WITH INTERPETER.
FIXE2 The spec is BSTATUS=01,03 and E3=missing in R1 then FIXE2=01
FIXE11 The spec is AGE<25 and SSIAGE<=22 and E12=missing in R1 the FIXE11=01
FIXE14 The spec is BSTATUS=02,03 and E15=missing in R1 then FIXE14=01
FIXE23 The spec is TSTATUS=01 and E21=00,d,r and E22=00,d,r and E24=missing in R1 then FIXE23=01
```

RTYPE: Set at A110 or A110a.

PROGRAMMER: INSTITUTE A PARALLEL BLOCK THAT ALLOWS THE INTERVIEWER TO SWITCH RESPONDENT FROM SAMPLE MEMBER TO PROXY OR FROM PROXY TO SAMPLE MEMBER AT ANY POINT IN THE INTERVIEW. UPDATE RTYPE BASED ON THE PARALLEL BLOCK.

PROGRAMMER: A CURRENT CONTACT BLOCK WILL STORE ANY UPDATES TO S8, S9, S10, S11, S20, and S21.

UPDATES TO THE OTHER CURRENT CONTACT BLOCK CAN COME FROM THE SCREENER OR LOCATING. PROGRAMMER: STORE UPDATED NAME, ADDRESS, AGE, PROXY, ETC INFORMATION IN ADDRESS UPDATE BLOCK OR NAME UPDATE BLOCK.

(AII)

A0. CALL SCREEN. PROGRAMMER, DISPLAY: INTERVIEWER: YOU ARE CALLING...(ONE ONLY) NOTE: 01, 04, 07 THROUGH 15 ARE SET IN OVERNIGHT PROCESSING. 02, 03, 05 AND 06 WOULD BE IN THE FRONT END FOR THE INTERVIEWER TO SELECT.

SITUATION	DISPLAY, CALLING FOR	GO TO
01 NEW SCREENER FOR NAME	CALL TO {NAME}	A1
02 CATI CALL-IN	{NAME} CALLING IN	A11
03 CAPI INTERVIEW	{NAME – CAPI}	A64
04 CALL NAME AFTER REMAIL	{NAME , AFTER REMAIL}	A1
05 RELAY CALL IN	{NAME} CALLING IN – RELAY	A11
06 TTY CALL IN	{NAME} CALLING IN – TTY	A11
07 CALL NAME USING RELAY	{NAME} – RELAY	A10
08 CALL NAME USING TTY	{NAME} – TTY	A10
09 CALL NAME USING AMPLIFIER	{NAME} – AMPLIFIER	A1
10 CALL TO IDENTIFIED PROXY	PROXY NAME	A56
11 CALLBACK TO PROXY AFTER REMAIL	PROXY NAME	A56
12 INFORMANT/PROXY CALL IN		A11
13 CALL TO NEW PROXY	PROXY NAME	A56
14 CALL INTERPRETER	INTERPRETER NAME	A8
15 CALL TO NEW / UNNAMED INTERPRETER	INTERPRETER NAME	A4b

CALL TO RESPONDENT

(A0	-0	11	Ω	$\cap P$	UQ)	
IAU	= u	η.	04.	UK	USI	

A1. Hello, my name is _____, calling on behalf of the Social Security Administration. May I please speak with {NAME}?

INTERVIEWER: We are not selling anything or asking for a contribution.

SPEAKING	01	(A10)
WANTS MORE INFORMATION	02	
{NAME} COMES TO PHONE	03	(A10)
CALL BACK LATER	04	SET A100 = 01
(A100)		
{NAME} MOVED	05	(A30)
POSSIBLE PARTICIPATION PROBLEM	06	(A13)
HOSPITALIZED	07	(A27a)
{NAME} DECEASED	80	(A103a)
{NAME} INCARCERATED	09	SET A103 =
01(A103)		
LANGUAGE BARRIER (NOT SPANISH)	10	(A3)
INSTITUTIONALIZED	11	(A27a)

MILITARY DUTY	12	SET A103 = 02
(A103)		
SWITCH TO AMPLIFIER / CONTINUE	13	(A10)
NO SUCH PERSON AT THIS NUMBER	14	SET A102 = 01
(A102)		057.4400.05
OTHER: SUPERVISOR REVIEW NEEDED	15	SET A106 = 05
(A106)		
HUNG UP DURING INTRODUCTION	16	SET STATUS = 640
(END)		
UNAVAILABLE DURING FIELD PERIOD	17	SET A104 = 06
(A104)		
LIVING OUTSIDE USA	18	SET A103 = 03
(A103)		
REFUSED	r	SET A105 = 02
(A105)		

REQUESTS INFORMATION

(A1=02)

A2. Social Security recently sent {NAME} a letter saying that we would be calling to ask {him/her} to participate in an important national health study we are conducting for them. I work for Mathematica Policy Research, a nationally recognized research company based in Princeton, New Jersey. We are conducting a scientific study. We are not selling anything or asking for contributions. [IF S2 = 02, ADD: {NAME} participated in this study last year and we are calling to ask for {his/her} help again.]

NAME SPEAKING	01	(A10)
{NAME} COMES TO PHONE	03	(A10)
CALL BACK LATER	04	SET A100 = 01
(A100)		
{NAME} MOVED	05	(A30)
POSSIBLE PARTICIPATION PROBLEM	06	(A13)
HOSPITALIZED	07	(A27a)
{NAME} DECEASED	80	(A103a)
{NAME} INCARCERATED	09	SET A103 = 01
(A103)		
LANGUAGE BARRIER (NOT SPANISH)	10	
INSTITUTIONALIZED	11	(A27a)
MILITARY DUTY	12	SET A103 = 02
(A103)		
SWITCH TO AMPLIFIER / CONTINUE	13	(A10)
NO SUCH PERSON AT THIS NUMBER	14	SET A102 = 01
(A102)		
OTHER: SUPERVISOR REVIEW NEEDED	15	SET A106 = 05
(A106)		
HUNG UP DURING INTRODUCTION	16	SET STATUS = 640
(END)		
UNAVAILABLE DURING FIELD PERIOD	17	SET A104 = 06
(A104)		
LIVING OUTSIDE USA	18	SET A103 = 03
(A103)		
DID NOT RECEIVE LETTER	19	SET A109 = 01 OR
02 (A109)		
REFUSED	r	SET A105 = 02
(A105)		

LANGUAGE BARRIER (A1 = 10) OR (A2 = 10) A3. Can someone there speak English?	•
	PERSON COMES TO PHONE
POSSIBLE INTERPRETER COMES TO PH (A3 = 01)	ONE
A4. Hello, my name is recently sent {NAME} a letter sayin are conducting for them. It is called	calling on behalf of the Social Security Administration. Social Security (he/she) was selected to participate in an important health survey we the National Beneficiary Survey. We are looking for someone who is 18 interpreting the interview for us. Are you 18 years of age or older? YES

Is there someone else who is 18 years or older who could come to the phone and help with the interview?

(A4 = 00) A4a.

(A0 = 1: A4b.	5) OR (A4 = 01) OR (A4a = 01) IF (A0=15) or (A4a=01) FILL {Hello, my name is, calling on be Administration. Social Security recently sent {NAME} a letter saying {he/she} wa an important health survey we are conducting for them. It is called the National B looking for an interpreter who is 18 years or older to help {him/her} with the intervi-help {NAME} by interpreting the interview?	s se enef	lected to participate in iciary Survey. We are
	PROBE: We are not selling anything or asking for contributions.		
	YES	Ω1	
	CALL BACK LATER	-	(A6)
	NO ONE +18 SPEAKS ENGLISH		` '
	(A106)	00	02171100 - 01
	{NAME} MOVED	04	(A30)
	POSSIBLE PARTICIPATION PROBLEM		
	HOSPITALIZED		
	{NAME} DECEASED		` '
	{NAME} INCARCERATED		` '
	(A103)		
	NSTITUTIONALIZED	09	(A27a)
	MILITARY DUTY		,
	(A103)		
	NO SUCH PERSON AT THIS NUMBER	11	SET A102 = 01
	(A102)		
	OTHER: SUPERVISOR REVIEW NEEDED	12	SET A106 = 05
	(A106)		
	UNAVAILABLE DURING FIELD PERIOD	13	SET A104 = 06
	(A104)		
	LIVING OUTSIDE USA	14	SET A103 = 03
	(A103)		
	REQUESTS IN-PERSON INTERVIEW	15	(A39)
	REFUSED	r	SET A105 = 02
	(A105)		
(A4b = 0)	•		
A5.	If {NAME} is available and you are ready to interpret, we can begin now. If you o	•	AME} get tired or need
	a break at any time, please tell me and we will call back later to finish the interview	/ .	
	CONTINUE	04	
	CONTINUE	-	
	CALL BACK LATER		SET A105 00
	INTERPRETER REFUSED	Γ	SET A 105 = 02
	(A105)		

(A4a = 02) OR (A4b = 02) OR (A5 = 01 OR 02)A6. {IF A5 = 01 DISPLAY Before we begin, please tell me <u>your</u> name.} {IF A4a = 02 DISPLAY Please tell me that person's name so we can ask for them when we call back later / IF A5 = 02 OR A4b = 02 DISPLAY: Please tell me your name so we can ask for you when we call back later). PROBE: IF PERSON IS RELUCTANT TO GIVE NAME, SAY: The first name is all we need. IF NAME IS REFUSED, CODE AS REFUSED AND CONTINUE FIRST, MIDDLE, LAST DON'T KNOW......d REFUSEDr PROGRAMMER: STORE INTERPRETER NAME IN \$25 AND LOCATOR (A6 = ANSWER OR r)And, what is {IF A5 = 01 OR 2) OR (A4b = 02) FILL your / IF A4a = 02 FILL their} relationship to {NAME}? {NAME'S} SPOUSE.......01 DON'T KNOW d REFUSEDr (A7 = ANSWER OR d OR r)A7a. PROGRAMMER: ELSE CALLBACK TO INTERPRETER...... 02 SET A100 = 03 (A100) **CALLBACK TO NAMED INTERPRETER** (A0=14), calling on behalf of the Social Security Administration. May I A8. Hello, my name is _ please speak to {INTERPRETER'S NAME}? PROBE: We are not selling anything or asking for contributions. SPEAKING 01 CALL BACK LATER 03 SET A100 = 03 (A100)HUNG UP DURING INTRODUCTION 04 SET STATUS = 640 INTERPRETER REFUSED r SET A105 = 02 (A105)

8/23/2005 A-7 ROUND 2 VERSION

(A8 = 01 OR 02)

A9. {IF A8 = 02 DISPLAY: Hello, my name is _____, calling on behalf of the Social Security Administration.} When we spoke with you recently, you said this would be a good time for you to interpret the National Beneficiary Survey for {NAME}. Are you and {NAME} ready to begin?

PROBE: If you or {NAME} get tired or need a break <u>at any time</u>, please tell me and we will call back later to finish the interview.

YES, CONTINUE	01	
CALL BACK LATER	03	SET A100 = 03
(A100)		
HUNG UP DURING INTRODUCTION	04	SET STATUS = 640
(END)		
INTERPRETER REFUSED	05	SET A105 = 02
(A105)		

SPEAKING TO NAME OR INTERPRETER / NAME OR INTERPRETER COMES TO PHONE / TO NAME AFTER REMAIL

(A0 = 07 OR 08) OR (A1 = 01, 03 OR 13) OR (A2 = 01, 03, OR 13) OR (A7a = 01) OR (A9 = 01)

A10. {PROGRAMMER, IF A7a = 01 DISPLAY "Please tell {NAME} that I said...."} {(IF A0 = 07 OR 08, OR 09) OR (A1 = 03) OR (A2 = 03 OR 13) DISPLAY Hello, my name is ________, calling on behalf of the Social Security Administration.} Recently, Social Security sent you {PROGRAMMER IF A0 = 04 USE another} a letter explaining an important survey we are conducting for them. {IF A2 = 01 BEGIN HERE} The National Beneficiary Survey is about your health, daily activities, any jobs you may have, and any Social Security programs and services you may use. Congress requires that Social Security conduct this survey. [IF S2 = 01 OR 03 DISPLAY: I'm calling to ask you to participate. The information you and other participants give us will be used to help evaluate Social Security's programs for disability beneficiaries.] [ELSE IF S2=02 DISPLAY: You participants give us will be used to help evaluate Social Security programs for disability beneficiaries.]

PROBE: We are not selling anything or asking for a contribution.

The interview {IF A0 = 08 FILL will take around 2 - 3 hours because we are using TTY / IF A0 = 07 FILL will take around 2 - 3 hours because we are using Relay. / IF (A0 = 04) OR (A1 = 01, 03 OR 13) OR (A2 = 01 OR 03 OR 13) FILL: will take between 45 and 60 minutes.} DISPLAY FOR ALL In appreciation for your time, we will mail you a check for \$10.00 when we finish the interview. The questions are easy. If you get tired or need a break <u>at any time</u>, please tell me and we will call back later to finish the interview. Let's start now.

CONTINUE	01	(A64)
{NAME} WILL CALL MPR	02	SET A108 = 01
(A108)		
CALL BACK LATER	03	(IF A1 = 01, 03, 13)
OR A2 = 01, 03, A13A; OR A0 = 07, 08, 09 S	ET A	100 = 01 (A100) / IF
A7a = 01 OR A9 = 02 SET A100 = 03 (A100)))	
DID NOT RECEIVE LETTER/		
DOES NOT RECALL LETTER	04	(A20)
REQUESTS PROXY	05	(A39)
REQUESTS IN-PERSON INTERVIEW	06	(A39)
POSSIBLE PARTICIPATION PROBLEM	07	(A13)
REFUSED	r	(IF A1 = 01, 03, 13)
OR $A2 = 01, 03,$		
A13A; OR A0 = 07, 08, 09 SET A105	5 = (01 (A105) / IF A7a =
01 OR A9 = 01 SET A105 = 02 (A10	5)	

NAME OR UNKNOWN INFORMANT CALLS IN (A0=02, 05, OR 06) A11. INTERVIEWER: CODE BASED ON SUPERVISOR INSTRUCTION. {NAME}......01 {NAME} USING RELAY...... 03 INFORMANT / POSSIBLE PROXY 04 (A13a) (A11 = 01, 02, OR 03)Hello, my name is ______. I'll be your interviewer today. The National Beneficiary A12. Survey is about your health, daily activities, and any jobs you might have. It also asks about your use of Social Security programs and services. Congress requires that Social Security conduct this survey. The information you and other participants give us will be used to help evaluate Social Security's programs for disability beneficiaries. The interview {PROGRAMMER, IF A11 = 01 FILL will take between 45 and 60 minutes / IF A11 = 02 USE will take around 2 - 3 hours because we are using TTY / IF A11 = 03 FILL will take around 2 - 3 hours because we are using Relay.} In appreciation for your time, we will mail you a check for \$10.00 when we finish the interview. The questions are easy. If you get tired need a break at any time, please tell me and we will call back later to finish the interview. Let's start now. CONTINUE 01 (A64) WANTS TO SCHEDULE INTERVIEW 02 IF A11 = 01 SET A100 = 01 (A100) / IF A11 = 02 SET A100 = 04 (A100) / IF A11 = 03 SET A100 = 05 (A100) NEEDS IN-PERSON 04 (A39) POSSIBLE PARTICIPATION PROBLEM...... 05 (A13) REFUSED r IF A11 = 01, 02, 03 SET A105 = 01 (A105) / IF A11 = 04 SET A105 = 02 (A105) DIFFICULTY PARTICIPATING (SPEAKING WITH NAME / INFORMANT / UNKNOWN PROXY WHO CALLS IN) (A1 = 06) OR (A2 = 06) OR (A4b = 05) OR (A10 = 07) OR (A11 = 04) OR (A12 = 05) A13. INTERVIEWER: WHO ARE YOU SPEAKING WITH? {NAME} / INTERPRETER...... 01

8/23/2005 A-9 ROUND 2 VERSION

INFORMANT/POSSIBLE PROXY 02

(A11 = 04) OR (A13 = 01 OR 02)

A13a. INTERVIEWER: IF BARRIER ALREADY STATED, CODE RESPONSE THEN CONFIRM BY READING APPROPRIATE CATEGORY BELOW.

{PROGRAMMER IF A11 = 04, USE: PROBE: Thank you very much for calling and offering to help. IF NEEDED: What problem does {NAME} have that might prevent {him/her} from participating for {himself/herself}?

IF (A1 = 06) OR (A2 = 06) OR (A4b = 05) OR (A10 = 07) OR (A12 = 05) FILL: PROBE: Why {IF A13 = 01 FILL would you/ IF A13 = 02 FILL would {NAME}} have a problem participating in the survey?

INTERVIEWER: PROBE FOR DON'T KNOW. IF MORE THEN ONE PROBLEM, PROBE FOR THE MAIN PROBLEM.

HEARING DIFFICULTYSPEECH DIFFICULTYCOGNITIVE BARRIER	02	(A46)
PHYSICAL BARRIER		057.4400.04
INCARCERATED(A103)	06	SET A103 = 01
INSTITUTIONALIZED	07	(A27a)
HOSPITALIZED	80	(A27a)
DECEASED	09	(A103a)
SERVING IN MILITARY	10	SET A103 = 02
(A103)		
LIVING OUTSIDE USA	11	SET A103 = 03
(A103)		
DON'T KNOW	d	
REFUSED	r	SET A105 = 02
(A105)		

(A13a = 01, 02, 04, OR d)

A14. [IF S2 = 01 OR 03 DISPLAY: Recently, Social Security sent {IF A13 = 01 FILL you / IF A13 = 02 FILL {NAME} a letter saying {IF A13 = 01 FILL you were/ IF A13 = 02 FILL {him/her} he/she was} selected to take part in an important health survey we are conducting for them.} ELSE IF S2 = 02 DISPLAY {you/NAME} participated in this study last year and we are calling to ask for {his/her} help again. The information {HE/SHE/you} and other participants give us will be used to help evaluate Social Security's programs for disability beneficiaries.} {IF A12 = 05 START HERE} We would like {IF A13 = 01 FILL you to have / IF A13 = 02 FILL {NAME} to have} the chance to answer the questions for {IF A13 = 01 FILL yourself / IF A13 = 02 FILL himself / herself} if at all possible. I'm going to read some ways that we can arrange for {IF A13 = 01 FILL you / IF A13 = 02 FILL {NAME}} to take part in the study. PROBE: What would work best?

INTERVIEWER: READ LIST AND CODE ONE ONLY. IF MORE THAN ONE MENTIONED, ASK WHAT IS <u>EASIEST</u> FOR {NAME}.

	OFFERS TO BE PROXY		` ,
	INTERVIEW		(A40)
	PROXY	08	(A39)
	PHYSICAL PROBLEM: {NAME} UNABLE TO PARTICIPATE	09	(A46)
	SUGGESTS ANOTHER WAY (SPECIFY) .	10	
	DON'T KNOW	d	(A39)
	REFUSED	r	IF A13 = 01 SET
	A105 = 01 (A105) / IF		
	A13 = 02 SET A105 = 02 (A105)		
	40)		
A14 = A14a.	What is that way?		
	<open></open>		
	DON'T KNOW	d	
	REFUSED	r	
A14 =	: 10)		
A15.	Thank you. I will ask my supervisor if that would work. We will call you	back and let y	ou know.
	SET A106 = 05 (A106)]	
A13a = A16.	= 01, 02, 04, OR d) OR (A14 = 02) INTERVIEWER: WHO ARE YOU SPEAKING WITH?		
	NAMEINFORMANT / POSSIBLE PROXY		
A16 =0	:01)		
A17.	We can start the interview in a few minutes, by switching to our TTY or contact you. Alternatively, we can you back another time using TTY PROBE: PROBE FOR TTY OR RELAY IF UNCLEAR.		_
	INTERVIEWER: IF "SWITCH IN A FEW MINUTES", CALL SUPERVIS	OR FOR HEL	P.
	SWITCH (TTY) IN A FEW MINUTE (A100)	S 01	SET A100 = 04
	SWITCH (RELAY) IN A FEW MINU (A100)	JTES 02	SET A100 = 05
	CALL BACK LATER (TTY)(A100)	03	SET A100 = 04
	CALL BACK LATER (RELAY) (A100)	04	SET A100 = 05
	NO, {NAME} WILL CALL TTY (A108)	05	SET A108 = 02
	NO, {NAME} WILL CALL RELAY (A108)	06	SET A108 = 03
	PEELISED/HUNG LID	_	SET A105 - 01

8/23/2005 A-11 ROUND 2 VERSION

(A105)

(A16 = 02)

A18. Can you help arrange a time when we can call {NAME} and complete the interview using either TTY or Relay? My supervisor will call you back later to find out what time you arranged for {NAME} to be interviewed. PROBE: PROBE FOR TTY OR RELAY IF UNCLEAR.

INTERVIEWER: IF "SAMPLE MEMBER AVAILABLE, SWITCH IN A FEW MINUTES", CALL SUPERVISOR FOR HELP.

SM AVAILABLE, SWITCH (TTY)		
IN A FEW MINUTES	01	SET A100 = 04
(A100)		
SM AVAILABLE NOW, SWITCH (RELAY)		
IN A FEW MINUTES	02	SET A100 = 05
(A100)		
CALL BACK LATER (TTY)	03	SET A100 = 04
(A100)		
CALL BACK LATER (RELAY)	04	SET A100 = 05
(A100)		
CALL BACK TO ARRANGE		
AN INTERVIEW TIME	05	SET A106 = 02
(A106)		
DON'T KNOW	d	SET A106 = 02
(A106)		
REFUSED	r	SET A105 = 02
(A105)		

A19 DELETED

NAME REQUESTS LETTER

(A10 = 04)

A20. The letter said that you were selected from a list of all adults who currently receive Social Security benefits and that someone would call to ask you to participate. The National Beneficiary Survey asks about your health, your daily activities, any jobs you might have, and any Social Security programs or services you might use. If you get tired or need a break at any time, please tell me and we will call back later to finish the interview. Let's start now.

CONTINUE	01	(A64)
CALL BACK LATER	02	SET A100 = 01
(A100)		
NO, WANTS LETTER	00	
REFUSED	r	SET A105 = 01
(A105)		

(A20 = 00)

A21. You should receive the letter in about a week. Or, I can read it to you now and we can start the interview.

READ LETTER, CONTINUE	01	(A64)
NO, SEND LETTER	00	
REFUSED	r	SET A105 = 01
(A105)		

8/23/2005 A-12 ROUND 2 VERSION

(A21 = A22.	•	correct name and address. The records show	v(R	READ BELOW). Is this
	PROGRAMMER: DISPLAY NAME	FROM PRELOADS		
		NAME: PREFIX, FIRST, MIDDLE, LAST, SU ADDRESS 1 ADDRESS 2 CITY, STATE, ZIP	JFFI)	<
		YES	. 00	(A23)
(A22 =	•	E LIDDATEDO		
A23.	PROGRAMMER: WAS A22 <u>NAMI</u>	YES		(A25)
(A23 = A24.	•	me in our records – perhaps you married or cha ME} as in our records?	ange	d your name. Can you
		YES	. 00	
(A22 = A25.	00) OR (A24 = 01) PROGRAMMER CHECK: IS UPDA	ATED STATE <u>OUTSIDE</u> THE UNITED STATE	S AN	ID DC?
		YES		SET A109 = 01
(A25 = A26.	•	s wrong. Are you now living outside the United	d Stat	tes?
	INTERVIEWER: IF NO (ADDRES	S IS IN THE USA), GO BACK TO A22 AND CO	ORRI	ECT STATE.
		YES(A103)	. 01	SET A103 = 04
		NO REFUSED(A106)		SET A106 = 05
	PROGRAMMEI	R: STORE CHANGED NAME IN S8 UPDATE		

8/23/2005 A-13 ROUND 2 VERSION

NAME INSTITUTIONALIZED / HOSPITALIZED

(A1 = 07 OR 11) OR (A2 = 07 OR 11) OR (A4b = 06 OR 09) OR (A13a = 07 OR 08)A27a. I'm sorry to hear that. How much longer will {NAME} be staying there?

INTERVIEWER: ENTER THE NUMBER OF DAYS, WEEKS OR MONTHS

INTERVIEWER: (NEXT QUESTION SPECIFIES THE UNITS - DAYS, WEEKS OR MONTHS)

INTERVIEWER: ENTER 997 IF PERMANENTLY

|__|_|

DON'T KNOW...... d (A27b)
REFUSED...... r (A27b)

A27aa. Units.

(A27a = ANSWER OR d OR r)

A27b. I understand that {NAME} is not able to be at home just now. In order to help {him/her} participate, we could...

PROBE: READ BELOW.

What would work?

INTERVIEWER: CODE ONE ONLY

8/23/2005 A-14 ROUND 2 VERSION

(A27b = A28.	Please tell m 07) FILL inst	sitution / IF $(A1 = 07 AI)$	e number of the {IF (A1 = 11 AND AND A2 = 07 AND A4b = 06) OR (A1 all the information, please tell me who	3a = 08) FILL	
			NAME OF INSTITUTION / HOSPIT	AL	
	Please tell m	e the telephone number	er with the area code first.		
			PHONE NUMBER: {) 08 (A100)	. — — - — —	SET A100 =
		AND	TORE NAME OF HOSPITAL OR IN PHONE NUMBER IN LOCATOR EFUSED SET A106 = 05 (A106)	STITUTION	
(A27b = A29.	Please tell m	on / IF (A1 = 07 AND A	number of the {IF (A1 = 11 AND A2 2 = 07 AND A4b = 06) OR (A13 = 08 formation, please tell me what you c	8) FILL hospita	
			NAME OF INSTITUTION / HOSPIT ADDRESS 1 ADDRESS 2 CITY, STATE, ZIP	AL	
	Please tell m	e the telephone number	er with the area code first.		
			TELEPHONE: II_I_I – II_ (A107) REFUSED(A106)		
		INFORMATION FO	ER: STORE NAME AND ALL CON' OR HOSPITAL OR INSTITUTION IN EFUSED SET A106 = 05 (A106)		
_		ORMATION FOR NAM	E		
(A1 = 05)		5) OR (A4b = 04) / how I can reach {NAN	1E}?		
			YES	00	, ,

8/23/2005 A-15 ROUND 2 VERSION

(A105)

(A30= 0 A31.	Please tell me {his/her} new addre	ss and phone number. Also, if {NAME'S} nan under the standard of the description of the standard of the standa	- -
		NAME: PREFIX, FIRST, MIDDLE, LAST, SU ADDRESS 1 ADDRESS 2 CITY, STATE, ZIP	FFIX
	Please tell me the telephone numb	er with the area code first.	
		TELEPHONE: III – III – II	_!
(A31 = /	ANSWER OR d OR r)	DON'T KNOWREFUSED	
A32.		STATE OUTSIDE THE UNITED STATES AND	DC?
		YES (OUTSIDE USA)	
(A32 = 0 A33.	•	correctly. Is {NAME} now living outside the Unit	ted States?
	INTERVIEWER: IF NO (ADDRESS	S IS INSIDE THE USA), GO BACK TO A31 AN	D UPDATE STATE.
	PROGRAMMER: AFTER A31 IS U	PDATED, GO TO A36.	
		YES	01 SET A103 = 04
		(A103) NOAFTER STATE IS UPDATED GO TO A36.	00 GO BACK TO A31
	DELETED DELETED		
(A34 = A	ANSWER OR d OR r) PROGRAMMER CHECK: DOES A	31 CONTAIN A VALID PHONE NUMBER?	
		YES	01 SET A101 =
		01(A101) NO(A102)	00 SET A102 = 02
	PROGRAMMER: S	TORE {NAME} CONTACT DATA IN LOCATOR	
(A30 = 0)	NFORMATION 00) Is there someone else who might kr	now how to reach {NAME}?	
		YES	01

tell

8/23/2005 A-16 ROUND 2 VERSION

(A102)

	(A102) REFUSED r SET A105 = 0: (A105)
(A37 = A38.	01) What's that person's name and phone number?
	PROBE: If you don't have all the information, please tell me what you can.
	PREFIX, FIRST, MIDDLE, LAST, SUFFIX
	Please give me the telephone number, area code first.
	TELEPHONE: II - III - II _ I
	DON'T KNOW d REFUSED r
	PROGRAMMER: STORE NAME AND PHONE INFORMATION IN LOCATOR =
	LEADS; SET A101 = 03 (A101)
	IF MISSING/INVALID PHONE NUMBER SET A106 = 05 (A106)

DON'T KNOW...... d SET A102 = 03

CHECK FOR POSSIBLE IN-PERSON INTERVIEW

(A10 = 05 OR 06) OR (A12 = 03 OR 04) OR (A4b = 15) OR (A14 = 06, 08, d)
A39. PROGRAMMER: CHECK FOR POSSIBLE IN-PERSON INTERVIEW. DID...?

NAME REQUESTS IN PERSON INTERVIEW AND NOT IN CLUSTERESAMPLE (S = 02)

(A14 = 07 OR A39 = 02)

A40. I'm sorry, but we have no field representatives working in your area. We can break the phone interview into as many short calls as you would like so the interview will not be tiring. Will that help {NAME/you} to participate? If you get tired or need a break <u>at any time</u>, please tell me and we will call back later to finish the interview. Let's start now.

CONTINUE	01	(A64)
NO / SEEK PROXY	02	(A46)
DON'T KNOW	d	(A46)
REFUSED	r	SET A105 = 01
(A105)		

8/23/2005 A-17 ROUND 2 VERSION

NAME REQUESTS PROXY AND NOT IN CLUSTERED SAMPLE (S2 = 02)

(A39=04)

A41.

If <u>at all possible</u>, we'd like {IF A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL you / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {NAME}} to answer for {IF (A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL yourself / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {himself/herself}}. We can break the interview into a few short calls so the interview won't be tiring. If {(IF A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL you get tired or need a break / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {he/she} gets tired or needs a break} at any time, please tell me and we will call back later to finish the interview. Let's start now.

NAME REQUESTED IN PERSON AND IN CLUSTERED SAMPLE (S1 = 01)

(A14 = 05) OR (A39=01)

A42. Our field representative will be working in your area shortly and will contact you to set up an interview in person.

GO TO A44

NAME REQUESTED PROXY AND IN CLUSTERED SAMPLE (S1 = 01)

(A39=03)

A43. Our interviewer will be working in {IF (A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL your / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {NAME's area} shortly. If it would help {(IF A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL you / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {him/her} to answer for {(IF A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL yourself / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {himself/herself}, we can send an interviewer to interview {IF (A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL your / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {NAME}} at home. If {(IF A10 = 5) OR (A12 = 03) OR (A14 = 08) OR (A14 = d AND A13 = 01) FILL you get tired or need a break / IF (A14 = 06) OR (A14 = d AND A13 = 02) FILL {he/she gets tired or needs a break} at any time, the interviewer can come back at a later time to finish the interview. Will that help?

(A42 = ANSWER OR d OR r) OR (A43 = 01)

A44. Let me confirm your address. Is it still... READ BELOW

PROGRAMMER: DISPLAY NAME'S CONTACT INFORMATION FROM PRELOADED INFORMATION (S20)

PREFIX, FIRST, MIDDLE, LAST, SUFFIX ADDRESS 1 ADDRESS 2 CITY, STATE, ZIP UPDATE PHONE NUMBER

(A44 = 00)

A44a. INTERVIEWER - BACK UP TO A44 AND EDIT ALL CHANGES (A45)

(A44 = 01) AND (A44a = ANSWER)

A45. If your current address will change within the next month or two, please tell me the new address and phone number.

INTERVIEWER INSTRUCTION: IF ADDRESS OR PHONE NUMBER WILL CHANGE, GO BACK TO A44 AND CHANGE AS APPROPRIATE.

PROGRAMMER: STORE UPDATED INFORMATION IN UPDATE ADDRESS BLOCK

8/23/2005 A-19 ROUND 2 VERSION

SEEKING PROXY

(A13a = 03) OR (A14 = 09) OR (A27 = 04, OR d) OR (A40 = 02 OR d) OR (A41 = 02 OR d AND A14=8 OR d) OR (A43 = 02 OR d)

A46. Is there someone who can answer questions about {IF (A40 = 02 OR d) OR (A41 = 02 OR d) OR (A43 = 02 OR d) FILL your / IF (A13a = 03) OR (A14 = 09) OR (A27 = 04 OR d) FILL {NAME's}} health, daily activities, any jobs {IF (A40 = 02 OR d) OR (A41 = 02 OR d) OR (A43 = 02 OR d) FILL you / IF (A13a = 03) OR (A14 = 09) OR (A27 = 04 OR d) FILL {he/she} might have, and use of Social Security programs or services? This could be someone who lives with {IF (A40 = 02 OR d) OR (A41 = 02 OR d) OR (A43 = 02 OR d) FILL you / IF (A13a = 03) OR (A14 = 09) OR (A27 = 04 OR d) FILL {NAME} such as a family member or friend, or someone like a social worker or case worker.

INFORMANT WILL SERVE AS PROXY		
PROXY COMES TO PHONE	02	(A48)
PROXY NOT AVAILABLE NOW	03	
PROXY LIVES ELSEWHERE	04	(A51)
{NAME} HOSPITALIZED: NO PROXY	05	SET A104 = 01
(A104)		
{NAME} INSTITUTIONALIZED: NO PROXY	06	SET A104 = 02
(A104)		
{NAME} HAS COGNITIVE BARRIER: NO PROXY	07	SET A104 = 03
(A104)		
{NAME) HAS HEARING / SPEECH BARRIER / NO PROXY	80	SET A104 = 04
(A104)		
{NAME} HAS PHYSICAL BARRIER: NO PROXY	09	SET A104 = 05
(A104)		
DON'T KNOW	d	SET A106 = 03
(A106)		
REFUSED	r	IF $A40 = 02 OR d OR$
A41 = 02 OR d		
OR A43 = O2 OR d SET A105 = 01 (A105) / IF A13a -	03 (OR A14 = O9 OR A27

- 04 OR d SET A105 = 03 (A105)

(A46 = 03)

A47. What is that person's name and phone number so we can call back and ask for that person by name?

NAME: PREFIX, FIRST, MIDDLE, LAST, SUFFIX

Please give me the telephone number, area code first.

IELEPHONE: III = III = II	.I	<u> </u>
DON'T KNOW	d	SET A106 = 05
(A106)		
REFUSED	r	SET A106 = 05
(A106)		

PROGRAMMER: STORE PROXY NAME IN UPDATE ADDRESS BLOCK. SET A100 = 02 (A100)

8/23/2005 A-20 ROUND 2 VERSION

_	Administration.} {NAME} has been conducting for SSA. Congress reinformation we collect will be used you the person who is most known.	OR 02) ame is, calling on below selected to participate in an important natequires Social Security to conduct the National to evaluate Social Security's programs for deledgeable about {NAME's} health, daily activity programs and services {he/she} might use?	tiona Il Be Iisab	Il health study we are neficiary Survey. The ility beneficiaries. Are
(A48 =	02)	YES	02 00 d	(A50) (A50)
A49.	in an important national health stu Research, a nationally recognized	ME) a letter saying that we would be calling to dy we are conducting for Social Security. I want I research firm based in Princeton, New Jerse anything or asking for contributions.	ork f	or Mathematica Policy
		CONTINUE	02 03	(A58)
(A48 = A50.	00 OR d) OR (A49 = 02) Is there someone else who know have?	s about {NAME's} health, daily activities, an	d ar	ny jobs {he/she} might
		YES	02	
ANOTH (A50 = A51.	What is this person's name and ph	one number? nformation, please tell me what you have.		
		PREFIX, FIRST, MIDDLE, LAST, SUFFIX		
		DON'T KNOWd		
	Please give me the telephone numl	ber, area code first.		
		TELEPHONE: III – III – II	_l	<u> </u>
		DON'T KNOWREFUSED		

PROGRAMMER: STORE PROXY CONTACT INFORMATION IN LOCATING DATABASE AND GO TO A52. IF BOTH NAME AND PHONE NUMBER REFUSED SET A106 = 05 (A106)

(A51 = ANSW)	ER)		
A52. PRO	GRAMMER: IS THER	E A VALID PHONE NUMBER AT A51?	
		YES 01 SET A101 = 02 (A101)	
		NO	
SPEAKING W (A48 = 01) OR			
\$10.0	0 when we finish the in	n 45 to 60 minutes. In appreciation for your time, we will mail you a check forterview. If you get tired or need a break at any time, please tell me and we waterview. Let's start now.	
		CONTINUE 01 CALL BACK LATER 02	
		PROXY WANTS LETTER	
for yo	53 = 01 USE Before w	e start} please tell me your name (IF A53 = 02 USE so we can call back and as fine.	sk
		PREFIX, FIRST, MIDDLE, LAST, SUFFIX DON'T KNOW d REFUSED r CONTINUE	
	PROGR	AMMER STORE PROXY NAME IN DATABASE	
(A54 = ANSW A55. PROG	ER OR r) GRAMMER: IF		
		IF A53 = 01	

CALLING FOR IDENTIFIED PROXY / PROXY AFTER REMAIL (A0 = 10 OR 11 OR 13)____, calling on behalf of the Social Security Administration. May I please A56. Hello, my name is speak with {PROXY NAME}? PROBE: We are not selling anything or asking for a contribution. PROXY SPEAKING....... 01 IF A0 = 13 (A85) / **ELSE CONTINUE** PROXY COMES TO PHONE 02 IF A0 = 13 (A85) / **ELSE CONTINUE** (A100)(A106)LANGUAGE BARRIER (NOT SPANISH) 06 SET A104 = 07 NO SUCH PERSON AT THIS NUMBER 07 SET A102 = 05 (A105)OTHER: SUPERVISOR REVIEW (A106)HUNG UP DURING INTRODUCTION 09 SET STATUS = 640 REFUSED r SET A105 = 03 (A105) PROXY COMES TO PHONE (A56 = 01 OR 02)A57. {IF {PROXY} COMES TO PHONE (A56=02), USE Hello, my name is _____ of the Social Security Administration.) Recently, Social Security sent {IF (A0 = 10) FILL {NAME} / IF (A0 = 11) FILL you} a letter explaining that {he/she} had been selected to participate in an important survey we are conducting for them. The National Beneficiary Survey is about {NAME's} health, daily activities daily activities, any jobs {he/she} might have, and about any Social Security programs or services {he/she} might use. Congress requires that Social Security conduct this study. We were told that you are the most knowledgeable person to respond to the survey on behalf of {NAME}. The interview will take from 45 to 60 minutes. In appreciation for your time, we will mail you a check for \$10.00 when we finish the interview. Would you be able to help us? CALL BACK LATER 02 SET A100 = 02 (A100)PROGRAMMER: DISPLAY THIS OPTION ONLY IF A0 = 10 WANTS LETTER SENT .. 04

8/23/2005 A-23 ROUND 2 VERSION

(A105)

DON'T KNOW..... d (A59)

REFUSED r SET A105 = 03

(A57 = 04)

A58. The letter explained that {NAME} was selected from a list of all adults currently receiving Social Security benefits and that someone would be calling to ask {him/her} to participate in an interview. Social Security is required by Congress to conduct this survey. The information we collect will be used to help evaluate Social Security's programs for disability beneficiaries. If you need a break, let me know and we will call back later to finish the interview. Let's start now.

(A58 = 01 OR 02)

A58a. {IF (A58=01) Before we start,} Please tell me your name {IF (A58=02) so we can call back and ask for you.}

PREFIX, FIRST, MIDDLE, LAST, SUFFIX
REFUSED r CONTINUE

IF A58=01 GO TO A64
IF A58=02 SET A100 = 02 (A100)
PROGRAMMER STORE PROXY NAME IN DATABASE

(A57=d) OR (A58 = 03 or d)

A59. Please tell me your name and address so we can mail the letter to you.

PREFIX, FIRST, MIDDLE, LAST, SUFFIX ADDRESS 1 ADDRESS 2 CITY, STATE, ZIPCODE

PROGRAMMER STORE PROXY INFORMATION IN LOCATING DATABASE SET A109 = 02 (A109)

SEEK ANOTHER PROXY - CONTACT INFORMATION

(A57 = 03)

A60. Can you give me the name and phone number for someone else who might be knowledgeable about {NAME's} health,daily activities, any jobs {he/she} might have, and about any Social Security programs or services {he/she} might use?

YES	01	
NO	00	SET A106 = 03
(A106)		
DON'T KNOW	d	SET A106 = 03
(A106)		
REFUSED	r	SET A105 = 02
(A105)		

8/23/2005 A-24 ROUND 2 VERSION

(A60 = 1)	
A61. What is that person's name and tell PROBE FOR A60 = 01 ONLY: If y	lephone number? ou don't have all the information, please tell me what you have.
	PREFIX, FIRST, MIDDLE, LAST, SUFFIX
	DON'T KNOWd REFUSEDr
Please give me the telephone num	nber, area code first.
	TELEPHONE NUMBER: _ - - - -
	DON'T KNOW d REFUSED r
PROGRAMMER: STORE	PROXY INFORMATION IN LOCATING DATABASE AND GO TO A62.
IF NAME AND PHO	ONE NUMBER REFUSED SET A105 = 02 (A105)
(A61 = ANSWER) A62. PROGRAMMER: WHAT KIND OF F	PROXY CONTACT INFORMATION DOES A61 CONTAIN?
	NO PHONE NUMBER 01 SET A102 = 06 (A102)
	INVALID PHONE NUMBER
	VALID PHONE NUMBER
A63 DELETED	
= 01) OR (A58 = 01) A64. INTERVIEWER: WHO ARE YOU	(A14 = 01 OR 03) OR (A40 = 01) OR (A41 = 01) OR (A55 = 01) OR (A57 SPEAKING WITH? VITH AN INTERPRETER, CODE SPEAKING WITH {NAME}.
	NAME 01 PROXY 02
A65. DELETED	

8/23/2005 A-25 ROUND 2 VERSION

(A64 = ANSWER)

A66. Before we start, I need to confirm that I've reached the right person. Is {IF (A64 = 01) FILL your/IF (A64 = 02) FILL {NAME's}} full name:

PROGRAMMER: IF A0 = 03, DISPLAY: CAPI INTERVIEWER: DO NOT READ QUESTION; CODE 01, OR 02 AS APPROPRIATE.

PROGRAMMER: DISPLAY SAMPLE MEMBER'S FULL NAME BELOW FROM S8.

(A66 = 02)

A67. For the record, what is {your/NAME's} new name?

PROGRAMMER: IF A0 = 03 DISPLAY: CAPI INTERVIEWER: DO NOT READ QUESTION: RECORD NAME CHANGE AND CONTINUE.

A105 = 03 (A105)

PROGRAMMER STORE NAME CHANGE IN NAME UPDATE BLOCK.

(A65 = 01) OR (A66 = 01) OR (A67 = ANSWER OR r)

A67a. {PROGRAMMER: IF A22 OR A44 CONTAIN UPDATED STATE, GO TO A68, ELSE CONTINUE} And in what state {IF (A64 = 01) FILL are you / IF (A64 = 02) FILL IS {NAME}} now living?

CAPI INTERVIEWER: DO NO READ QUESTION: RECORD STATE BELOW AND CONTINUE.

STATE REFUSED...... r IF A64 = 01 SET

A105 = 01 (A105)

IF A64 = 02 SET A105 =

03 (A105)

DON'T KNOW...... d PROGRAMMER:

CHECK AREA

CODE AND

RECORD STATE.

PROGRAMMER STORE STATE CHANGE FOR USE IN FUTURE QUESTIONS AT STATE UPDATE BLOCK (\$20).

(A67a = A68.	ANSWER OR r) What is {your/NAME'S} date of birt	h?	
	PROGRAMMER: IF (A0 = 03) DIDATE OF BIRTH OR d AND CONT	SPLAY: CAPI INTERVIEWER: DO NOT REA	AD QUESTION. RECORD
	III	IIII YEAR (1937 – 1986)	
		ANSWERED DON'T KNOW REFUSED A105 = 01 (A105)	d r IF A64 = 01 SET
		A105 = 03 (A105)	IF A64 = 02 SET
(A68 = 0 A69.	How old {IF (A64 = 01) FILL are yo	ou/IF (A64 = 02) FILL is {NAME}? PROBE: You LAY: CAPI INTERVIEWER: DO NOT READ C	-
		RECORD AGE:DON'T KNOW	
(A69 = A70.	ANSWER OR d) PROGRAMMER CHECK S11: IS A	A69 AGE = +2 OR – 2 YEARS OF NAME'S AG	E?
		YES	
(A68 = A71.	ANSWER) OR (A70 = ANSWER) PROGRAMMER CHECK BIRTHD YEAR OF BIRTH ON RECORD (S	ATE: IS MONTH, DAY, YEAR OF BIRTH AT . 11) OR IS A70 = 01?	A68 = MONTH, DAY, AND
		NO MATCH	01 02
(A65 = A72.		AND A70 = 01) OR (A71 => 02) OR (A67=d) ME'S} IDENTITY VERIFIED (NAME VERIFIED) OR (A71 = 01 OR 02)?	(A66 = 01 OR 02) AND IS
		YES (VERIFIED) NO (FAILED VERIFICATION)(A102)	

NAME/PROXY COGNITIVE TEST

(A72 = 01)

A73. INTERVIEWER: WHO ARE YOU SPEAKING WITH?

(A73=01, 04 OR 05)

A74. Next, I will explain some facts about the survey. After I explain, I will ask you three questions so I can be sure my explanation was clear.

Here's the first explanation. The survey asks about {IF (A73 = 03) FILL your / IF (A73 = 04 OR 05) FILL {NAME's}} health, daily activities, and any jobs {IF (A73 = 03) FILL you / IF (A73 = 04 OR 05) FILL {NAME}} might have. Please tell me in your own words what the survey is about.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW" RECORD AS "LISTS NONE"

A75 IS DELETED

(A74 = 00 OR 01)

A76. INTERVIEWER: YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. The survey asks about $\{your/NAME\}$'s <u>health</u>, <u>daily activities</u>, and <u>any jobs $\{IF (A73 = 03) FILL you / IF (A73 = 04 OR 05) FILL {NAME}\} might have</u>. Please tell me in your own words, what the survey is about.</u>$

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW" RECORD AS "LISTS NONE"

(A74 = 02 OR 03) OR (A76=02 OR 03)

A77. Here is the next explanation. Taking part in the survey is <u>completely voluntary</u>. Completely voluntary means you can choose whether or not to take part. If you decide to take part, you can refuse to answer any questions you do not like and you can stop the interview at any time you choose. Whether you choose to take part or not, {your/NAME's} disability benefits will not be affected in any way.

When I say your participation is completely voluntary, what does that mean to you?

PROBE: IF RESPONDENT SAYS: It is voluntary, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: I can decide to take part or not to take part. I can refuse to take part if I want. I don't have to do this. I can do this if I want. No one will take away my benefits if I refuse, etc.

INTERVIEWER: IF NAME/PROXY SAYS "DON'T KNOW" RECORD AS "INACCURATE ANSWER"

(A77=02)

A77a. INTERVIEWER: YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. Taking part in the survey is <u>completely voluntary</u>. Completely voluntary means you can choose whether or not to take part. If you decide to take part, you can refuse to answer any questions you do not like and you can stop the interview at any time you choose. Whether you choose to take part or not, {your/NAME's} disability benefits will not be affected in any way.

When I say your participation is completely voluntary, what does that mean to you?

PROBE: IF RESPONDENT SAYS: It is voluntary, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: I can decide to take part or not to take part. I can refuse to take part if I want. I don't have to do this. I can do this if I want. No one will take away my benefits if I refuse, etc.

INTERVIEWER: IF NAME/PROXY SAYS "DON'T KNOW" RECORD AS "INACCURATE ANSWER"

(A77 = 01 OR A77a = 01)

A78. Here's the last explanation. All your answers will be <u>kept confidential</u> and used <u>only</u> for the research purposes of the study.

When I say that your answers will be kept confidential, what does that mean to you?

PROBE: IF RESPONDENT OR PROXY SAYS: It is confidential, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: My answers will be secret. Only researchers will see what I said. What I say will be (kept) private. It will only be used for research; etc.

INTERVIEWER: IF RESPONDENT SAYS: "DON'T KNOW," RECORD AS "INACCURATE ANSWER"

(A78 = 02)

A78a. INTERVIEWER: YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. All your answers will be <u>kept confidential</u> and used <u>only</u> for the research purposes of the study.

When I say that your answers will be kept confidential, what does that mean to you?

PROBE: IF RESPONDENT OR PROXY SAYS: It is confidential, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: My answers will be secret. Only researchers will see what I said. What I say will be (kept) private. It will only be used for research, etc.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW" RECORD AS "INACCURATE ANSWER"

A79 IS DELETED

RESPONDENT OR PROXY FAILS COGNITIVE TEST. FIND A PROXY/ANOTHER PROXY

(A76 = 00 OR 01)) OR (A77a =	02 OR A78a =	= 02)
------------------	--------------	--------------	-------

A80. Thank you. Our study rules say that we need to find {IF (A73 = 03) USE someone / IF (A73 = 04) USE someone else} who can help {IF (A64 = 01) FILL you / IF (A64 = 02) FILL {NAME}} answer the survey questions. Is there someone there who could answer questions about {(IF A64 = 01) FILL your / IF (A64 = 02) FILL {NAME's}} health, daily activities, and any jobs {IF (A64 = 01) FILL you / IF (A64 = 02) FILL he/she} might have?

PROBE: This case worker.	s might be someone who lives with {you/NAME}, a friend, or someone I	ike a social worker or
	YES, PROXY COMES TO PHONE 01 YES, CALL BACK PROXY LATER 02	(A85)
	YES, PROXY LIVES ELSEWHERE 03 NO PROXY AVAILABLE 04	
	(A106) DON'T KNOW d (A106)	SET A106 = 04
	REFUSEDr	IF A73 = 03 SET
	A105 = 01 (A105) / IF A73 = 04 OR 05 SET A105 = 03 (A105)	
A80 = 02) A81. What is that p	erson's name so that we can call back and ask for them?	
	NAME: PREFIX, FIRST, `MIDDLE, LAST, SUFFIX	(
	PROGRAMMER: RECORD NAME LOCATING DATABASE <u>SET A100 = 02 (A100)</u>	
A80 = 03) A82. Do you have me what you can.	that person's name and/or telephone number? If you don't have all the	information please tell
	YES	SET A102 = 07
(A82 = 01) (A83.		
	PREFIX, FIRST, MIDDLE, LAST, SUFFIX	
	DON'T KNOW d REFUSED r	
Please give m	ne the telephone number, area code first.	
	TELEPHONE NUMBER: _ - - - -	·
	DON'T KNOW d REFUSED r	

8/23/2005 A-31 **ROUND 2 VERSION** PROGRAMMER: STORE PROXY NAME AND PHONE NUMBER IN LOCATING DATABASE. IF BOTH NAME AND PHONE NUMBER REFUSED, SET A106 = 05 (A106)

(A83 = I)	ANSWER)			
A84. F	PROGRAMMER: WHAT KIND OF F	PROXY CONTACT INFORMATION DOES A83	COI	NTAIN?
		VALID PHONE NUMBER(A101)	01	SET A101 = 02
		INVALID PHONE NUMBER(A106)	02	SET A106 = 05
		NO PHONE NUMBER(A106)	03	SET A106 = 05
	O NEW PROXY/NEW PROXY COM B) OR (A56 = 01 OR O2) OR (A80 =			
À85.	{IF (A56 = 01 OR 02) OR (A80 = Social Security Administration.} R are conducting for them. The Nationary jobs they might have. Congress	01) USE Hello, my name isecently, Social Security contacted {NAME} about Deneficiary Survey is about beneficiaries' is serequires that Social Security conduct this studies and are the best person to answer the survey	ut a heal dy.	in important survey we th, daily activities, and I've been told that you
	The interview will take from 45 to \$10.00 when we finish the interview	60 minutes. In appreciation for your time, we w. Would you be able to help us?	: wil	I mail you a check for
		YES	01	
		CALL BACK LATER(A100)	02	SET A100 = 02
		DON'T KNOW(A106)	d	SET A106 = 03
		REFUSED(A105)	r	SET A105 = 03
(A85=0 <i>°</i> A85a.	1) Before we start, please tell me you	r name.		
		FIRST, MIDDLE, LAST		
		DON'T KNOW		
		REFUSED		
		DON'T KNOW		
	ROXY/ NEW PROXY COMES-TO-P		•	
(A85 = 0 A86.	•	out the survey. After I explain, I will ask you th	ree	questions so I can be
		urvey asks about {NAME's} health, daily activit own words what the survey is about.	<u>ies</u> ,	and any jobs {he/she}
	INTERVIEWER: IF RESPONDENT	T SAYS "DON'T KNOW," RECORD AS "LISTS	NOI	NE"
		LISTS NONELISTS ONLY 1 TOPIC		

8/23/2005 A-32 ROUND 2 VERSION

LISTS ANY 2 TOPICS	02	(A89)
LISTS 3 TOPICS	03	(A89)
REFUSED	r	SET A105 = 03
(A105)		

A87 IS DELETED

(A86= 00 OR 01)

A88. INTERVIEWER YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. The survey asks about {NAME}'s health, daily activities, and any jobs {he/she} might have. Please tell me in your own words what the survey is about.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW" RECORD AS "LISTS NONE"

LISTS NONE	00	(A92)
LISTS ONLY 1 TOPIC	01	(A92)
LISTS ANY 2 TOPICS	02	
LISTS 3 TOPICS	03	
REFUSED	r	SET A105 = 03
(A105)		

(A86 = 02 OR 03) OR (A88 = 02 OR 03)

A89. Here is the next explanation. Taking part in the survey is <u>completely voluntary</u>. Completely voluntary means you can choose whether or not to take part. If you decide to take part, you can refuse to answer any questions you do not like and you can stop the interview at any time you choose. Whether you choose to take part or not, {NAME's} disability benefits will not be affected in any way.

When I say your taking part is completely voluntary, what does that mean to you?

PROBE: IF RESPONDENT SAYS: It is voluntary, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: I can decide to take part or not to take part. I can refuse to take part if I want. I don't have to do this. I can do this if I want. No one will take away my benefits if I refuse, etc.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW," RECORD AS "INACCURATE ANSWER"

ACCURATE ANSWER	01	(A90)
INACCURATE ANSWER	02	
REFUSED	r	SET A105 = 03
(A105)		

(A89 = 02)

A89a. INTERVIEWER: YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. Taking part in the survey is <u>completely voluntary</u>. Completely voluntary means you can choose whether or not to take part. If you decide to take part, you can refuse to answer any questions you do not like and you can stop the interview at any time you choose. Whether you choose to take part or not, {NAME's} disability benefits will not be affected in any way.

When I say your taking part is completely voluntary, what does that mean to you?

PROBE: IF RESPONDENT SAYS: It is voluntary, PROBE: What does that mean?

8/23/2005 A-33 ROUND 2 VERSION

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: I can decide to take part or not to take part. I can refuse to take part if I want. I don't have to do this. I can do this if I want. No one will take away my benefits if I refuse, etc.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW" RECORD AS "INACCURATE ANSWER"

(A89a = 01)

A90. Here's the last explanation. All your answers will be <u>kept confidential</u> and used <u>only</u> for the research purposes of the study.

When I say that your answers will be kept confidential, what does that mean to you?

PROBE: IF RESPONDENT SAYS: It is confidential, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: My answers will be secret. Only researchers will see what I said. What I say will be (kept) private. It will only be used for research, etc.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW," RECORD AS "INACCURATE ANSWER"

(A90 = 02)

A90a. INTERVIEWER: YOU ARE ASKING THIS QUESTION FOR THE SECOND AND LAST TIME.

Let's try that again. All your answers will be <u>kept confidential</u> and used <u>only</u> for the research purposes of the study.

When I say that your answers will be kept confidential, what does that mean to you?

PROXY: IF RESPONDENT SAYS: It is confidential, PROBE: What does that mean?

INTERVIEWER: EXAMPLES OF ACCURATE ANSWERS ARE: My answers will be secret. Only researchers will see what I said. What I say will be (kept) private. It will only be used for research, etc.

INTERVIEWER: IF RESPONDENT SAYS "DON'T KNOW," RECORD AS "INACCURATE ANSWER"

A91 IS DELETED

(A88 = 00 OR 0) OR (A89a = 02) OR (A90a = 02)

A92. Thanks for your patience. There seems to be a problem and I need to check with my supervisor about what to do next. My supervisor will get back to you.

PROXY FAILED COGNITIVE TEST...... 01 SET A106 = 04 (A106)

CALL BACK LATER TO SAME NUMBER (INTERIM)

(A1 = 04) OR (A3 = 02) OR (A5 = 02) OR (A7a = 01) OR (A8 = 03) OR (A9 = 03) OR (A10 = 03) OR (A12 = 02) OR (A14 = 04) OR (A17 = 01, 02, 03) OR (A18 = 01) OR (A18 = 01) OR (A20 = 02) OR (A30 = 02

A100. (INTERNAL VARIABLE - NOT DISPLAYED FOR USER - SHOW FOR TESTING PURPOSES ONLY)

PROGRAMMER: DISPLAY ONLY APPROPRIATE TEXT AND VALUE BELOW.

S [*]	TAI	RT NEXT
SCREENER AT		
{you/NAME}	01	A0 = 01
{PROXY NAME}	02	A0 = 10
{INTERPRETER NAME}	03	A0 = 14
{NAME} using TTY	04	A0 = 08
{NAME} using Relay	05	A0 = 07
{NAME} using a phone amplifier (06	A0 = 09
{NEW PROXY NAME} AFTER		
FIRST PROXY FAILED COGNITIVE TEST		07 A0 = 10
$\{NAME\}$ at $\{IF\ A1 = 07;\ OR\ A2 = 07;\ OR\ A4b =$:	
07; OR A13a = 08 FILL HOSPITAL NAME		
FROM A28 / IF A1 = 11; OR A2 = 11; OR		
A4b = 09; OR A13a = 07 FILL		
INSTITUTION NAME FROM A28 (80	A0 = 01
IF A4a = 02 AND A6 = ANSWER		
{NEW INTERPRETER NAME} (09	A0 = 15

PROGRAMMER: SEND TO CALLBACK SCREEN AND INTERVIEWER WILL SET CALL BACK STATUS THERE.

GOTO END

NEW PHONE NUMBER FOR NAME/PROXY/LEAD TO NAME/LEAD TO PROXY

(A36 = 01) OR (A38 = ANSWER) OR (A52 = 01) OR (A62 = 03, 05, OR 09) OR (A84 = 03, 05, OR 09) A101. Thank you very much; we will be calling {NAME/PROXY/LEAD FROM BELOW} shortly.

PROGRAMMER: DISPLAY ONLY APPROPRIATE TEXT AND 01 OR 02 VALUES BELOW. 03 SHOULD NOT BE DISPLAYED.

!	STA	RT NEXT
SCREENER AT		
{NAME}	01	A0 = 01
{PROXY} WHO LIVES ELSEWHERE	02	A0 = 10
LEAD	03	SET A106 = 06
(A106)		

A101a. PROGRAMMER: GO TO END.

SEND TO LOCATING: NAME OR PROXY (INTERIM)

(A1 = 14) OR (A2 = 14) OR (A4b = 11) OR (A24 = 00) OR (A36 = 00) OR (A37 = 00 OR d) OR (A52 = 00) OR (A56 = 07) OR (A62 = 01, OR 02) OR (A72 = 00) OR (A82 = 00) OR (A84 = 01, 02, 04, 05, 07, OR 08)

A102. Thank you very much. Goodbye.

PROGRAMMER: DISPLAY ONLY APPROPRIATE TEXT AND VALUE BELOW.

INTERVIEWER: PRESS 1 TO CONTINUE

START NEXT SCREENER AT... {NAME}: NO SUCH PERSON HERE 01 SET STATUS = 530 (END)......A0 = 01 {NAME}: NEED PHONE NUMBER ONLY 02 SET STATUS = 530 (END)......A0 = 01 {NAME} NEED ALL CONTACT (END)......A0 = 01 {NAME} FAILED VERIFICATION -(END)......A0 = 01 {PROXY}: NO SUCH PERSON HERE 05 SET STATUS = 380 (END)......A0 = 13 {PROXY}: NEED PHONE NUMBER............... 06 SET STATUS = 380 (END)......A0 = 13

PROGRAMMER: FOR 05 – 06 SUPERVISOR WILL SET NEXT STARTING QUESTION AND MAY OVERWRITE CODES

INELIGIBLE (INTERIM / POSSIBLE FINAL)

(A1 = 09, 12, OR 18) OR (A2 = 09, 12, OR 18) OR (A4b = 08,10, OR 14) OR (A13a = 06, 10 OR 11) OR (A26 = 01) OR

(A33 = 01)

A103. Thank you for explaining. That's all the questions we have for you. Goodbye.

PROGRAMMER: DISPLAY ONLY APPROPRIATE TEXT AND VALUE BELOW.

NOTE: PROGRAMMER, THESE CASES ARE INTERIM UNTIL AFTER SUPERVISOR REVIEW. THEY WILL NOT CYCLE THROUGH THE SCREENER AGAIN UNLESS SUPERVISOR/PROGRAMMER RESETS CASE STATUS.

INTERVIEWER: PRESS ENTER TO CONTINUE

INCARCERATED	01	SET STATUS = 421
(END)		
IN ACTIVE MILITARY	02	SET STATUS = 422
(END)		
LIVING OUTSIDE THE USA	03	SET STATUS = 461
(END)		

(A1=08) OR (A2=08) OR (A4b=07) OR (A13a=09)

A103a. I am sorry to hear {NAME} has passed away. I was calling about a study we are conducting for the Social Security Administration. You might have seen a letter we recently sent [NAME} explaining the study. When did {NAME} pass away?

/ /	
MONTH DAY YEAR	
(1-12) $(1-31)$ $(2000-2005)$	
DON'T KNOW	d
REFUSED	r

Thank you. Please accept my condolences. Goodbye.

PROGRAMMER: SET STATUS = 440
GOTO END

BARRIERS TO PARTICIPATION - (INTERIM NON-RESPONSE / POSSIBLE FINAL NON-RESPONSE)

(A1 = 17) OR (A2 = 17) OR (A4b = 13) OR (A46 = 05, 06, 07, 08, OR 09) OR (A56 = 06)

A104. Thank you very much for explaining. That's all the questions I have. Thanks for your time. Goodbye.

PROGRAMMER: DISPLAY ONLY APPROPRIATE TEXT AND VALUE BELOW.

PROGRAMMER: THESE CASES ARE INTERIM UNTIL AFTER SUPERVISOR REVIEW. THEY WILL NOT CYCLE THROUGH THE SCREENER AGAIN UNLESS SUPERVISOR/PROGRAMMER RESETS CASE STATUS.

INTERVIEWER: PRESS ENTER TO CONTINUE

HOSPITALIZED(END)	01	SET STATUS = 420
INSTITUTIONALIZED(END)	02	SET STATUS = 420
COGNITIVE BARRIER(END)	03	SET STATUS = 412
HEARING/SPEECH BARRIER(END)	04	SET STATUS = 411
PHYSICAL BARRIER(END)	05	SET STATUS = 410
UNAVAILABLE DURING FP(END)	06	SET STATUS = 430
FINAL LANGUAGE BARRIER(END)	07	SET STATUS = 400

REFUSALS (INTERIM / FINAL)

(IF ANY OF THE FOLLOWING QUESTIONS = r: A1, A2, A4b, A5, A8, A9, A10, A12, A13a, A14, A17, A18, A20, A21, A22, A27b, A29, A30, A37, A40, A41, A43, A44, A45, A46, A48, A49, A50, A53, A56, A57, A58, A60, A61, A66, A67, A67a, A68, A74, A76, A77, A78, A78a, A80, A85, A86, A88, A89, A89a, A90, A90a) A105. Thank you for your time. Goodbye.

PROGRAMMER: GO TO REFUSAL SCREEN SO INTERVIEWER CAN RECORD REASON FOR REFUSAL.

WHILE THE CASE IS STILL IN INTERIM STATUS, THESE CASES WILL BE SUBJECT TO CALL SCHEDULER RULES THAT WILL DETERMINE WHETHER AND WHEN TO START THE NEXT SCREENER CALL (A0 - 01 OR A0 = 10) OR SET AS 860 (END) (REVIEW NEEDED FOR FIELD BY SUPERVISOR, AKA HOLD FOR CAPI)

INTERVIEWER: PRESS ENTER TO RECORD REASONS FOR REFUSAL IN REFUSAL SCREEN.

SUPERVISOR REVIEW (INTERIM)

(A1 = 15) OR (A2 = 15) OR (A3 = 03 OR r) OR (A4 = r) OR (A4a = 03 OR r) OR (A4b = 03 OR 12) OR (A15 = ANSWER) OR (A18 = 05 OR d) OR (A24 = r) OR (A26=r) OR (A28 = r) OR (A29 = r) OR (A47 = d OR r) OR (A50 = 2) OR (A51 = r) OR (A56 = 05 OR 08) OR (A60 = 00 OR d) OR (A80 = 04 OR d) OR (A101 = 03) A106. Thank you for your time. Goodbye.

INTERVIEWER INSTRUCTION: IF CASE NEEDS A SPANISH INTERVIEWER, PLEASE RECORD IN APPOINTMENT OR EXIT, AS APPROPRIATE.

POSSIBLE LANGUAGE PROBLEM	01	SET STATUS = 380
(END)		
CALL INFORMANT TO SET TTY/		
RELAY CALL BACK TIME	02	SET STATUS = 380
(END)		
NEED TO LOCATE NEW PROXY	03	SET STATUS = 380
(END)		
PROXY FAILED COGNITIVE TEST /		
NO OTHER PROXY AVAILABLE	04	SET STATUS = 380
(END)		
OTHER SUPERVISOR REVIEW	05	SET STATUS = 380
(END)		
CALL LEAD FOR NAME/PROXY INFO	06	SET STATUS = 380
(END)		

HOLD FOR CAPI (INTERIM - REQUIRES SUPERVISOR REVIEW)

(A29 = ANSWER) OR (A45 = 01,02, OR d)

A107. Thank you very much. Our field interviewer will call to arrange a time for the interview.

PROGRAMMER: IN ADDITION TO THESE CASES BEING HELD FOR CAPI, REFUSALS AND UNLOCATABLES WILL ALSO BE HELD FOR CAPI UNDER CERTAIN CIRCUMSTANCES THAT THE SUPERVISORS WILL DECIDE.

NOTE ALSO THAT ALL CAPI CASES WILL START THE CAPI SCREENER AT A0 = 01.

INTERVIEWER: PRESS 1TO CONTINUE

HOLD FOR CAPI	01	SET STATUS = 860
(END) A0 = 01		

RESPONDENT WILL CALL MPR (INTERIM)

(A10 = 02) OR (A17 = 05 OR 06)

A108. Thanks for offering to call in. Please write down our toll-free number. {IF (A10 = 02 OR A17 = 06) FILL 877-293-5740. / IF (A17 = 05) FILL Call 877-293-5741 for a TTY interview.} We are available days, evenings, and weekends. If you call after hours, please leave a message and we will get back to you the next day.

INTERVIEWER: PRESS ENTER TO CONTINUE

{NAME} WILL CALL	01	SET STATUS = 830
(END) A0 = 02		
{NAME} WILL CALL/TTY	02	SET STATUS = 830
(END) A0 = 08		
{NAME} WILL CALL/RELAY	03	SET STATUS = 830
(END) A0 = 07		

REQUEST FOR LETTER (INTERIM)

(A22 = 01) OR (A25 = 00) OR (A26 = r) OR (A59 = 02)

A109. You should receive the letter in about a week. Thank you for your time. Goodbye.

INTERVIEWER: PRESS 1 TO CONTINUE

	S	IARINEXI
SCREENER AT		
{NAME} REQUESTS LETTER	01	SET STATUS = 831
(END) A0 = 04		
PROXY REQUESTS LETTER	02	SET STATUS = 831
(END) A0 = 11		

CONTINUE WITH INTERVIEW

(A78a = 01) OR (A90a = 01) A110. RESPONDENT CHECK SCREEN

INTERVIEWER: WE SHOW THE RESPONDENT IS

(IF A73 = 01, 02; OR A73 = 03 AND A78a = 01 FILL {NAME} (IF A73 = 04 OR 05 AND A78a = 01; OR A90a = 01 FILL PROXY

INTERVIEWER: IS THIS INFORMATION CORRECT?

YES	01	(B1)
NO	00	

(A110 = 00)

A110a. INTERVIEWER: WHO IS THE RESPONDENT?

SAMPLE MEMBER	01	(B1)
PROXY	02	(B1)

8/23/2005 A-39 ROUND 2 VERSION

SECTION B: DISABILITY AND CURRENT WORK STATUS

DISABILITY STATUS

1	٨	ı	ı	١
(н	ı	ı)

B1. PROGRAMMER: IF {NAME} IN LONGITUDINAL SAMPLE THAT COMPLETED ROUND 1 (S2 = 02), ASK:

Thank you for agreeing to participate in the National Beneficiary Survey. The survey will cover questions that will help us learn about changes in {your/NAME's} life since the last interview. Your answers are very important to the Social Security Administration. The first questions are about how {your/NAME's} health affects {your/his/her} daily activities.

Last year, we asked about physical or mental condition(s) that limited {your/NAME's} ability to work or do other daily activities. We need to ask these questions again to be sure we have up to date information.

Does a physical or mental condition currently limit the kind or amount of work or other daily activities (you/NAME) can do?

PROBE 1: In other words, are there things {you/NAME} can't do as much or can't do at all that people the same age can?

PROBE 2: Daily activities include cooking, shopping, getting around the home, paying bills, or working at a job.

PROGRAMMER: OTHERWISE IF {NAME} IS IN SAMPLE TYPE 1 OR 3 (S2=01,03), ASK:

First, I have some questions about how {your/NAME's} health affects {your/his/her} daily activities.

Does a physical or mental condition limit the kind or amount of work or other daily activities {you/NAME} can do?

PROBE 1: In other words, are there things {you/NAME} can't do as much or can't do at all that people the same age can?

PROBE 2: Daily activities include cooking, shopping, getting around the home, paying bills, or working at a job.

YES	01	
NO	00	(B5)
DON'T KNOW	d	(B5)
REFUSED	r	(B5)

(B1=01)

B2. What physical or mental condition is the main reason (you are/NAME is) limited?

INTERVIEWER: ENTER VERBATIM RESPONSE

PROBE 1: By what name do doctors call {your/NAME's} health condition?

PROBE 2: What causes this condition?

∠ODEN⊳			

DON'T KNOW	d
REFUSED	r

(B1=01)

B3. Do you/Does NAME} {(IF S2 = 02) currently} have any other physical or mental conditions that limit the kind or amount of work or other daily activities {you/he/she} can do?

PROBE 1: In other words, are there things {you/NAME} can't do as much or can't do at all that people the same age can? PROBE 2: Daily activities include cooking, shopping, getting around the home, paying bills, or working at a job.

YES	01	
NO	00	(B18_age)
DON'T KNOW		
REFUSED	r	(B18_ age)

8/23/2005 B-1 ROUND 2 VERSION

(B1=01 a B4.	and B3=01) What are those conditions?			
	INTERVIEWER: ENTER VERBAT PROBE 1: By what name do docto PROBE 2: What causes this condi	rs call {your/NAME's} health condition?		
	<open></open>			
		DON'T KNOW		
		GO TO B18_age		
(B1=00, B5.		ving disability benefits from Social Security?		
Б3.	The yours training currently recei			
		YES	-	(R0)
		DON'T KNOW		• •
		REFUSED		
(B1=00, B6.	d, r and B5=01) What physical or mental condition	is the <u>main</u> reason {you are/NAME is} eligible fo	or dis	sability benefits?
	INTERVIEWER: ENTER VERBAT PROBE 1: By what name do docto PROBE 2: What causes this condi	rs call {your/NAME's} health condition?		
	<open></open>			
		DON'T KNOW	Ь	
		REFUSED		
(B1=00, B7.	d, r and B5=01)	ner physical or mental conditions that make {you	ı/hin	n/har\ aligihla for disahility hanafits?
<i>Σ</i> 1.	(50 you, 5000 to twill have any on		a, i iii	infinity display for disability bottonic.
		YES	01	(D40)
		NO DON'T KNOW		
		REFUSED		
(B1=00, B8.	d, r and B5=01 and B7=01) What are those conditions?			
	INTERVIEWER: ENTER VERBAT PROBE 1: By what name do docto PROBE 2: What causes this condi	rs call {your/NAME's} health condition?		
	<open></open>			
		DON'T KNOW	Ь	
		REFUSED		

GO TO B18_ age

	AMMER: B9 THROUGH B23 SKIPPED FOR LONG	GITUDINAL SAMPLE WHO COMP	LETED ROUND 1 (S2=02)
(S2=01, B9.	03) and (B1=00, d, r and B5=00,d, r) {Have you/Has NAME} received disability benefits	from Social Security at any time du	uring the last five years?
			•
		01	
		00	
		V d	
	REFUSED	r	
(S2=01,	03) and (B1=00, d, r and B5=00,d,r and B9=00,d,r)		
B10.	We are only interviewing people who have reco	eived disability benefits in the pas	st five years. I need to check with m
	supervisor and get back to you. Thank you for you	ur help.	
	PRESS 1 TO CONTINI	JE 01	
		SUPERVISOR REVIEW 380."	
(S2=01	03) and (B1=00, d, r and B5=00,d, r and B9=01)		
B11.	{Do you/Does NAME} still have the physical or me	ental conditions that made {you/him	n/her} eligible for Social Security disabilit
	benefits?	v	, ,
	YES	01	
		00	
		V d	` ,
		r	
			(- /
(S2=01,	03) and (B1=00, d, r and B5=00,d,r and B9=01 and	B11=01)	
B12.	What physical or mental condition is the $\underline{\text{main}}$ reas	son {you were/NAME was} eligible f	or disability benefits?
	INTEDVIEWED: ENTED VEDDATIM DESDONSE		
	INTERVIEWER: ENTER VERBATIM RESPONSE PROBE 1: By what name do doctors call {your/NA		
	PROBE 2: What causes this condition?	inc synealth condition:	
	<open></open>		
	DON'T KNOW	V d	
		· r	
	KEI OSED	······································	
(S2=01,	03) and (B1=00, d, r and B5=00,d,r and B9=01 and	B11=01)	
B13.	{Do you/Does NAME} have any other physical or r	•	im/her} eligible for disability benefits?
		01	
		00	
		V d	
	REFUSED	r	(B18_age)
(S2=01,	03) and (B1=00, d, r and B5=00,d,r and B9=01 and	B11=01 and B13=01)	
B14.	What are those conditions?	,	
	INITEDVIEWED, ENTED VEDDATINA DECORONICE		
	INTERVIEWER: ENTER VERBATIM RESPONSE		
	PROBE 1: By what name do doctors call {your/NA PROBE 2: What causes this condition?	avic of Health Conditions	
	TAODE 2. What causes this condition:		
	<open></open>		
	DON'T KNOW	V d	
		v u	
	KLI OOLD	I	

8/23/2005 B-3 ROUND 2 VERSION

GO TO B18_age

What physical or mental condition was the main reason (you were/NAME was) limited when (you/he/she) first started getting B15. disability benefits from Social Security? INTERVIEWER: ENTER VERBATIM RESPONSE PROBE 1: By what name did doctors call {your/NAME's} health condition? PROBE 2: What caused this condition? <OPEN> DON'T KNOW...... d REFUSED.....r (S2=01,03) and (B1=00, d, r and B5=00,d,r and B9=01 and B11=00,d,r) Did {you/NAME} have any other physical or mental conditions that limited the kind or amount of work or other daily activities B16. {you/he/she} could do when {you/he/she} first started getting disability benefits? YES...... 01 DON'T KNOW d (B18_age) REFUSED.....r (B18_age) (S2=01,03) and (B1=00, d, r and B5=00,d,r and B9=01 and B11=00,d,r and B16=01) B17. What were those conditions? INTERVIEWER: ENTER VERBATIM RESPONSE PROBE 1: By what name did doctors call {your/NAME's} health condition? PROBE 2: What caused this condition? <OPEN> ___ DON'T KNOW...... d REFUSED.....r PROGRAMMER: B18 age THROUGH B23 SKIPPED FOR LONGITUDINAL SAMPLE WHO COMPLETED ROUND 1 (S2=02)(S2=01,03) and (All) B18_age. How old {were you/was NAME} when {you/he/she} first became limited in the kind or amount of work or other daily activities {you/he/she} could do? Your best estimate is fine. INTERVIEWER: IF AGE IS NOT KNOWN, ENTER '99' TO PROBE FOR A YEAR. INTERVIEWER: IF LESS THAN ONE YEAR OR SINCE BIRTH, ENTER '0' IN AGE. (B20 IF AGE 0-98) AGE (0-99)SINCE BIRTH00 (B20) DON'T KNOW......d (B19) REFUSED.....r (B19)

(S2=01,03) and (B1=00, d, r and B5=00,d,r and B9=01 and B11=00,d,r)

B18_yea	ar.			
	PROBE: READ IF NECESSARY: I	n what year?		
		YEAR (1033 2005) (B20)		
		(1933-2005) (B20)		
		DON'T KNOW	d	
		REFUSED	r	
(\$2_01	03) and (B18_age=d,r) or (B18_age	>=00 and R19, year=d r)		
(32=01, B19.	, , , , , , , , , , , , , , , , , , , ,	efore the age of 18 or after age 18?		
	,	5		
	PROBE: Your best guess is fine.			
		LESS THAN 18	Ω1	
		18 OR OLDER		
		DON'T KNOW		
		REFUSED	r	
(00.04	02) and (AII)			
(SZ=01, B20.	03) and (All)	(B18_age) SHOULD NOT EXCEED CURRE	NΤ	AGE IE RESPONDENT FAILS EDIT
<i>D</i> 20.		have recorded an incorrect answer. I show		
		imited when {you were/(he/she) was} (B18_ag		• • •
	age or change the age when {you/	NAME} first became limited?		
		OLIANOE OLIBBENT AGE	0.4	(OHANGE OURD AGE)
		CHANGE CURRENT AGECHANGE AGE WHEN FIRST BECAME	01	(CHANGE CURR AGE)
		LIMITED	02	(CHANGE B18, age)
		SUPPRESS		(Or # # 10 _ 2 10 _ ago)
-	03) and (All)	THE SINGE ADJUSTICOD (ACE EDOM DAG)		10.40.00.01.DED.00.040.00\2
B21.	CHECK: HAS {NAME} BEEN LIM	ITED SINCE ADULTHOOD (AGE FROM B18_3	age	1S 18 OR OLDER OR B19=02)?
		YES	01	
		NO	00	(B24)
(00.04	02) and (D24, 04)			
(SZ=01, B22.	03) and (B21=01) {Were you/Was NAME} working a	t a job for pay when {you/he/she} first became li	mite	ed?
DLL.	(void you void in the morning a	ta jos for pay whom (yournording) mot boodine i		
		YES	01	
		NO		` ,
		DON'T KNOW		• •
		REFUSED	r	(B24)
(S2=01,	03) and (B21=01 and B22=01)			
B23.		at time require {you/him/her} to use a computer?)	
		VEC	04	
		YES	-	
		DON'T KNOW		

(S2=01,03) and (B18_age=99)

REFUSED.....r

CURRENT WORK STATUS

B24. These next questions are about {your/NAME's} personal goals and {your/his/her} current work-related activities.

{Are you/Is NAME} currently working at a job or business for pay or profit?

YES	01	(B30)
NO	00	
DON'T KNOW	d	(B28)
REFUSED	r	(B28)

(B24=00)

B25. Other beneficiaries have said that they are not working for a number of reasons. I am going to read you a list of these reasons. For each, please tell me if it is a reason why {you are/NAME is} not currently working.

{Are you/ Is NAME} not working because ...

PROBE: I need to read the entire list even though some of the reasons may not apply to {you/NAME}. If a reason does not apply to {you/NAME}, please just say so.

INTERVIEWER: IF RESPONDENTS SAYS 'DOES NOT APPLY' CODE AS 'NO'.

				DON'T	
		<u>YES</u>	<u>NO</u>	KNOW	REFUSED
8	. A physical or mental condition prevents {you/him/her} from working?	01	00	d	r
b	. {You/NAME} cannot find a job that {you are/(he/she) is} qualified for?	01	00	d	r
C	. {You do/NAME does} not have reliable transportation to and from work?	01	00	d	r
C	. {You are/NAME is} caring for someone else?	01	00	d	r
e	. ITEM DELETED				
f	{You/NAME} cannot find a job {you want/(he/she) wants}?	01	00	d	r
ç	. {You are/NAME is} waiting to finish school or a training program?	01	00	d	r
r	. Workplaces are not accessible to people with {your/NAME's} disability?	01	00	d	r
į.	{You do/NAME does} not want to lose benefits such as disability, worker's				
	compensation, or Medicaid?	01	00	d	r
j.	{Your/NAME's} previous attempts to work have been discouraging?	01	00	d	r
k	. ITEM DELETED				
1.	Others do not think {you/NAME} can work?	01	00	d	r
r	n. Employers will not give {you/NAME} a chance to show that {you/he/she} can				
	work?	01	00	d	r

B	2	4=	0	O

B26. Are there any other reasons why {you are/NAME is} not working that I did not mention?

YES	01	
NO	00	(B28)
DON'T KNOW	d	(B28)
REFUSED	r	(B28)

(B24=00 and B26=01)

B27. What are they?

INTERVIEWER: ENTER VERBATIM RESPONSE

<open></open>		
	DON'T KNOW	d

REFUSED	r

(B24=0	0,d,r)					
B28.	{Have you/Has NAME} been lookir	g for work during the last four weeks?				
		YES				
		DON'T KNOW d REFUSED r	(B30) (B30)			
(B24=0	0,d,r and B28=01)					
B29.	Next, I am going to read you a list did any of these things during the I	of things that some people do to look for work. Past four weeks.	lease tell	me whe	ther or not	{you/NAME
	To look for work in the last four we	eks did {you/he/she}:				
			VEC	NO	DON'T	DEFLICE
	a. Contact {your/his/her} state's u	nemployment office?	<u>YES</u> 01	<u>NO</u> 00	<u>KNOW</u> d	<u>REFUSED</u> r
		memployment office:	01	00	d	r
		nts in a newspaper or on the internet?	01	00	d	r
		Rehabilitation Agency or {VRNAME FROM	0.	00	ŭ	•
		?	01	00	d	r
	• •	ving center?	01	00	d	r
	•	agency or program?	01	00	d	r
		son, by mail, or by phone?	01	00	d	r
		nention?	01	00	d	r
	PROGRAMMER: IF B29h=01, GO	TO B29h_Other, ELSE GO TO B30.				
-	0,d,r and B28=01 and B29_h=01) Other. What was it?					
DZ5II_	offici. What was it:					
	INTERVIEWER: PLEASE SPECIF	Y				
	<open></open>					
		DON'T KNOW d				
		REFUSEDr				
(AII) B30.	Did (vou/NAME) work at a job or b	usiness for pay or profit anytime in 2004?				
D30.	Did (you/NAINE) Work at a job of b	usiness for pay or profit anythine in 2004:				
		YES 01				
		NO 00				
		DON'T KNOW d				
		REFUSEDr				
(AII) B33.	CHECK: WAS (NAME) WORKING	WHEN LIMITATION BEGAN (B22=01)?				
200.	J. ILON. WING HAVINE, WORKING	····-·································				

8/23/2005 B-7 ROUND 2 VERSION

CHECK: IS {NAME} CURRENTLY WORKING (B24=01)?

(B33=00)

B34.

(B33=00 B35.	and B34=00) CHECK: DID {NAME} WORK IN 20	004 (B30=01)?	
		YES	• •
		NO	00
	AMMER: B36 SKIPPED FOR LONG 03) and (B33=01 and B34=01 and E {Have you/Has NAME} ever worked	•	ID 1 (S2=02)
		YES	11
		NO	0
		DON'T KNOW	d
		REFUSED	r
(All)			
B37.	Do {your/NAME's} personal goals in	nclude {(IF B36=00) getting a job,} moving up in	a job or learning new job skills?
		YES	14
		NO	
		DON'T KNOW	
		REFUSED	
(AII)		KLI OOLD	•
B37a.	Do {your/NAME's} personal goals benefits?	include someday working and earning enough	to stop receiving Social Security disability
		YES	11
		NO	
		DON'T KNOW	
		REFUSED	
(AII) B38.	{Do you/Does NAME} ever discuss	work and career goals with family, friends, or an	yone else?
		YES	11
		NO	
		DON'T KNOW	d (B47)
		REFUSED	r (B47)
			/
(B38 =0	1)		
B39.	· ·	{your/his/her} work goals with the most?	

INTERVIEWER: MARK ONLY ONE.

PARENT/GUARDIAN	01 (B40)
SPOUSE/PARTNER	02 (B40)
FRIEND	03 (B40)
JOB COACH	04 (B40)
EMPLOYER/SUPERVISOR	05 (B40)
OTHER RELATIVE	06 (B40)
CASE WORKER/COUNSELOR/PROGRAM STAFF	07 (B40)
MEDICAL PROVIDER	08 (B40)
OTHER	09
DON'T KNOW	d (B47)
REFUSED	r (B47)

(B38 =01 and B39=09) B39_oth. Who was it?

	INTERVIEWER: PLEASE SPECIFY							
	<open></open>							
	DON'T KNOW REFUSED							
(B38=01 B40.	I and B39=01-09) Please tell me how much you agree or disagree with disagree, or strongly disagree?	the following	ı statement	. Wo	ould yo	u say you st	rongly ag	ree, agree,
	uisagree, or strongly disagree?	STRONGLY				STRONGLY	DON'T	
		AGREE	<u>AGREE</u>	DISA	GREE	DISAGREE	KNOW	REFUSED
	{Your/NAME's} {RESPONSE FROM B39} thinks {your/NAME's} personal goals should include working at a job, moving up in a job, or learning new job skills		02		03	04	d	r
(B38=01 B41.	and B39=01-09) {Do you/Does NAME} discuss {your/his/her} work goals	with anyone	else?					
	YES			01				
	NO			-	(B47)			
	DON'T KNOW				` ,			
	REFUSED							
(B38=01 B42.	I and B39=01-09 and B41=01) Who else {do you/does NAME} discuss {your/his/her} v INTERVIEWER: MARK ONLY ONE.	vork goals witl	h?					
	PARENT/GUARDIAN			01	(B43)			
	SPOUSE/PARTNER				, ,			
	FRIEND				, ,			
	JOB COACH				, ,			
	EMPLOYER/SUPERVISOR			05	(B43)			
	OTHER RELATIVE			06	(B43)			
	CASE WORKER/COUNSELOR/PROGRAM S	TAFF		07	(B43)			
	MEDICAL PROVIDER			08	(B43)			
	OTHER			09				
	DON'T KNOW			d	(B47)			
	REFUSED			r	(B47)			
-	I and B39=01-09 and B41=01 and B42=09) n. Who was it?							
	INTERVIEWER: PLEASE SPECIFY							
	<open></open>							
	DON'T KNOW REFUSED							

(B38=01 and B39=01-09 and B41=01 and B42=01-09)

B43 Please tell me how much you agree or disagram.

B43.	Please tell me how much you agree or disagree with disagree, or strongly disagree?	the following	statemen	t. Would y	ou say you st	rongly ag	ree, agree,
		STRONGLY <u>AGREE</u>	AGREE	DISAGREE	STRONGLY DISAGREE	DON'T KNOW	REFUSED
	{Your/NAME's} {RESPONSE FROM B42} thinks {your/NAME's} personal goals should include working at a job, moving up in a job, or learning new job skills		02	03	04	d	r
(B38=0 B44.	1 and B39=01-09 and B41=01 and B42=01-09) {Do you/Does NAME} discuss {your/his/her} work goals	with anyone	else?				
	YES NO DON'T KNOW REFUSED			00 (B47 d (B47)		
(B38=0 B45.	1 and B39=01-09 and B41=01 and B42=01-09 and B44= Who else {do you/does NAME} discuss {your/his/her} v	•	n?				
	INTERVIEWER: MARK ONLY ONE.						
	PARENT/GUARDIAN	TAFF		02 (B46 03 (B46 04 (B46 05 (B46 06 (B46 07 (B46 08 (B46 09 d (B47))))))		
-	1 and B39=01-09 and B41=01 and B42=01-09 and B44= n. Who was it?	01 and B45=0	9)				
	INTERVIEWER: PLEASE SPECIFY						
	<open></open>						
	DON'T KNOW REFUSED						
(B38=0 B46.	1 and B39=01-09 and B41=01 and B42=01-09 and B44= Please tell me how much you agree or disagree with disagree, or strongly disagree?			t. Would y	ou say you st	rongly ag	ree, agree,
		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY <u>DISAGREE</u>	DON'T <u>KNOW</u>	REFUSED
	{Your/NAME's} {RESPONSE FROM B45} thinks {your/NAME's} personal goals should include working at a job, moving up in a job, or learning new ich skills	<u>AGKLL</u>	02	03	<u>DISAGREE</u>	1014044	<u>INEL GOLD</u>

job skills.....

01

02

03

04

r

(AII) B47. Please tell me how much you agree with the following statements. Would you say you strongly agree, agree, disagree, or strongly disagree?

		STRONGLY <u>AGREE</u>	<u>AGREE</u>	DISAGREE	STRONGLY DISAGREE	DON'T KNOW	REFUSED
a. b.	You see {yourself/NAME} {(IF B24=01) continuing to work/ (IF B24=00,d,r) working} for pay in the next year	01	02	03	04	d	r
C.	You see {yourself/NAME} working and earning enough to stop receiving disability benefits in the next year	01	02	03	04	d	r
d.	next <u>five</u> years	01	02	03	04	d	r
-	B48) You see {yourself/NAME} working and earning enough to stop receiving disability benefits in the next <u>five</u> years	01	02	03	04	d	r
C	CHECK: IS {NAME} CURRENTLY WORKING (B24 = 0	1)?					

(All)

B48.

YES	01	(C1)
NO	00	

(B48=00)

B49. CHECK: WAS {NAME} WORKING IN 2004 (B30 = 01)?

YES01	(D1)
NO00	(E1)

SECTION C: CURRENT EMPLOYMENT

(All) C1.	Now I am going to ask some questions about the jobs {you/NAME} currently {have/has}. When answering these questions please include both part-time and full-time jobs, but only include jobs {you hold/NAME holds} for pay or profit.
	How many jobs {do you/does NAME} currently have?
	NUMBER OF JOBS (1-5) (1-15)
	DON'T KNOW d REFUSED r
	PROGRAMMER: C2 THROUGH C14 ASKED FOR ALL JOBS WHEN C1>01
(AII) C2.	PROGRAMMER: IF MORE THAN ONE JOB (C1>01) AND FIRST JOB: Let us start with {your/NAME's} main job — that is, the job at which {you work/(he/she) works} the most hours. What kind of work {do you/does NAME} do, that is, what is {your/NAME's} occupation?
	PROGRAMMER: IF MORE THAN ONE JOB (C1>01) AND SECOND, THIRD, FOURTH, ETC. JOB: Now I would like to ask about {your/NAME'S} {second/third/fourth} job. What kind of work {do you/does NAME} do, that is, what is {your/NAME's} occupation? ELSE (C1=01): What kind of work {do you/does NAME} do, that is, what is {your/NAME's} occupation?
	INTERVIEWER: ENTER VERBATIM RESPONSE
	PROBE 1: For example, a child-care provider at a private preschool; geometry teacher in a public high school; sales clerk in a women's shoe store. PROBE 2: What are {your/NAME'S} main activities or duties? What else {do you/does NAME} do? What else? {Do you /Does NAME} supervise anyone?
	<open></open>
	DON'T KNOW d REFUSED r
(AII) C3.	What kind of business is this?
	INTERVIEWER: ENTER VERBATIM RESPONSE
	PROBE 1: For what type of organization or industry do you work? For example: accounting firm, daycare center, educational facility, food services. PROBE 2: What do they make, sell, or do where {you work/NAME works}? PROBE 3: Is this mainly manufacturing (making a product), wholesale trade (selling to other businesses), or retail trade (selling to customers) or something else?
	<open></open>
	DON'T KNOW d REFUSED r

2/28/2012 4:26 PM C-1 ROUND 2 VERSION

(All) C4mth.	In what month and year did {you/NAPROBE: Your best estimate is fine.	AME} start working there?		
	INTERVIEWER: ENTER MONTH H	ERE AND YEAR ON NEXT SCREEN		
		(1-12) MO		
		DON'T KNOW		
(All) C4yr.	PROBE 1: In what month and year PROBE 2: Your best estimate is fin-	did {you/NAME} start working there? e.		
	INTERVIEWER: ENTER YEAR			
		_ _ (1981-2005) YEAR (1951-2005)		
		DON'T KNOW		
C5.	YEAR OF BIRTH (A04_d) PLUS 14 incorrect answer. I show that {you	RTED WORKING AT THIS JOB (C4yr) SHOU FYEARS. IF RESPONDENT FAILS EDIT, INTO FI were/NAME was} born in (A04_d) and {you/I working at this job when {you were/he was/sho FH) years old. Is that correct?	ERV VAM e wa	/IEWER READ: I must have recorded an IE} started working at this job in (C4yr),
		NOSUPPRESS	02	(CHANGE C4YR)
		SUFFRESS	03	
(AII) C5A.		that they should report a change in work statuw that {you were/ (he/she) was} working?	us to	o Social Security. Around that time did
		YES NO DON'T KNOW REFUSED	00 (d ((C6)
(C5a=0° C5B.		this job did {you/NAME } tell Social Security {yo	ou w	vere/(he/she) was} working?
	INTERVIEWER: IF R TOLD SSA B	EFORE STARTED WORKING, CODE AS 1 WE	EEK	
		WEEKS	02 d	(C5BMonth) (C6)

(C5a=0 C5BWe	1 and C5b=01)	
002110	oit.	INTERVIEWER: ENTER NUMBER OF <u>WEEKS</u> _ WEEKS (1-52)
		DON'T KNOW d (C6) REFUSED r (C6)
-	1 and C5b=02)	
C5BMo	ntn.	INTERVIEWER: ENTER NUMBER OF MONTHS _ WEEKS / MONTHS (1-12)
		DON'T KNOW d (C6) REFUSED r (C6)
(All)		
C6.	{Are you/Is NAME} self-employed PROBE: Self-employed means that	at this job? t you work for yourself/ or own your} own business.
		YES
(AII) C7.	-	ork programs available to people with disabilities. Is {your/NAME's} job part of a sheltered employment program, the Business Enterprise Program for the blind, or a supported
	not be available in a regular job) for to work at reduced levels while the legally blind persons the opportunity	a program that provides employment with subsidized wages (or special wages that would repeople with disabilities. A <u>transitional employment program</u> allows workers with disabilities are ease back into the workplace. The <u>Business Enterprise Program for the blind</u> offersity to own their own businesses. <u>Supported employment programs</u> provide job coaches of dividuals with disabilities get and keep jobs.
		YES
(AII) C8.	,	/does NAME} usually work at this job? e/she} usually {work/works} overtime.
		HOURS PER WEEK (1-60) (1-168)
		DON'T KNOW d REFUSED r

(AII) C9.	C9. How many weeks per year {do you/does NAME} usually work at this	job, including paid vacation and holidays?
	PROBE 1: There are 52 weeks in a year. PROBE 2: Please include time off for vacation and holidays if {you a PROBE 3: If {you have/NAME has} worked less than a year, pleasexpects} to work.	
	_ WEEKS PER YEAR (1-52)	
	DON'T KNOWREFUSED	
(AII) C10.		
	PROGRAMMER: IF MORE THAN ONE JOB (C1>01) AND SECONI For the purpose of this survey, it is important to obtain some {your/(his/her)} {second/third/fourth} job. On {your/NAME's} {second ELSE (C1=01):	information on how much {you are/NAME is} paid or /third/fourth} job {are you/is (he/she} paid by the hour?
	For the purpose of this survey, it is important to obtain some {your/(his/her)} current job. On {your/NAME's} current job {are you/is	
	PROGRAMMER: USE PROBE IF MORE THAN ONE JOB (C1>01) PROBE: {Your/NAME's} main job is the job we have been talking at hours.	
	YES NO DON'T KNOW REFUSED	00 (C12amt) d (C12amt)
(C10=0 C11.	C10=01) C11. What is {your/NAME's} regular hourly pay, including tips and commis PROBE: IF LESS THAN \$5.00 AN HOUR: Does this include tips and	
	INTERVIEWER: IF ENTERING AN AMOUNT WITH CENTS, PLEAS	SE ENTER DECIMAL POINT
	\$. . PER I (1 – 25.00) (1 - 300.00)	HOUR
	DON'T KNOWREFUSED	
	GO TO C14.	
•	C10=00, d, or r) C12amt. Before taxes and other deductions how much {are you/is NAME} pai PROBE: Is that amount paid daily, weekly, bi-weekly, twice a month	The state of the s
	INTERVIEWER: ROUND TO NEAREST DOLLAR AND ENTER HO	W OFTEN PAID ON NEXT SCREEN
	\$ _ , . C	00
	DON'T KNOW REFUSED	

(C10=00, d	l, or r)
C12hop.	

1	NTE	P۱	/IE	WED.	FNTFR	HOW	OFTEN	PΔIΓ

		DAILY WEEKLY BI-WEEKLY TWICE A MONTH MONTHLY ANNUALLY DON'T KNOW REFUSED	02 (1-1,923) 03 (1-4,166) 04 (1-4,166) 05 (1-8,333) 06 (1-100,000) d	(1-1,922) (1-9,615) (1-20,833) (1-20,833) (1-41,666) (1-500,000)
	For this job, about how much is left	as take-home pay after taxes and other deductive weekly, bi-weekly, twice a month, monthly, or a		
	INTERVIEWER: ROUND TO NEAR	REST DOLLAR AND ENTER HOW OFTEN PA	ID ON NEXT SC	CEEN
		\$ _ .00		
		DON'T KNOW		
(C10=00				
C13hop.	INTERVIEWER: ENTER HOW OF	ΓEN PAID		
		DAILY WEEKLY BI-WEEKLY TWICE A MONTH MONTHLY ANNUALLY DON'T KNOW REFUSED	02 (1-1,730) 03 (1-3,750) 04 (1-3,750) 05 (1-7,500) 06 (1 –90,000) d	(1-1,730) (1-8,653) (1-18,750) (1-18,750) (1-37,500) (1-450,000)
C14.	SOFT EDIT: AMOUNT OF TAKE-F AND OTHER DEDUCTIONS (C1 incorrect answer. You said that {y (C13amt) per (C13hop) is left as	4, 05, or 06) and (C13hop=01, 02, 03, 04, 05, or 06) and (C13hop=01, 02, 03, 04, 05, or 06). IF RESPONDENT FAILS EDIT, INTER you are/NAME is} paid (C12amt) per (C12hop) at take-home pay after taxes and other deductions or the amount {you take take take to 06.	EQUAL TO AMO VIEWER READ before taxes ar ctions. Should	e: I must have recorded an and other deductions and that I change the amount (you
	CHANG	E AMOUNT PAID BEFORE TAXES AND		
	CHANG	R DEDUCTIONSE AMOUNT OF TAKE-HOME PAY	02 (CHANGE	•
(AII) C15.	CHECK: IS {NAME} SELF EMPLO	YED (C6=01)?		
		YES	,	

(C1	_	Δ

C16. {Have you/Has NAME} received any promotions at this job during the past 12 months?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

(All)

C17. CHECK: IS {NAME} A PROXY RESPONDENT (RTYPE=2)?

YES01	(C19)
NO00	

(C17=00)

C18. Taking all things into account, how satisfied are you with your {main/current} job? Would you say:

PROGRAMMER: USE "MAIN" IF C1>01, OTHERWISE USE "CURRENT."

Very satisfied,	01
Somewhat satisfied,	02
Not very satisfied, or	03
Not at all satisfied?	04
DON'T KNOW	d
REFUSED	r

(All)

C19. CHECK: IS {NAME} SELF EMPLOYED (C6=01)?

YES	01	(C21)
NO	.00	

(C19=00)

C20. Now, I'd like to ask you a few more questions about {your/NAME's} {main/current} job. I am going to read to you a list of benefits that some employers offer their employees. Please tell me whether or not {your/NAME's} {main/current} employer offers {you/him/her} any of these benefits.

PROGRAMMER: USE "MAIN" IF C1>01, OTHERWISE USE "CURRENT."

Does {your/NAME's} employer offer {you/NAME}...

PROBE: Please answer 'yes' if {you are/NAME is} eligible for the benefit but {haven't/hasn't} yet started to receive it.

				DON'T	
		<u>YES</u>	<u>NO</u>	KNOW	REFUSED
a.	Health care insurance? (IF NECESSARY: medical and/or hospital)?	01	00	d	r
b.	Dental benefits?	01	00	d	r
c.	Sick days with pay?	01	00	d	r
d.	Paid vacation?	01	00	d	r
e.	Free or low-cost childcare?	01	00	d	r
f.	Transportation, a transportation allowance, or transportation discounts?	01	00	d	r
g.	Long-term disability benefits?	01	00	d	r
h.	Pension or retirement benefits?	01	00	d	r
i.	Flexible health or dependent care spending accounts?	01	00	d	r

DONIT

CHECK: DOES {NAME} HAVE MOR	E THAN ONE CURRENT JOB (C1>01)?				
, ,	,)1 (DED	DEAT (22 - C14 EOD EAU	CH IOR)
		-	LAT	22 - 0141 ON LAC	эт эов)
		-	-		
		. ,			
F	REFUSED	r (C27)	1		
•					
What kind of special equipment {do y PROBE: Anything else?	ou/does NAME} use?				
INTERVIEWER: CODE ALL THAT AI	PPLY.				
BRACE			01	(C24)	
WHEELCHAIR			03	(C24)	
				(C24)	
				(004)	
1 1000 00)				, ,	
•	ent?				
<open></open>				-	
Г	OON'T KNOW	d			
1)					
,	/ha/sha usas\?				
		edicaid,	or som	neone else?	
INTERVIEWER: CODE ALL THAT AI	PPLY.				
{NAME}			01	(C26amt)	
				(C26amt)	
HEALTH INSURAN	ICE			• •	
				, ,	
				` '	
			U/	(C25)	
			ΩQ	(C25)	
				` '	
			11	(0=0)	
				(C25)	
tl	{Do you/Does NAME} use any spect/his/her} job{s}, for example a brace, of this/her} job{s}, for example, for equipment a brace, of this/her} job{s}, for example, for e	(Do you/Does NAME) use any special equipment related to (your/his/her) disabi /his/her) job(s), for example a brace, cane, wheelchair, modified computer hardware YES	YES	YES	YES

REFUSED

r (C25)

C24_Otl	ner. Who else paid for the equipmen	t {you use/NAME uses}?	
	<open></open>		
		DON'T KNOW d REFUSED r	
(C22=01 C25.	and C24=03, 04, 05, 06, 07, 08, 09 {Do you or your/Does NAME or (his	o, 10, 11, d, or r) s/her)} family have to pay for any part of the cost of	the equipment {you use/(he/she) uses}?
		YES	7)
) and (C24=01 or 02) or (C25=01) How much {do you or your/does N/	AME or (his/her)} family have to pay?	
	INTERVIEWER: ROUND TO NEA	REST DOLLAR HERE AND ENTER HOW OFTEN	PAID ON NEXT SCREEN
		\$.00	
		DON'T KNOW d REFUSED r	
(C22=01 C26hop) and (C24=01 or 02) or (C25=01)		
0_0op	PROBE: How much {do you or you	ur/does NAME or (his/her)} family have to pay? e payment, per week, per month, or per year?	
	INTERVIEWER: ENTER HOW OF	TEN PAID	
		ONE TIME PAYMENT 01 PER WEEK 02 PER MONTH 03 PER YEAR 04 DON'T KNOW d REFUSED r	(1-480) (1-1,903) (1-2,083) (1-8,250) (1-25,000) (1-99,000)
(AII) C27.		sonal assistance services related to {your/his/her} or age interpreter, a reader or interpreter for the blind,	The state of the s
		YES	(C32)

(C22=01 and C24=11)

(C27=0)	01)		
C28.	What kind of personal assistance services {do you/does NAME} use? PROBE: Anything else?		
	INTERVIEWER: CODE ALL THAT APPLY.		
	JOB COACH	01	(C29)
	SIGN LANGUAGE INTERPRETER		(C29)
	READER/INTERPRETER FOR THE BLIND		(C29)
	PERSONAL CARE ATTENDANT/PERSONAL ASSISTANTOTHER		(C29)
	DON'T KNOW		(C29)
	REFUSED		(C29)
(C27=0	01 and C28=05)		
C28_O	ther. What is the other kind of personal assistance services {you/NAME} use?		
	<open></open>		
	DON'T KNOW d		
	REFUSEDr		
(C27=0	01)		
C29.	Who paid for the personal assistance services (you use/NAME uses)?		
020.	PROBE: For example, {you or your family/NAME or (his/her) family}, insurance or Medicaid, or	or son	neone else
	INTERIVEWER: READ LIST IF NEEDED. INTERVIEWER: CODE ALL THAT APPLY.		
	{NAME}	01	(C31)
	FAMILY	02	(C31)
	HEALTH INSURANCE	03	(C30)
	MEDICARE	04	(C30)
	MEDICAID	05	(C30)
	EMPLOYER	06	(C30)
	STATE VOCATIONAL REHABILITATION AGENCY	07	(C30)
	NON-PROFIT ORGANIZATION SERVING PEOPLE WITH		
	DISABILITIES	08	(C30)
	WORKER'S COMPENSATION		(C30)
	DISABILITY INSURANCE	10	(C30)
	OTHER	11	-
	DON'T KNOW	d	(C30)
	REFUSED	r	(C30)
-	01 and C29=11) ther. Who else paid for the personal assistant services {you use/NAME uses}?		
	<open></open>		
	DON'T KNOW d		
	REFUSEDr		

(C27=01 and C29=03, 04, 05, 06, 07, 08, 09, 10, 11, d, or r) {Do you or your/Does NAME or (his/her)} family have to pay for any part of the cost of the personal assistance services C30. {you use/(he/she) uses}? YES...... 01 NO 00 (C32) DON'T KNOW...... d (C32) REFUSED...... r (C32) (C27=01) and (C29=01 or 02) or (C30=01) C31amt. How much {do you or your/does NAME or (his/her)} family have to pay? INTERVIEWER: ROUND TO NEAREST DOLLAR HERE AND ENTER HOW OFTEN PAID ON NEXT SCREEN \$|___|,|__|.00 DON'T KNOW...... d REFUSED.....r (C27=01) and (C29=01 or 02) or (C30=01) C31hop. PROBE: How much {do you or your/does NAME or (his/her)} family have to pay? IF NECESSARY: Is that a one-time payment, per week, per month, or per year? INTERVIEWER: ENTER HOW OFTEN (1-1,903)PER MONTH 03 (1-2,083) (1-8,250) DON'T KNOW...... d REFUSED.....r (All) CHECK: IS {NAME} SELF EMPLOYED (C6=01)? C32.

(C32=00)

C33. PROGRAMMER: USE "MAIN" IF C1>01, OTHERWISE USE "CURRENT."

Please tell me whether or not {your/NAME's} {main/current} employer has made any of these changes because of {your/his/her} physical or mental condition.

Has {your/NAME's} employer because of {your/his/her} physical or mental condition?

PROGRAMMER: USE PROBE IF MORE THAN ONE JOB (C1>01) AND FIRST JOB.

PROBE: {Your/NAME's} main job is the job we have been talking about. The one at which {you work/(he/she) works} the most hours.

1100				DON'T	
		<u>YES</u>	<u>NO</u>	KNOW	REFUSED
a.	Provided {you/NAME} with any <u>special equipment</u> or assistive technology? (PROBE: For example special tools or equipment, software, or devices to accommodate {your/NAME's} condition in the workplace.)?	01	00	d	r
b.	Made any changes in { <u>your/NAME's</u> } <u>work schedule</u> ? (PROBE: For example, working fewer hours, changing the time {you arrive or leave/(he/she) arrives or leaves}, or taking more breaks to accommodate {your/NAME's} condition in the workplace.)?	01	00	d	r
C.	Made any changes to the tasks {you were/NAME was} assigned or how they are performed? (PROBE: For example, a light duty job or less demanding job tasks to accommodate {your/NAME's} condition in the workplace.)?	01	00	d	r
d.	Made any changes to the physical <u>work environment</u> to make things easier for {you/NAME}? (PROBE: For example, modifying {your/his/her} work area, improving accessibility in the building, or providing assigned parking to accommodate {your/NAME's} condition in the workplace.)?	01	00	d	r
e.	Arranged for <u>co-workers or others to assist</u> {you/NAME}? (PROBE: For example, providing a personal care attendant, interpreter, or job coach while at work.)?	01	00	d	r
f.	Made any other changes that I didn't mention to accommodate {your/NAME's}condition in the workplace?	01	00	d	r
PR	OGRAMMER: IF C33f=01, GO TO C33f_Other, ELSE GO TO C34.				

(C32=00 and	C33f=01)
-------------	----------

C33f_Other. What other changes?

<open></open>		
	DON'T KNOW	t
	REFUSED	r

(All)

C34. Are there any changes in {your/NAME's} {main/current} job or workplace related to {your/his/her} physical or mental condition that {you need/(he/she) needs}, but that have <u>not</u> been made?

PROGRAMMER: USE "MAIN" IF C1>01, OTHERWISE USE "CURRENT."

PROGRAMMER: USE PROBE IF MORE THAN ONE JOB (C1>01) AND FIRST JOB.

PROBE: {Your/NAME's} main job is the job that we have been talking about. The one at which {you work/(he/she) works} the most hours.

YES	01	
NO	00	(C38)
DON'T KNOW	d	(C38)
REFUSED	r	(C38)

(C34=01)

C35. What are those changes? PROBE: Anything else?

INTERVIEWER: ENTER VERBATIM RESPONSE

<OPEN> ______

DON'T KNOW	C
REFUSED	1

(All)

C36. CHECK: IS {NAME} SELF EMPLOYED (C6=01)?

YES	.01	(C38)
NO	Ω	

(C34=01 and C36=00)

C37. Did {you/NAME} or anyone else ask {your/his/her} employer for (any of) these changes?

YES	01
NO	00
DON'T KNOW	d
REFLISED	r

(All)

C38. CHECK: IS {NAME} A PROXY RESPONDENT (RTYPE=2)?

YES01	(C40)
NO00	

(C38=00)

C39. Again, thinking about your {main/current} job, how much do you agree with each of the following statements? Would you say you strongly agree, agree, disagree, or strongly disagree?

PROGRAMMER: USE "MAIN" IF C1>01, OTHERWISE USE "CURRENT."

PROGRAMMER: USE PROBE IF MORE THAN ONE JOB (C1>01) AND FIRST JOB.

PROBE: Your main job is the job that we have been talking about. The one at which you work the most hours.

a. b.	The pay is good	STRONGLY AGREE 01 01	AGREE 02 02	DISAGREE 03 03	STRONGLY DISAGREE 04 04	<u>NA</u> 05 05	DON'T <u>KNOW</u> d d	REFUSED r
C.	IF {NAME} IS NOT SELF-EMPLOYED (C6=00, d, or r): The job security is good. IF {NAME} IS SELF-EMPLOYED (C6=01): The work is steady	01	02	03	04	05	d	r
d.	IF {NAME} IS NOT SELF-EMPLOYED (C6=00, d, or r): You have a chance for promotion	01	02	03	04	05	d	r
е.	You have a chance to develop your abilities.	01	02	03	04	05	d	r
f. g.	You have recognition or respect from others. You can work on your own in your job if	01	02	03	04	05	d	r
y. h.	you want to. You can work with others in a group or	01	02	03	04	05	d	r
	team if you want to.	01	02	03	04	05	d	r
i. j.	Your work is interesting or enjoyable Your work gives you a feeling of	01	02	03	04	05	d	r
k.	accomplishment or contribution	01	02	03	04	05	d	r
	(C6=00, d, or r): Your supervisor is supportive	01	02	03	04	05	d	r
l.	Your co-workers are friendly and supportive.	01	02	03	04	05	d	r

(All)
C40. CHECK: WAS {NAME} WORKING IN 2004 (B30 = 01)?

SECTION D: JOBS/OTHER JOBS DURING 2004

•				-
1	Λ	1	ı	١
١.	М	ı	ı	ı

D1. Now, I will ask you about jobs {you/NAME} had during 2004. When answering these questions, please include both part-time and full-time jobs, but only include jobs {you/NAME} held for pay or profit for one month or longer.

PROGRAMMER: IF C1=01 AND C4 YEAR ≤ 2004, ASK:

Other than (your/NAME's) current job that you already told me about, in 2004 did {you/NAME} work for pay at any other jobs for longer than a month?

PROGRAMMER: IF C1>01 AND C4 YEAR < 2004 FOR ONE OR MORE CURRENT JOBS IN SECTION C, ASK:

Other than (your/NAME's) current jobs that you already told me about, in 2004 did {you/NAME} work for pay at any other jobs for longer than a month?

ELSE:

In 2004 did {you/NAME} work for pay at any jobs for longer than a month?

YES	01	(D3)
NO	00	
DON'T KNOW	d	
REFUSED	r	

(D1=00, d, or r)

D2. SOFT EDIT: IF {NAME} WORKED IN 2004 (B30=01) AND {NAME} DID NOT WORK IN 2004 (D1=0,d,r) INTERVIEWER READ: "Earlier you said that {you/NAME} worked for pay in 2004. Let me repeat the question I just read and verify your response."

PROGRAMMER: IF C1=01 AND C4 YEAR < 2004, ASK:

Other than (your/NAME's) current job that you already told me about, in 2004 did (you/NAME) work for pay at any other jobs for longer than a month?

PROGRAMMER: IF C1>01 AND C4 YEAR < 2004 FOR ONE OR MORE CURRENT JOBS IN SECTION C, ASK:

Other than (your/NAME's) current jobs that you already told me about, in 2004 did {you/NAME} work for pay at any other jobs for longer than a month?

ELSE:

In 2004 did {you/NAME} work for pay at any jobs for longer than a month?

YES	01	
NO	00	(E1)
DON'T KNOW	d	(E1)
REFUSED	r	(E1)

(D1=01)

D3. PROGRAMMER: IF C1=01 AND C4 YEAR ≤ 2004, ASK:

Other than (your/NAME's) current job that you already told me about, how many other jobs did {you/NAME} hold for at least one month in 2004?

PROGRAMMER: IF C1>01 AND C4 YEAR ≤ 2004 FOR ONE OR MORE CURRENT JOBS IN SECTION C, ASK:

Other than (your/NAME's) current jobs that you already told me about, how many other jobs did {you/NAME} hold for at least one month in 2004?

ELSE:

How many jobs did {you/NAME} hold for at least one month in 2004?

_ NUMBER OF JOBS (1-5)	
DON'T KNOW	d
REFLISED	r

2/28/2012 4:26 PM D-1 ROUND 2 VERSION

(D1=01)D4. PROGRAMMER: IF MORE THAN ONE JOB (D3>01) AND FIRST JOB: Let us start with {your/NAME's} main job in 2004 - that is, the job at which {you worked/(he/she) worked} the most hours. What kind of work {did you/did NAME} do, that is, what was {your/NAME's} occupation? PROGRAMMER: IF MORE THAN ONE JOB (D3>01) AND SECOND, THIRD, FOURTH, ETC. JOB: Now I would like to ask about {your/NAME'S} {second/third/fourth} job in 2004. What kind of work {did you/did NAME} do, that is, what was {your/NAME's} occupation? ELSE (D3=01): What kind of work {did you/did NAME} do, that is, what was {your/NAME's} occupation? INTERVIEWER: ENTER VERBATIM RESPONSE PROBE 1: For example, a child-care provider at a private preschool; geometry teacher in a public high school; sales clerk in a women's shoe store. PROBE 2: What are {your/NAME'S} main activities or duties? What else do you do? What else? Do you supervise anyone? <OPEN> _____ DON'T KNOW...... d REFUSED.....r (D1=01)D5. What kind of business was this? INTERVIEWER: ENTER VERBATIM RESPONSE PROBE 1: For what type of organization or industry did you work? For example: accounting firm, daycare center, educational facility, food services. PROBE 2: What do they make, sell, or do where {you/NAME} worked? PROBE 3: Is this mainly manufacturing (making a product), wholesale trade (selling to other businesses) or retail trade (selling to customers) or something else? <OPEN> _____ DON'T KNOW...... d REFUSED.....r (D1=01)D6mth. In what month and year did {you/NAME} start working there? PROBE: Your best estimate is fine. INTERVIEWER: ENTER MONTH HERE AND YEAR ON NEXT SCREEN |__|_ (1-12) MO DON'T KNOW...... d REFUSED.....r (D1=01)D6yr. PROBE 1: In what month and year did {you/NAME} start working there? PROBE 2: Your best estimate is fine. INTERVIEWER: ENTER YEAR _|__|__| (1981-2004) YEAR (1951-2004) DON'T KNOW d REFUSED.....r

PROGRAMMER: D4 THROUGH D23 ASKED FOR ALL JOBS WHEN D3>01

(D1=01) D7.	SOFT EDIT: YEAR {NAME} STARTE YEAR OF BIRTH (A04d) PLUS 14 YE incorrect answer. I show that {you we	D WORKING AT THIS JOB (D6 YEAR) SHO EARS. IF RESPONDENT FAILS EDIT, INTE Pre/NAME was} born in (A04d) and (you/NAM rking at this job when (you were/he was/she TH) years old. Is that correct?	RVIEWER READ: I must have recorded ar IE} started working at this job in (D6 YEAR)
	N	ES O UPPRESS	02 (CHANGE D6 YEAR)
(D1=01) D8mth.	In what month and year did {you/NAM PROBE: Your best estimate is fine.	E} stop working there?	
	INTERVIEWER: ENTER MONTH HER	RE AND YEAR ON NEXT SCEEN	
		_ (1-12) MO	
		ON'T KNOW	
(D1=01) D8yr.	PROBE 1: In what month and year did PROBE 2: Your best estimate is fine.	{you/NAME} stop working there?	
	INTERVIEWER: ENTER YEAR	_ _ _ (1981-2005) YEAR (1951-2005)	
		ON'T KNOW	
(D1=01) D9.	SOFT EDIT: DATE {NAME} STOPPE {NAME} STARTED WORKING AT TREAD: I must have recorded an incovered year) and that you stopped working a	D WORKING AT THIS JOB (D8 MONTH, D6 THIS JOB (D6 MONTH, D6 YEAR). IF RE prrect answer. I show that {you/NAME} star at this job in (D8 MONTH, D8 YEAR). Is that	SPONDENT FAILS EDIT, INTERVIEWEF ted working at this job in (D6 MONTH, D6 correct?
	NO, CHANGE ANS NO, CHANGE ANS NO, CHANGE ANS	WER TO D6WER TO D8WERS FOR BOTH D6 AND D8	02 (CHANGE D6) 03 (CHANGE D8) 04 (CHANGE D6 AND D8)
(D1=01) D10.	SOFT EDIT: IF DATE {NAME} STOPI WORKING AT THIS JOB (D6 MONT INTERVIEWER READ: You said that	PED WORKING AT THIS JOB (D8 MONTH, H, D6 YEAR) ARE THE SAME (D8 MONTH {you/NAME} started and stopped working at is job for less than one month. Is this correct	H, D8 YEAR – D6 MONTH, D6 YEAR = 0) this job in (D8 MONTH, D8 YEAR). I'd like
	NO, WORKED AT J	JOB FOR LESS THAN ONE MONTH OB FOR MORE THAN ONE MONTH	02

(D1=01)			
D11.		OPPED WORKING AT THIS JOB (D8 YEAR working at this job in (D8 YEAR). I'd like to v	
	oon oot.		
	YES, JOB ENDE	D BEFORE 2004	01
		T END BEFORE 2004	
	SUPPRESS		03
(D1=01)			
D12.		THIS JOB FOR LESS THAN ONE MONTH (D1	0=01)?
		YES	01 (D23)
		NO	` '
(5.			
(D12=00 D13.)) CHECK: DID THIS JOB END BEF(DRE 2004 (D11=01)?	
		YES	01 (D23)
		NO	
•	D12=00 and D13=00)		
D14.	{Were you/Was NAME} self-employ		
	PROBE. Sell-employed means that	you work for yourself or own your own busines	55.
		YES	01
		NO	00
		DON'T KNOW	
		REFUSED	r
(D1=01, D15.	D12=00 and D13=00) Was this job part of a sheltered wo supported employment program?	kshop, transitional employment program, the E	Business Enterprise Program for the blind, or
	not be available in a regular job) for to work at reduced levels while the	a program that provides employment with sub people with disabilities. A transitional employne ey ease back into the workplace. The <u>Busin</u> ty to own their own businesses. <u>Supported er</u>	ment program allows workers with disabilities less Enterprise Program for the blind offers
		dividuals with disabilities get and keep jobs.	provident programo
		YES	01
		NO	00
		DON'T KNOW	
		REFUSED	r
(D1=01	D12=00 and D13=00)		
D16.	How many hours per week did {you PROBE: Include overtime if {you/he		
		HOURS PER WEEK	
		(1-60) (1-168)	
		•	
		DON'T KNOW	
		REFUSED	r

(D1=01,	D12=00 and D13=00)		
D17.		u/NAME} usually work at this job, including paid	
		for vacations and holidays if {you were/NAME w	as} paid for that time.
	PROBE 2: There are 52 weeks in a	a year.	
		_ WEEKS PER YEAR	
		(1-52)	
		,	
		DON'T KNOW	d
		REFUSED	r
(5.4.64	D. 0.0 D. 1.0 0.0		
-	D12=00 and D13=00)	ONE IOD (D2-04) AND EIDST IOD:	
D18.		ONE JOB (D3>01) AND FIRST JOB: t is important to obtain some information on	how much (you were/NAME was) paid on
		On {your/NAME's} main job {were you/was (he/s	· · · · · · · · · · · · · · · · · · ·
		ONE JOB (D3>01) AND SECOND, THIRD, FOL	
		t is important to obtain some information on	
) job in 2004. On {your/NAME's} {second/third	/fourth} job {were you/was (he/she} paid by
	the hour?		
	ELSE (D3=01):		
		t is important to obtain some information on our/NAME's} job {were you/was (he/she} paid by	The state of the s
	. , , , , , , , , , , , , , , , , , , ,	ONE JOB (D3>01) AND FIRST JOB:	the nour?
	TROOM WINDERS IT WORLD THAT	ONE 000 (00>01) ///OF 1///OF 000.	
	PROBE: {Your/NAME's} main job i	n 2004 was the job at which {you worked/(he/sh	e) worked} the most hours.
		VEO	
		YES	
		NO DON'T KNOW	,
		REFUSED	,
			(======,
(D1=01,	D12=00 and D13=00 and D18=01)		
D19.		nourly pay, including tips and commissions?	
	PROBE: IF LESS THAN \$5.00 AN	HOUR: Does this include tips and commissions	?
		¢I I I I I I DED HOUD	
		\$. PER HOUR (1 - 25.00) (1 - 300.00)	
		(1 23.00) (1 300.00)	
		DON'T KNOWd	
		REFUSEDr	
		GO TO D23	
		GO 10 D23	
(D1-01	D12=00 and D13=00 and D18=00,	d r)	
•		how much {were you/was NAME} paid on this jo	ob. including tips and commissions?
		aid daily, weekly, bi-weekly, twice a month, mon	- ·
	INTERVIEWER: ROUND TO NEAR	REST DOLLAR	
		()	
		\$ _, , . 00	
		DON'T KNOW	d
		REFUSED	

(D1=01, D12=00 and D13=00 and D18=00,d,r)

D20hop. Before taxes and other deductions how much {were you/was NAME} paid on this job, including tips and commissions? PROBE: {Were you/Was NAME} paid daily, weekly, bi-weekly, twice a month, monthly, or annually?

INTERVIEWER: ENTER HOW OFTEN PAID

DAILY	01	(1-384)	(1-1,922)
WEEKLY	02	(1-1,923)	(1-9,615)
BI-WEEKLY	03	(1-4,166)	(1-20,833)
TWICE A MONTH	04	(1-4,166)	(1-20,833)
MONTHLY	05	(1-8,333)	(1-41,666)
ANNUALLY	06	(1-100,000)	(1-500,000)
DON'T KNOW	d		
REFLISED	r		

(D1=01, D12=00 and D13=00 and D18=00,d,r)

D21amt. For this job, about how much was left as take-home pay after taxes and other deductions?

PROBE: {Were you/Was NAME} paid daily, weekly, bi-weekly, twice a month, monthly, or annually?

INTERVIEWER: ROUND TO NEAREST DOLLAR

\$, . 00	
DON'T KNOW	С
REFUSED	

(D1=01, D12=00 and D13=00 and D18=00,d,r)

D21hop. For this job, about how much was left as take-home pay after taxes and other deductions?

PROBE: {Were you/Was NAME} paid daily, weekly, bi-weekly, twice a month, monthly, or annually?

INTERVIEWER: ENTER HOW OFTEN PAID.

DAILY	01	(1-346)	(1-1,730)
WEEKLY	02	(1-1,730)	(1-8,653)
BI-WEEKLY	03	(1-3,750)	(1-18,750)
TWICE A MONTH	04	(1-3,750)	(1-18,750)
MONTHLY	05	(1-7,500)	(1-37,500)
ANNUALLY	06	(1-90,000)	(1-450,000)
DON'T KNOW	d		
REFUSED	r		

(D1=01, D12=00 and D13=00 and D18=00,d,r) and (D20hop= 01, 02, 03, 04, 05, or 06) and (D21hop= 01, 02, 03, 04, 05, or 06)

D22. SOFT EDIT: AMOUNT OF TAKE-HOME PAY (D21) MUST BE LESS THAN OR EQUAL TO AMOUNT PAID BEFORE TAXES AND OTHER DEDUCTIONS (D20). IF RESPONDENT FAILS EDIT, INTERVIEWER READ: I must have recorded an incorrect answer. You said that {you were/NAME was} paid (D20) per (D20 AMOUNT) before taxes and other deductions and that (D21) per (D21 AMOUNT) was left as take-home pay after taxes and other deductions. Should I change the amount {you were/NAME was} paid before taxes and other deductions or the amount {you took/NAME took} home after taxes and other deductions?

CHANGE AMOUNT PAID BEFORE TAXES AND OTHER		
DEDUCTIONS	01	(CHANGE D20)
CHANGE AMOUNT OF TAKE-HOME PAY	02	(CHANGE D21)
SUPPRESS	03	

(D1=01)

D23. Why did {you/NAME} stop working at this job?

INTERVIEWER: ASK 'Any other reason?' UNTIL RESPONDENT INDICATES NO OTHER REASONS. IF RESPONDENT SAYS QUIT, ASK FOR THE REASON.

INTERVIEWER: CODE ALL THAT APPLY.

LAYOFF, FIRED, RETIR	ED:		
	 T CLOSED	. 01	(D24)
			· · · · ·
	AGE		
	PORARY AND ENDED		•
PROBLEMS WITH JOB:		_	,
· · · · · · · · · · · · · · · · · · ·	SUPERVISOR OR CO-WORKERS	. 05	(D24)
	JOB DUTIES		
	JOB EARNINGS		
	BENEFITS		•
	OPPORTUNITIES FOR ADVANCEMENT		
	LOCATION		
	ACCOMMODATIONS THAT WERE NEEDED		
OTHER PROBLEMS:	TOOOMINIOD/THONG THAT WERE NEEDED		(524)
· · · · · · · · · · · · · · · · · · ·	TION PROBLEMS	12	(D24)
	O TO SCHOOL		
	ESPONSIBILITIES (PREGNANT)		
	Y OR PERSONAL REASONS		· · · · ·
DISABILITY:	TOR FERSONAL REASONS	. 15	(D24)
' <u>-</u>	OT WORSE	16	(D24)
	BLED		,
	DLEU		(D24)
_		_	(D24)
REFUSED		. 1	(D24)
(D1=01 and D23=18)			
D23_Other. What is the other reason?			
<open></open>			
	DON'T KNOW		
	DON'T KNOW		
	REFUSED	. r	
(54.04)			
(D1=01)	ADE TUAN ONE IOD DUDING COOL (DO	_	
D24. CHECK: DID {NAME} HOLD MC	RE THAN ONE JOB DURING 2004 (D3 > 01)?		
	YES		(REPEAT D4 - D23 FOR EACH JOB)
	NO	. 00	
-			
(D1=01)			
	ours or earn less money than they could in orde		
• •	time. In 2004, did you work fewer hours or ear	n <u>les</u>	s money than you could have for any
reason?			
	YES	-	
	NO	. 00	(D26)
	DON'T KNOW		(D26)
	REFUSED	. r	(D26)

(D1=01 and D25=01)

D25a. Did you work fewer hours or earn less money than you could have because you...

PROBE: I need to ask everyone in our study the same questions, even if they don't seem to apply to you.

				<u>DON'T</u>	
		<u>YES</u>	<u>NO</u>	KNOW	REFUSED
a.	{Were/Was} taking care of somebody else?	01	00	d	r
b.	{Were/Was} enrolled in school or a training program?	01	00	d	r
C.	Wanted to keep Medicare or Medicaid coverage?	01	00	d	r
d.	Wanted to keep cash benefits such as disability or workers compensation?	01	00	d	r
e.	Just didn't want to work more?	01	00	d	r
f.	Are there any reasons I didn't mention why {you/NAME} might have worked or				
	earned less than {you/he/she} could have during 2004?	01	00	d	r

	t.	earned less than {you/he/she} could have during 2004?		01	00	d	r
PROGR	AMI	MER: IF D25f=01 GO TO D25f_Other, ELSE SKIP TO D26					
(D1=01	and	D25=01 and D25f=01)					
D25f_Ot	ther.	What other reason?					
	<o< td=""><td>PEN></td><td></td><td></td><td></td><td></td><td></td></o<>	PEN>					
		DON'T KNOWREFUSED					
(D1=01)							
D26.	No	w, I am going to read you a list of things that sometimes help people to we se do not apply to {you/NAME}, please just say so.	ork mor	e hours o	or earn m	ore money.	If any of
	lo (2004 do you think (you/NAME) could have worked as corned mass if (you/h	o/obol b	ad			
	II 1 <u> </u>	2004, do you think {you/NAME} could have worked or earned more if {you/h	e/sne _} n	au		DON'T	
			<u>YES</u>	NO	NA	KNOW	REF
	a. b.	Help caring for {your/his/her} children or others in the household? Help with {your/his/her} own personal care such as bathing, dressing,	01	00	02	d	r
		preparing meals, and doing housework?	01	00	02	d	r
	C.	Reliable transportation to and from work?	01	00	02	d	r
	d.	Better job skills?	01	00	02	d	r
	e.	A job with a flexible work schedule?	01	00	02	d	r
	f.	Help with finding and getting a better job?	01	00	02	d	r
	g.	Any special equipment or medical devices?	01	00	02	d	r
	h.	Is there anything else that I didn't mention that would have helped {you/NAME} to work or earn more during 2004?	01	00	02	d	r
		PROGRAMMER: IF D26h=01, GO TO D26h_Other, ELSE GO TO					

(D1=01 and D26g=01)

D26g_Other. What other special equipment or medical devices?

<open></open>		(D26h)
	DON'T KNOW	d (D26h)
	REFLISED	r (D26h)

•	and D26h=01) other What else?			
	<open></open>			
		DON'T KNOWREFUSED		
(D1=01) D27.	One last question about when {yo	u were/NAME was} working in 2004. Because mount of {your/his/her} disability benefits?	e of {your/his/her} work, did Socia	I Security
	PROBE: Did {your/NAME's} benefit	amount decrease or did {you/he/she} lose bene	efits altogether?	
		YES NO DON'T KNOW REFUSED	00 (D29) d (D29)	
(D1=01 D28.	and D27=01) Because of these changes did the \$ 2004?	Social Security Administration pay {you/NAME}	the wrong benefit amount at any tir	me during
		YES NO DON'T KNOW REFUSED	00 d	
(D1=01) D29.		ever asked to re-pay benefits because the	e Social Security Administration	overpaid
		YES NO	00 (E1) d (E1)	
(D1=01 D30.	and D29=01) {Were you/Was NAME} asked to receiving benefits?	re-pay the Social Security Administration beca	use {you were/(he/she) was} work	king while

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

SECTION E: AWARENESS OF SSA WORK INCENTIVE PROGRAMS AND TICKET TO WORK

AWARENESS OF SSA WORK INCENTIVES

,			٠.
1	Λ	п	I١
١.	$\overline{}$	ч	1,

E1. PROGRAMMER: ONLY USE "HEARD OF THESE INCENTIVES OR SUPPORTS" IF {NAME} IS <u>NOT</u> IN LONGITUDINAL SAMPLE (S2=01,03) OR IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02) <u>AND</u> SKIPPED QUESTIONS DURING ROUND 1 (FIXE2=01 OR FIXE11=01 OR FIXE14=01)

I'm going to read you a list of incentives and supports that Social Security offers to people getting disability benefits, to encourage them to work. Please tell me if {you have/NAME has} ever {heard of these incentives or supports or} used any of them.

PRESS 1 TO CONTINUE01

(All)

E2. CHECK: IS {NAME} AN SSI BENEFICIARY (BSTATUS = 01,03)?

PROGRAMMER: IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02), WAS A SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E3 DURING ROUND 1 (FIXE2=00) SKIP TO QUESTION E4, OTHERWISE GO TO QUESTION E3

(S2=02 and FIXE2=01) or (S2=01,03 and E2=01)

E3. {Have you/Has NAME} ever heard of a Plan for Achieving Self-Support or a PASS Plan? This is a Social Security incentive that lets {you/beneficiaries} set aside money to be used to help {you/them} reach a work goal. The money set aside does not affect {your/their} benefits.

PROBE 1: {Have you/Has NAME} ever heard of this plan?

PROBE 2: If you're not sure, please just say so.

INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW

YES	01	
NO	00	(PROGRAMMER NOTE BEFORE E5)
DON'T KNOW	d	(PROGRAMMER NOTE BEFORE E5)
REFUSED	r	(PROGRAMMER NOTE BEFORE E5)

(S2=02 and FIXE2=01 and E3=01) or (S2=02 and E2=01) or (S2=01,03 and E2=01 and E3=01)

E4. {Have you/Has NAME} ever used a Plan for Achieving Self-Support or a PASS Plan?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02), WAS A SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E3 DURING ROUND 1 (FIXE2=00):

This is a Social Security incentive that lets {you/beneficiaries} set aside money to be used to help {you/them} reach a work goal. The money set aside does not affect {your/their} benefits.

PROBE: If you're not sure or never heard of a Plan for Achieving Self-Support or a PASS Plan, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PROGRAMMER: IF {NAME} <u>IS IN LONGITUDINAL SAMPLE (S2=02)</u>, <u>WAS A SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E5 DURING ROUND 1 (FIXE2=00)</u> SKIP TO QUESTION E6, OTHERWISE GO TO QUESTION E5

2/28/2012 E-I ROUND 2 VERSION

(S2=02 and FIXE2=01) or (S2=01,03 and E2=01)

E5. {Have you/Has NAME} ever heard of the <u>earned income exclusion</u> or the <u>1 for 2 earnings</u> exclusion? This is a Social Security incentive where one-half of {your/a beneficiary's} earnings over \$85 are not counted when Social Security figures {your/the} benefit.

PROBE 1: {Have you/Has NAME} ever heard of this exclusion?

PROBE 2: If you're not sure, please just say so.

INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW

YES	01	
NO	00	(PROGRAMMER NOTE BEFORE E7)
DON'T KNOW	d	(PROGRAMMER NOTE BEFORE E7)
REFUSED	r	(PROGRAMMER NOTE BEFORE E7)

(S2=02 and FIXE2=01 and E5=01) or (S2=02 and E2=01) or (S2=01,03 and E2=01 and E5=01)

E6. {Have you/Has NAME} ever used the earned income exclusion or the 1 for 2 earnings exclusion?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02), WAS A SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E5 DURING ROUND 1 (FIXE2=00):

This is a Social Security incentive where one-half of {your/a beneficiary's} earnings over \$85 are not counted when Social Security figures {your/the} benefit.

PROBE: If you're not sure or never heard of an earned income exclusion or the 1 for 2 earnings_exclusion, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PROGRAMMER: IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02) AND {NAME} WAS A SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E7 DURING ROUND 1 (FIXE2=00) SKIP TO QUESTION E8, OTHERWISE GO TO QUESTION E7

(S2=02 and FIXE2=01) or (S2=01,03 and E2=01)

E7. {Have you/Has NAME} ever heard of <u>Property Essential to Self-Support</u>, or <u>PESS</u>? This is a Social Security incentive where the dollar value of tools, equipment, or other property needed for {your/a beneficiary's} work is excluded when Social Security figures {your/the} benefit.

INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW

YES	01	
NO	00	(PROGRAMMER NOTE BEFORE E9)
DON'T KNOW	d	(PROGRAMMER NOTE BEFORE E9)
REFUSED	r	(PROGRAMMER NOTE BEFORE E9)

(S2=02 and FIXE2=01 and E7=01) or (S2=02 and E2=01) or (S2=01,03 and E2=01 and E7=01)

E8. {Have you/Has NAME} ever used Property Essential to Self-Support or PESS?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02), WAS A SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E7 DURING ROUND 1 (FIXE2=00):

This is a Social Security incentive where the dollar value of tools, equipment, or other property needed for {your/a beneficiary's} work is excluded when Social Security figures {your/the} benefit.

PROBE: If you're not sure or never heard of a Property Essential to Self-Support or PESS, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PROGRAMMER: IF {NAME} <u>IS IN LONGITUDINAL SAMPLE (S2=02) AND {NAME} WAS A SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E9 DURING ROUND 1 (</u>FIXE2=00) SKIP TO QUESTION E10, OTHERWISE GO TO QUESTION E9

(S2=02 and FIXE2=01) or (S2=01,03 and E2=01)E9. {Have you/Has NAME} ever heard of <u>Continued Medicaid Eligibility</u> or <u>1619(b) coverage?</u> This is a Social Security incentive that lets {you/beneficiaries} keep {your/their} Medicaid insurance after {you/they} go to work, even if {your/their} benefits have stopped.

INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW

YES	01	
NO	00	(E11)
DON'T KNOW	d	(E11)
REFUSED	r	(E11)

(S2=02 and FIXE2=01 and E9=01) or (S2=02 and E2=01) or (S2=01,03 and E2=01 and E9=01)

E10. {Have you/Has NAME} ever used Continued Medicaid Eligibility or 1619(b) coverage?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02), WAS A SSI BENEFICIARY AND {NAME} WAS ASKED QUESTION E9 DURING ROUND 1 (FIXE2=00):

This is a Social Security incentive that lets {you/beneficiaries} keep {your/their} Medicaid insurance after {you/they} go to work, even if {your/their} benefits have stopped.

PROBE: If you're not sure or never heard of a Continued Medicaid Eligibility or 1619(b) coverage, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFLISED	r

(E2=01)

E11. CHECK: IS {NAME} 25 OR YOUNGER {SAMPLEAGE \leq 25} AND DID {NAME} RECEIVE SSI BENEFITS BEFORE AGE 22 {SSIAGE \leq 22}?

YES	01	
NO	00	(E14)

PROGRAMMER: IF {NAME} <u>IS IN LONGITUDINAL SAMPLE (S2=02)</u>, <u>WAS A SSI BENEFICIARY (FIXE2=00)</u>, <u>WAS 25 OR YOUNGER</u>, <u>RECEIVED SSIBENEFITS BEFORE AGE 22</u>, <u>AND WAS ASKED QUESTION E12 DURING ROUND 1</u> <u>(FIXE11=00)</u> SKIP TO QUESTION E13, OTHERWISE GO TO QUESTION E12

(S2=02 and FIXE2=01 and FIXE11=01) or (S2=01,03 and E2=01 and E11=01) {Have you/Has NAME} ever heard of the student earned-income exclusion? This is a Social Security incentive where if {you are/a beneficiary is} in school, up to \$1,340 of earnings per month are not counted when Social Security figures {your/the} benefit. INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW YES...... 01 DON'T KNOW d (E14) REFUSED..... r (E14) (S2=02 and FIXE2=01 and FIXE11=01 and E12=01) or (S2=02 and E2=01 and E11=01) or (S2=01,03 and E2=01 and E11=01 and E12=01) E13. {Have you/Has NAME} ever used the student earned-income exclusion? PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02), WAS A SSI BENEFICIARY, WAS ASKED QUESTION E3 DURING ROUND 1 (FIXE2=00), AND WAS ASKED QUESTION E12 DURING ROUND 1 (FIXE11=00): This is a Social Security incentive where if {you are/a beneficiary is} in school, up to \$1,340 of earnings per month are not counted when Social Security figures (your/the) benefit. PROBE: If you're not sure or never heard of the student earned-income exclusion, please just say so. INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW YES...... 01 NO 00 DON'T KNOW...... d REFUSED.....r (All) E14. CHECK: IS {NAME} A SSDI BENEFICIARY (BSTATUS=02,03)? YES...... 01 PROGRAMMER: IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02), WAS A SSDI BENEFICIARY, AND WAS ASKED QUESTION E15 DURING ROUND 1 (FIXE14=00) SKIP TO QUESTION E16, OTHERWISE GO TO QUESTION E15 (S2=02 and FIXE14=01) or (S2=01,03 and E14=01) E15. {Have you/Has NAME} ever heard of a Trial Work Period? This is a Social Security incentive that lets {you/beneficiaries} earn above \$800 per month for nine months without losing (your/their) benefits. INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW YES...... 01

 (S2=02 and FIXE14=01 and E15=01) or (S2=02 and E14=01) or (S2=01,03 and E14=01 and E15=01)

E16. {Have you/Has NAME} ever used a Trial Work Period?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02), WAS A SSDI BENEFICIARY, AND WAS ASKED QUESTION E15 DURING ROUND 1 (FIXE14=00):

This is a Social Security incentive that lets {you/beneficiaries} earn above \$800 per month for nine months without losing {your/their} benefits.

PROBE: If you're not sure or never heard of a Trial Work Period, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PROGRAMMER: IF {NAME} <u>IS IN LONGITUDINAL SAMPLE (S2=02)</u>, <u>WAS A SSDI BENEFICIARY</u>, <u>AND {NAME} WAS ASKED QUESTION E17 DURING ROUND 1 (</u>FIXE14=00) SKIP TO QUESTION E18, OTHERWISE GO TO QUESTION E17

(S2=02 and FIXE14=01) or (S2=01,03 and E14=01)

E17. {Have you/Has NAME} ever heard of an <u>Extended Period of Eligibility for Medicare?</u> This is a Social Security incentive that lets {you/beneficiaries} keep Medicare coverage when {you/they} go to work, even if {your/their} benefits have stopped.

INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW

YES	01	
NO	00	(PROGRAMMER NOTE BEFORE E19)
DON'T KNOW	d	(PROGRAMMER NOTE BEFORE E19)
REFUSED	r	(PROGRAMMER NOTE BEFORE E19)

(S2=02 and FIXE14=01 and E17=01) or (S2=02 and E14=01) or (S2=01.03 and E14=01 and E17=01)

E18. {Have you/Has NAME} ever used an Extended Period of Eligibility for Medicare?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02), WAS A SSDI BENEFICIARY, AND WAS ASKED QUESTION E17 DURING ROUND 1 (FIXE14=00):

This is a Social Security incentive that lets {you/beneficiaries} keep Medicare coverage when {you/they} go to work, even if {your/their} benefits have stopped.

PROBE: If you're not sure or never heard of an Extended Period of Eligibility for Medicare, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PROGRAMMER: IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02) SKIP TO QUESTION E20, OTHERWISE GO TO QUESTION E19

2/28/2012 E-5 ROUND 2 VERSION

(S2=01,03)

E19. {Have you/Has NAME} ever heard of exclusions for Impairment-Related Work Expenses or Blind Work Expenses? This is a Social Security incentive where the value of certain impairment-related items is not counted when figuring {your/a person's} benefits and eligibility.

INTERVIEWER: IF 'NOT SURE', CODE AS DON'T KNOW

YES	01
NO	00 (PROGRAMMER NOTE BEFORE E20a)
DON'T KNOW	d (PROGRAMMER NOTE BEFORE E20a)
REFUSED	r (PROGRAMMER NOTE BEFORE E20a)

(S2=02) or (S2=01,03 and E19=01)

E20. {Have you/Has NAME} ever used exclusions for Impairment-Related Work Expenses or Blind Work Expenses? PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02):

This is a Social Security incentive where the value of certain impairment-related items is not counted when figuring {your/a person's} benefits and eligibility.

PROBE: If you're not sure or never heard of Impairment-Related Work Expenses or Blind Work Expenses, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	C
REFUSED	r

PROGRAMMER: IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02) SKIP TO QUESTION E20b, OTHERWISE GO TO QUESTION E20a

(S2=01,03)

E20a. {Have you/Has NAME} ever heard of <u>Expedited Reinstatement</u>? This is a Social Security incentive that lets beneficiaries restart their benefits without having to complete a new application if their attempts at work are not successful.

INTERVIEWER: IF 'NOT SURE' ANSWER 'DON'T KNOW'.

YES	01
NO	00 (PROGRAMMER NOTE BEFORE E20c)
DON'T KNOW	d (PROGRAMMER NOTE BEFORE E20c)
REFUSED	r (PROGRAMMER NOTE BEFORE E20c)

(S2=02) or (S2=01,03 and E20a=01)

E20b. {Have you/Has NAME} ever used Expedited Reinstatement?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02):

This is a Social Security incentive that lets beneficiaries restart their benefits without having to complete a new application if their attempts at work are not successful.

PROBE: If you're not sure or never heard of Expedited Reinstatement, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PROGRAMMER: IF {NA	AME} IS IN LONGITUDINAL	SAMPLE (S2=02) SKIP TO	QUESTION E20d, OTH	IERWISE GO TO
QUESTION E20c				

(S2=01,03)

E20c. {Have you/Has NAME} ever heard of <u>benefit specialists or BPAOs</u>? These are programs funded by Social Security to provide information to beneficiaries about how their benefits are affected by work.

INTERVIEWER: IF 'NOT SURE', ANSWER 'DON'T KNOW'

PROBE: BPAO stands for Benefits Planning, Assistance and Outreach

YES	01	
NO	00	(E21)
DON'T KNOW	d	(E21)
REFUSED	r	(E21)

(S2=02) or (S2=01,03 and E20c=01)

E20d. {Have you/Has NAME} ever used a benefit specialist or BPAO?

PROGRAMMER: ONLY INSERT THE FOLLOWING STATEMENT, PROBE, AND INTERVIEWER INSTRUCTION IF {NAME} IS IN LONGITUDINAL SAMPLE (S2=02):

These are programs funded by Social Security to provide information to beneficiaries about how their benefits are affected by work.

PROBE 1: BPAO stands for Benefits Planning, Assistance and Outreach

PROBE 2: If you're not sure or never heard of a benefit specialist or BPAO, please just say so.

INTERVIEWER: IF 'NOT SURE' OR 'NEVER HEARD OF' CODE AS DON'T KNOW

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

AWARENESS OF TICKET TO WORK

(All)

E21. {Have you/Has NAME} ever heard of the <u>Ticket to Work</u> program?

PROBE: The Ticket to Work program provides services to help disability beneficiaries achieve steady, long-term employment by providing them greater choices and opportunities to go to work if they want to.

YES	01	(PROGRAMMER NOTE BEFORE E26)
NO	00	
DON'T KNOW	d	
REFUSED	r	

(E21=00,d,r)

E22. {Have you/Has NAME} heard of any new Social Security programs in the last few years that allow disability beneficiaries to get services to help them go to work or earn more?

YES	01	(E25)
NO	00	
DON'T KNOW	d	
REFUSED	r	

(E21=00,d,r and E22=00,d,r)

E23. CHECK: DID {NAME} HAVE A TICKET ASSIGNED AT THE TIME OF SAMPLE SELECTION (TSTATUS=01)?

YES	01	
NO	00	(G1)

(E21=00.d.r and E22=00.d.r and E23=	11

E24. {Are you/Is NAME} aware that, according to Social Security, {you are/(he/she) is} participating in the Ticket to Work program and {your/his/her} Ticket is assigned to {ENSAMPLE} as of {SDATE}?

YES	01	(PROGRAMMER NOTE BEFORE E26)
NO	00	(EN2004=1, go to F; EN2004=0, go to
G)		
DON'T KNOW	d	(EN2004=1, go to F; EN2004=0, go to
G)		
REFUSED	r	(EN2004=1, go to F; EN2004=0, go to
G)		

(E21=00,d,r and E22=01)

E25. Does the program {you've/NAME's} heard of include a certificate or Ticket that {you/NAME} would give to a service provider in exchange for services?

YES	01	
NO	00	(EN2004=1, go to F; EN2004=0, go to
G)		
DON'T KNOW	d	(EN2004=1, go to F; EN2004=0, go to
G)		
REFUSED	r	(EN2004=1, go to F; EN2004=0, go to
G)		

PROGRAMMER: E26 THROUGH E36 SKIPPED FOR LONGITUDINAL SAMPLE WHO COMPLETED ROUND 1 (S2=02)

(S2=01,03) and (E21=01 or E24=01 or E25=01)

E26. PROGRAMMER: IF {NAME} HEARD OF TICKET TO WORK PROGRAM (E21=01) ASK:

In what year did {you/NAME or his/her representative} first hear about the Ticket to Work program? Was it...

PROGRAMMER: OTHERWISE (E21=00,d,r) ASK:

The program is usually called the Ticket to Work program. I'm going to call it the Ticket to Work program in the next few questions. In what year did {you/NAME or his/her representative} first hear about the Ticket to Work program? Was it...

In 2005	01	(E34)
In 2004	02	
Before 2004	03	(E34)
DON'T KNOW	d	(E34)
REFUSED	r	(E34)

(S2=01,03) and (E21=01 or E24=01 or E25=01 and E26=02)

E27. Now I would like to know <u>how</u> {you/NAME or his/her representative} first heard about the Ticket to Work program. Did {you/NAME or his/her representative} receive information in the mail?

YES	01	
NO	00	(E29)
DON'T KNOW	d	(E29)
REFUSED	r	(E29)

INTERVIEWER: CODE ALL T	TAH	APPLY.	
-------------------------	-----	--------	--

		INISTRATION			(E29)	
					(E29)	
		HABILITATION AGENCY, OR {VRNAME}			(E29)	
		PLOYER R			(E29)	
		ENTER			(E29) (E29)	
		K		07	(23)	
	OTHER AGENCY/ORGAN	NIZATION			(F28h	_Other)
		R			(E28i_	
					(E28j_	-
	DON'T KNOW				(E29)	_00.,
					(E29)	
•	•	01 and E26=02 and E27=01 and E28=07) Int {you/NAME} the information?				
_		is goard in Eg the morniation.				
					=	
		DON'T KNOW				
S2-01 03) and	(F21-01 or F24-01 or F25-	-01 and E26=02 and E27=01 and E28=08)				
		on sent {you/NAME} the information?				
<open< td=""><td>l></td><td></td><td></td><td></td><td>-</td><td></td></open<>	l>				-	
		DON'T KNOW	d			
		REFUSED	r			
•	•	01 and E26=02 and E27=01 and E28=09)				
E28i_Other. Wh	at Health Care Provider sen	t {you/NAME} the information?				
<open< td=""><td>l></td><td></td><td></td><td></td><td>-</td><td></td></open<>	l>				-	
		DON'T KNOW	d			
		REFUSED	r			
	(E21=01 or E24=01 or E25= o sent {you/NAME} the infor	e01 and E26=02 and E27=01 and E28=10) mation?				
<open< td=""><td>N></td><td></td><td></td><td></td><td>-</td><td></td></open<>	N>				-	
		DON'T KNOW	d			
		REFUSED	r			
•	(E21=01 or E24=01 or E25= mebody call {you/NAME or h					
		YES	01			
		NO				
		DON'T KNOW	, ,			
		REFUSED	, ,			

INTERVIEWER: CODE	ALL	. THAT	APPLY.

	SOCIAL SECURITY ADMIR	NISTRATION		. 01	(E31)
					(E31)
	STATE VOCATIONAL REF	HABILITATION AGENCY, OR {VRNAME}			(E31)
	CURRENT/FORMER EMP	LOYER		. 04	(E31)
		R			(E31)
		ENTER			(E31)
	EMPLOYMENT NETWORK	<		07	
		IZATION			(E30h_Other)
		₹			(E30i_Other)
					(E30j_Other)
					(E31)
	REFUSED			. r	(E31)
	d (E21=01 or E24=01 or E25=0 hat Employment Network call	01 and E26=02 and E29=01 and E30=07) ed {you/NAME}?			
<ope< td=""><td>N></td><td></td><td></td><td></td><td></td></ope<>	N>				
		DONUT KALOMA			
		DON'T KNOW			
		REFUSED	r		
	d (E21=01 or E24=01 or E25=0 hat other Agency/Organization	01 and E26=02 and E29=01 and E30=08) n called {you/NAME}?			
<ope< td=""><td>N></td><td></td><td></td><td></td><td></td></ope<>	N>				
		DON'T KALOW			
		DON'T KNOW			
		REFUSED	r		
	d (E21=01 or E24=01 or E25=0 hat Health Care Provider called	01 and E26=02 and E29=01 and E30=09) d {you/NAME}?			
<ope< td=""><td>N></td><td></td><td></td><td></td><td></td></ope<>	N>				
		DON'T KNOW	لم		
		DON'T KNOWREFUSED			
		REFUSED	I		
	d (E21=01 or E24=01 or E25=0 ho called {you/NAME}?	01 and E26=02 and E29=01 and E30=10)			
<ope< td=""><td>N></td><td></td><td></td><td></td><td></td></ope<>	N>				
		DON'T KNOW	d		
		REFUSED			
		KEF03ED	I		
	d (E21=01 or E24=01 or E25=0 omebody talk to {you/NAME or	01 and E26=02) his/her representative} about the program in-	person?		
		YES	01		
		NO	-	3)	
		DON'T KNOW	•	•	
		DEF. 1050	u (⊑00	"	

(S2=01,03) and (E21=01 or E24=01 or E25=01 and E26=02 and E31=01)

E32. Who talked to {you/NAME or his/her representative} about the program?

INTERVIEWER: CODE ALL THAT APPLY.

SOCIAL SECURITY ADI	MINISTRATION		01	(E33)
MAXIMUS			02	(E33)
STATE VOCATIONAL R	EHABILITATION AGENCY, OR {VRNAME}		03	(E33)
CURRENT/FORMER EN	MPLOYER		04	(E33)
FRIEND/FAMILY MEMB	ER		05	(E33)
	CENTER		06	(E33)
EMPLOYMENT NETWO	PRK		07	
OTHER AGENCY/ORG/	ANIZATION		80	(E32h_Other)
HEALTH CARE PROVID	DER		09	(E32i_Other)
			10	(E32j_Other)
DON'T KNOW			d	(E33)
REFUSED			r	(E33)
(S2=01,03) and (E21=01 or E24=01 or E25 E32g_Other. What Employment Network to	5=01 and E26=02 and E31=01 and E32=07) alked to {you/NAME}?			
<open></open>				-
	DON'T KNOW	ما		
	REFUSED			
(S2=01,03) and (E21=01 or E24=01 or E25 E32h_Other. What other Agency/Organiza	5=01 and E26=02 and E31=01 and E32=08) tion talked to {you/NAME}?			
<open></open>				-
	DON'T KNOW			
	REFUSED	r		
(S2=01,03) and (E21=01 or E24=01 or E25 E32i_Other. What Health Care Provider tal	5=01 and E26=02 and E31=01 and E32=09) lked to {you/NAME}?			
<open></open>				-
	DON'T KALOW			
	DON'T KNOW			
	REFUSED	r		
(S2=01,03) and (E21=01 or E24=01 or E25 E32j_Other. Who talked to {you/NAME}?	5=01 and E26=02 and E31=01 and E32=10)			
<open></open>				-
	DON'T KNOW	d		
	REFUSED			
(S2=01,03) and (E21=01 or E24=01 or E25	5=01 and E26=02)			
	entative) learn about the program on a web site?			
	YES	01		
	NO	00		
	DON'T KNOW	d		
	REFUSED	r		

(S2=01,03) and (E21=01 or E24=01 or E25=01)

E34. PROGRAMMER: IF PROXY RESPONDENT, USE {NAME}

Do you recall {NAME} getting a Ticket in the mail from Social Security? It looks like a certificate with blue and red writing and the title says 'Ticket to Work and Self-Sufficiency'.

YES	01	(E36)
NO	00	
DON'T KNOW	d	
REFLISED	r	

(S2=01,03) and (E21=01 or E24=01 or E25=01 and E34=00,d,r)

E35. Did {you/NAME} ever try to get a Ticket from Social Security or anywhere else?

YES	01	
NO	00	(F31)
DON'T KNOW	d	(F31)
REFUSED	r	(F31)

EVER USED TICKET

(S2=01,03) and (E21=01 or E24=01 or E25=01 and E34=01 or E35=01)

E36. {Have you/Has NAME} ever used {your/his/her} Ticket to sign up with an Employment Network? Employment Networks are organizations or businesses that offer services to help people with disabilities work or earn more money as part of the Ticket to Work Program.

PROBE: Employment Networks can be public or private and can include the State Vocational Rehabilitation Agency.

YES	01	
NO	00	(F1)
DON'T KNOW	d	(F1)
REFUSED	r	(F1)

TICKET USE IN 2004

PROGRAMMER: IF {NAME} IS <u>NOT</u> IN LONGITUDINAL SAMPLE (S2 =01) OR IS IN LONGITUDINAL SAMPLE BUT DID NOT COMPLETE ROUND 1 (S2=03) SKIP TO QUESTION E37. IF {NAME} IS IN LONGITUDINAL SAMPLE THAT COMPLETED ROUND 1 (S2=02) GO TO CHECK 37.

(S2=02 and E21=01 or E24=01 or E25=01) *CHECK37.*

PROGRAMMER: IF {NAME} IS IN LONGITUDINAL SAMPLE THAT COMPLETED ROUND 1 (S2 = 02), THEN CHECK: WAS {NAME} SIGNED UP WITH AN EMPLOYMENT NETWORK IN 2004 {IN ROUND 1, E41=01 OR E45=01}?

YES	01	
NO	00	(E37)

(S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=01)

E37a. Now I am going to ask about {your/NAME's} Ticket use in 2004. When we interviewed you last year, you said {you were /NAME was} signed up with {EN FROM ROUND 1 E39 OR E46 WHEN E41=01 OR E45=01}. {Are you/Is NAME} currently signed up with {EN FROM ROUND 1 E39 OR E46 WHEN E41=01 OR E45=01}?

PROBE: IF EN NAME FILL IS 99999999: When we interviewed {you/NAME} in 2004, {you/NAME} said that {you were/he/she was} signed up with an EN, but {you/NAME} did not know the name. {Are you/Is NAME} still signed up with this EN from 2004?

YES	01	(E37b)
NO	00	
DON'T KNOW	d	
REFUSEDr	· (E3	88)

E37Amth. In what month and year did {you/NAME} stop receiving services from {EN FROM ROUND 1 E39 OR E46 WHEN E41=01 OR E45=01}? PROBE: Your best estimate is fine. INTERVIEWER: ENTER MONTH HERE AND YEAR ON NEXT SCREEN |__|_ (1-12) DON'T KNOW...... d REFUSED.....r (S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=01 and E37a=00,d,r) E37ayr. PROBE: In what month and year did {you/NAME} stop receiving services from {EN FROM ROUND 1 E39 OR E46 WHEN E41=01 OR E45=01}? PROBE: Your best estimate is fine. INTERVIEWER: ENTER YEAR |__|__| (2004-2005) (2001-2005) YEAR DON'T KNOW...... d REFUSED.....r (S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=01 and E37a=00,d,r and E37ayr<2004 or E37ayr>2005) E37a0. SOFT EDIT: [YEAR STOPPED RECEIVING SERVICES (E37ayr) SHOULD BE 2004 OR 2005.] IF {NAME} FAILS EDIT, INTERVIEWER READ: Let me make sure I did not make a mistake. You just indicated that you stopped receiving services from {EN FROM ROUND 1 E39 OR E46 WHEN E41=01 OR E45=01} in 2004. Is this correct? YES...... 01 SUPPRESS 03 E37a1. Why {are you/is NAME} no longer receiving services from {EN FROM ROUND 1 E39 OR E46 WHEN E41=01 OR E45=01}? INTERVIEWER: ENTER VERBATIM RESPONSE <OPEN> DON'T KNOW...... d REFUSED.....r (S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=01) {Were you/Was NAME} signed up with any other Employment Networks or a State Vocational Rehabilitation Agency at any time in 2004? NO 00 (E44) DON'T KNOW...... d (E44) REFUSED..... r (E44)

(S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=01 and E37a=00,d,r)

(S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=00) or (S2=01,03 and E21=01 or E24=01 or E25=01 and E36=01)

E37. PROGRAMMER: IF {NAME} IS IN LONGITUDINAL SAMPLE AND COMPLETED ROUND 1 (S2 = 02), ASK: Now I am going to ask you about {your/NAME's} Ticket use in 2004. {Were you/Was NAME} signed up with any Employment Networks or a State Vocational Rehabilitation Agency at any time in 2004?

PROBE: Employment Networks are organizations or businesses that offer services to help people with disabilities work or earn more money as part of the Ticket to Work Program. Employment Networks can be public or private and can include the State Vocational Rehabilitation Agency.

PROGRAMMER: IF {NAME} IS NOT IN LONGITUDINAL SAMPLE (S2=01) OR IS IN LONGITUDINAL SAMPLE BUT DID NOT COMPLETE ROUND 1 (S2=03), ASK:

{Were you/Was NAME} signed up with any Employment Network or a State Vocational Rehabilitation Agency at any time in 2004?

PROBE: Employment Networks are organizations or businesses that offer services to help people with disabilities work or earn more money as part of the Ticket to Work Program. Employment Networks can be public or private and can include the State Vocational Rehabilitation Agency.

YES	01	
NO	00	(E44)
DON'T KNOW	d	(E44)
REFUSED	r	(E44)

(S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=00 and E37=01) or (S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=01 and E37b=01) or (S2=01,03 and E21=01 or E24=01 or E25=01 and E36=01 and E37=01)

E38. PROGRAMMER: IF {NAME} IS CURRENTLY SIGNED UP WITH OTHER ENs (E37b=01), USE "OTHER" How many {other} Employment Networks {were you/was NAME} signed up with in 2004?

	EMPLOYMENT NETWORKS IN 200	4
(1-2)		
(1-5)		
DON'T k	(NOW	d
REFUSE	ED	r

(S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=00 and E37=01) or (S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=01 and E37=01) or (S2=01,03 and E21=01 or E24=01 or E25=01 and E36=01 and E37=01)

E39. PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2004

((IF S2=01,03 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1)), USE {FIRST, SECOND, THIRD, ETC.}

PROGRAMMER: IF {NAME} IS CURRENTLY SIGNED UP WITH EN FROM ROUND 1 (E37a=01) AND IS CURRENTLY SIGNED UP WITH OTHER ENS (E37b=01), USE "OTHER"

What was the name of the {first, second, third, fourth, fifth} {other} Employment Network {you were/ NAME was} signed up with in 2004?

INTERVIEWER: ENTER VERBATIM RESPONSE

E39a (EN#1 2004) <string=240></string=240>	
E39b (EN#2 2004) <string=240></string=240>	
E39c (EN#3 2004) <string=240></string=240>	
E39d (EN#4 2004) <string=240></string=240>	
E39e (EN#5 2004) <string=240></string=240>	
DON'T KNOW	d
	r

2/28/2012 E-14 ROUND 2 VERSION

PROGRAMMER: ASK E40 - E43 FOR EACH EMPLOYMENT NETWORK LISTED IN E39

(S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=00 and E37=01) or (S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=01 and E37=01) or (S2=02 and E37=01) or (S2=01,03 and E21=01 or E24=01 or E25=01 and E36=01 and E37=01)

E40mth. The Ticket to Work program started in 2001. In what month and year did {you/NAME} first use {your/his/her} ticket with {EN IN 2004 FROM E39}?

PROBE: Your best estimate is fine.

INTERVIEWER: I		CCDEEN

(1-12) MO	
DON'T KNOW	c
REFUSED	

(S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=00 and E37=01) or (S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=01 and E37b=01) or (S2=01,03 and E21=01 or E24=01 or E25=01 and E36=01 and E37=01)

E40yr. PROBE: The Ticket to Work program started in 2001. In what month and year did {you/NAME} first use your ticket with {EN IN 2004 FROM E39}?

PROBE: Your best estimate is fine.

INTERVIEWER: ENTER YEAR

(2001-2004)	
YEAR	
DON'T KNOW	d
REFUSED	r

PROGRAMMER: IF {NAME} IS CURRENTLY SIGNED UP WITH EN FROM ROUND 1 (E37a=01) AND {NAME} WAS SIGNED UP WITH OTHER EN'S IN 2004 (E37b=01), THEN GO TO QUESTION E42mth, OTHERWISE, GO TO E41

(S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=00 and E37=01) or (S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=01 and E37a=00,d,r and E37b=01) or (S2=01,03 and E21=01 or E24=01 or E25=01 and E36=01 and E37=01) E41. {Are you/ls NAME} currently signed up with {EN IN 2004 FROM E39}?

YES	01	(NEXT EN OR E44)
NO	00	
DON'T KNOW	d	
REFUSED	r	

(S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=00 and E37=01) or (S2=02 and E21=01 or E24=01 or E25=01 and CHECK37=01 and E37a=00,d,r and E37b=01) or (S2=01,03 and E21=01 or E24=01 or E25=01 and E36=01 and E37=01) E42mth. In what month and year did {you/NAME} stop receiving services from {EN IN 2004 FROM E39}?

PROBE: Your best estimate is fine.

INTERVIEWER: ENTER MONTH HERE AN YEAR ON NEXT SCREEN

_ MO	(1-12)	
_	(NOW	,

2/28/2012 E-15 ROUND 2 VERSION

CHECK	37=01 and E37a=00,d,r and E37b=	e01 and CHECK37=00 and E37=01) or (S2= e01) or (S2=01,03 and E21=01 or E24=01 or E2 ar did {you/NAME} stop receiving services from { ine.	25=01 and E36=01 and E37=01)
	INTERVIEWER: ENTER YEAR		
		(2001-2005) YEAR (2004 - 2005)	
		DON'T KNOWREFUSED	
CHECK (E42yr<	37=01 and E37a=00,d,r and E37 2004 or E42yr>2005) SOFT EDIT: [YEAR STOPPED INTERVIEWER READ: Earlier yo	c01 and CHECK37=00 and E37=01) or (S2=7b=01) or (S2=01,03 and E21=01 or E24=01 **RECEIVING SERVICES (E42yr) SHOULD Base ou reported {you were/NAME was} signed up	or E25=01 and E36=01 and E37=01) and E 2004 OR 2005.} IF {NAME} FAILS EDIT,
	recorded {you/NAME} stopped rec	ceiving services in (E42yr). Is this correct?	
		YES NO SUPPRESS	. 02 (CHANGE E42yr)
	37=01 and E37a=00,d,r and E37b= Why {are you/is NAME} no longer	and CHECK37=00 and E37=01) or (S2=02 and E01) or (S2=01,03 and E21=01 or E24=01 or E24 receiving services from {EN IN 2004 FROM E3	25=01 and E36=01 and E37=01)
	INTERVIEWER: ENTER VERBAT		
	<open></open>		
		DON'T KNOWREFUSED	
CURRE	NT TICKET USE		
(S2=02 E44.) or S1=01,03 and E21=01 or E24=01 or E25=0 LY SIGNED UP WITH AN EMPLOYMENT N	
	,	YES(S2=01,03), GO TO E48. IF IN LONGITUDI NO	NAL SAMPLE (S2=02), GO TO E51))
(S2=02 E45.		and E44=00) or (S1=01,03 and E21=01 or E24 ed up with an Employment Network?	=01 or E25=01 and E36=01 and E44=00)
		re organizations or businesses that offer service to Work Program. Employment Networks can I	
		YES	

2/28/2012 E-16 ROUND 2 VERSION

E46.	What is the name of the Employme	nt Network {you are/NAME is} currently signed up with?
	INTERVIEWER: ENTER VERBATI	M RESPONSE
	DON'T KNOW	NG=240 > d
E44=00	and E45=01)	and E44=00 and E45=01) or (S1=01,03 and E21=01 or E24=01 or E25=01 and E36=01 and E40 in 2001. In what month and year did {you/NAME} first use {your/his/her} ticket with
	INTERVIEWER: ENTER MONTH H	HERE AND YEAR ON NEXT SCREEN _ (1-12) MO
		DON'T KNOW d REFUSED r
E44=00	and E45=01)	and E44=00 and E45=01) or (S1=01,03 and E21=01 or E24=01 or E25=01 and E36=01
	INTERVIEWER: ENTER YEAR	_ (2001-2005) YEAR
		DON'T KNOW d REFUSED r
OTHER	EMPLOYMENT NETWORKS NOT	PREVIOUSLY DISCUSSED
	PROGRAMMER: E48 THROUGH I	E50yr SKIPPED FOR LONGITUDINAL SAMPLE WHO COMPLETED ROUND 1 (S2=02)
(S2=01, E48.	talked about? PROBE: Employment Networks are	e01 and E36=01) {your/his/her} Ticket to sign up with any other Employment Networks that we haven't yet e organizations or businesses that offer services to help people with disabilities work or earn o Work Program. Employment Networks can be public or private and can include the State
		YES

(S2=02 and E21=01 or E24=01 or E25=01 and E44=00 and E45=01) or (S1=01,03 and E21=01 or E24=01 or E25=01 and E36=01 and

E44=00 and E45=01)

(S2=01, E49.	03) and (E21=01 or E24=01 or E25= How many other Employment Netw	01 and E36=01 and E48=01) orks {have you/has NAME} been signed up witl	h?
		OTHER EMPLOYMENT NETWORKS (1-2) (1-5)	
		DON'T KNOW	-
-	03) and (E21=01 or E24=01 or E25= . The Ticket to Work program started with an Employment Network? PROBE: Your best estimate is fine.	01 and E36=01 and E48=01) I in 2001. In what month and year did {you/NA	.ME} <u>first</u> use {your/his/her} Ticket to sign up
	INTERVIEWER: ENTER MONTH H	ERE AND YEAR ON NEXT SCREEN _ (1-12) MO	
		DON'T KNOW	
-	03) and (E21=01 or E24=01 or E25= PROBE: The Ticket to Work progra- sign up with an Employment Netwo PROBE: Your best estimate is fine.	m started in 2001. In what month and year did	{you/NAME} first use {your/his/her} Ticket to
	INTERVIEWER: ENTER YEAR	(2001-2005) YEAR	
		DON'T KNOW	
(S2=02 E51.		or (S2=01,03 and E21=01 or E24=01 or E25=0 NON-PARTICIPANT IN 2004 (E36=00,d,r or	
		YES	,

SECTION F: TICKET NON-PARTICIPANTS IN 2004

TRIED TO GET INFORMATION OR PARTICIPATE IN 2004

<OPEN> _____

TRIED TO GET IN ORMATION OR PARTICIPATE	114 2004				
(E51=01) F1. During 2004, did {you/NAME or his/her re	presentative} contact, or try to cor	ntact, any	one to find	d out more a	bout the Ticket to
Work program or to participate in the program	am?				
NO DON'	KNOW	00 d	(F31)		
(E51=01 and F1=01) F2. Thinking only about 2004, who did {you/N program?	AME or his/her representative} co	ontact to	get informa	ation about t	he Ticket to Work
Did {you/NAME or his/her representative}	contact				
				DON'T	
		<u>YES</u>	<u>NO</u>	KNOW	REFUSED
a. The Social Security Administration?		01	00	d	r
b. Maximus?		01	00	d	r
c. The State Vocational Rehabilitation Ag	ency or{VRNAME}?	01	00	d	r
d. A Benefits Planning and Assistance Or	ganization (BPAO)?	01	00	d	r
e. A Benefits Specialist or caseworker?		01	00	d	r
f. A friend or family member?		01	00	d	r
g. An Independent Living Center?		01	00	d	r
h. An Employment Network? PROBE: Employment Networks are orga offer services to help people with disabilit as part of the Ticket to Work program. En public or private and can include the Stat Agency. PROGRAMMER: IF F2h=01 GO TO F2h	nizations or businesses that ies work or earn more money aployment Networks can be be Vocational Rehabilitation OTHER, ELSE GO TO F2i	01	00	d	r
i. Another Agency or Organization? PROGRAMMER: IF F2I=01 GO TO F2i_0		01	00	d	r
(E51=01, F1=01 and F2h=01) F2h_Other. What other Employment Network?					
<open></open>			(F	-2i)	
	KNOWSED		. ,		
(E51=01, F1=01 and F2i=01) F2i_Other. What other Agency or Organization?					

8/23/2005 F-1 ROUND 2 VERSION

DON'T KNOW...... d
REFUSED...... r

(E51=01 and F1=01)

F3. In general, how easy was it for {you/NAME or his/her representative} to get the information {you/they} wanted about the Ticket to Work program? Was it:

Very easy,	01
Somewhat easy,	02
Not very easy, or	03
Not at all easy?	04
DON'T KNOW	d
REFUSED	r

INFORMATION ABOUT EMPLOYMENT NETWORKS

(E51=01 and F1=01)

F4. Now I'd like to ask you about Employment Networks. During 2004, did {you/NAME or his/her representative} get any information about the Employment Networks that serve {your/NAME's} area?

PROBE: Employment Networks are organizations or businesses that offer services to help people with disabilities work or earn more money as part of the Ticket to Work Program. Employment Networks can be public or private and can include the State Vocational Rehabilitation Agency

YES	01	
NO	00	(F12)
DON'T KNOW		,
REFUSED	r	(F12)

(E51=01 and F1=01 and F4=01)

F5. How did {you/NAME} receive this information about Employment Networks? Did {you/NAME or his/her representative} receive information in the mail?

YES	01	
NO	00	(F7)
DON'T KNOW	d	(F7)
REFUSED	r	(F7)

(E51=01 and F1=01 and F4=01 and F5=01)

F6. Who sent {you/NAME or his/her representative} the information about Employment Networks?

INTERVIEWER: CODE ALL THAT APPLY.

SOCIAL SECURITY ADMINISTRATION	01	(F7)
MAXIMUS	02	(F7)
STATE VOCATIONAL REHABILITATION AGENCY or {VRNAME}	03	(F7)
A BENEFITS PLANNING AND ASSISTANCE ORGANIZATION (BPAO)	04	(F7)
A BENEFITS SPECIALIST OR CASEWORKER	05	(F7)
FRIEND/FAMILY MEMBER	06	(F7)
INDEPENDENT LIVING CENTER	07	(F7)
EMPLOYMENT NETWORK	80	(F7)
OTHER AGENCY/ORGANIZATION	09	(F7)
OTHER	10	(F6j_Other)
DON'T KNOW	d	(F7)
REFUSED	r	(F7)

F6j_Other. What Other place?	,			
<open></open>				
	DON'T KNOW	d		
	REFUSED	r		
(E51=01 and F1=01 and F4=01) F7. Did somebody call {you/NAMI	E or his/her representative} to talk ab	oout Employment Networks?		
	YES NO DON'T KNOW REFUSED	00 (F9) d (F9)		
(E51=01 and F1=01 and F4=01 and F7 F8. Who called {you/NAME or his.	· · · · · · · · · · · · · · · · · · ·			
INTERVIEWER: CODE ALL 1	THAT APPLY.			
MAXIMUS. STATE VOO A BENEFIT A BENEFIT FRIEND/FA INDEPEND EMPLOYM OTHER AG OTHER DON'T KNO	CURITY ADMINISTRATION	NCY or {VRNAME} PRGANIZATION (BPAO)	02 03 04 05 06 07 08 09 10 d	(F9) (F9) (F9) (F9) (F9) (F9) (F9) (F9)
F8j_Other. What Other place?	_01 and 1 0_10)			
<open></open>				
	DON'T KNOWREFUSED			
(E51=01 and F1=01 and F4=01) F9. Did somebody talk to {you/NA	ME or his/her representative} about	Employment Networks in-pe	rson	1?
	YES NO DON'T KNOW	00 (F11)		

(E51=01 and F1=01 and F4=01 and F5=01 and F6=10)

REFUSED.....r (F11)

(E51=01 and F1=01 and F4=01 and F9=01) F10. Who talked to {you/NAME or his/her representative} about Employment Networks? INTERVIEWER: CODE ALL THAT APPLY. A BENEFITS PLANNING AND ASSISTANCE ORGANIZATION (BPAO).. 04 (F11) A BENEFITS SPECIALIST OR CASEWORKER..... 05 (F11) INDEPENDENT LIVING CENTER 07 (F11) EMPLOYMENT NETWORK 08 (F11) OTHER AGENCY/ORGANIZATION_____ 09 (F11) OTHER 10 (F10i_OTHER) DON'T KNOW d (F11) REFUSED r (F11) (E51=01 and F1=01 and F4=01 and F9=01 and F10=10) F10j_Other. What Other place? <OPEN> DON'T KNOW...... d REFUSED.....r (E51=01 and F1=01 and F4=01) Did (you/NAME or his/her representative) learn about Employment Networks on a web site? F11. YES 01 NO 00 DON'T KNOW d REFUSED.....r **CONTACT WITH STATE VR AGENCIES** (E51=01 and F1=01) The next questions are about trying to use a Ticket with the vocational rehabilitation agency in {your/NAME's} state. In F12. {your/NAME's} state the vocational rehabilitation agency is called {STATE NAME FOR VR AGENCY}. I'm going to refer to this as {your/NAME's} State VR agency. In 2004, did {you/NAME or his/her representative} contact {your/his/her} State VR agency to use {your/his/her} Ticket or to talk about getting services from them? YES...... 01 NO 00 (F20) DON'T KNOW...... d (F20) REFUSED..... r (F20) (E51=01 and F1=01 and F12=01) F13. In 2004, did {you/NAME or his/her representative} try to use {your/NAME's} Ticket to sign up with {your/NAME's} State VR agency? YES...... 01 (F15)

`	Why didn't {you/NAME or his/her representative} try to use {your/NAME's} Ticket with the State	e VR agency in 2004?
	INTERVIEWER: ENTER VERBATIM RESPONSE	
	<open></open>	(F20)

(E51=01 and F1=01 and F12=01 and F13=01)

In 2004, did {your/NAME's} State VR agency accept {your/his/her} Ticket?

YES	01	(F17)
NO	00	
DON'T KNOW	d	(F20)
REFUSED	r	(F20)

DON'T KNOW d (F20) REFUSED..... r (F20)

(E51=01 and F1=01 and F12=01 and F13=01 and F15=00)

Why didn't the State VR agency accept {your/NAME's} Ticket in 2004? F16.

INTERVIEWER: CODE ALL THAT APPLY.

NOT TAKING TICKETS WHEN CONTACTED	01	(F17)
DID NOT OFFER SERVICES {NAME} NEEDED	02	(F17)
DID NOT SERVE PEOPLE WITH {NAME'S} DISABILITY/NEEDS	03	(F17)
{NAME} NOT WILLING/ABLE TO WORK FULL-TIME/		
ENOUGH HOURS	04	(F17)
{NAME} NOT WILLING TO GO OFF OF DISABILITY BENEFITS	05	(F17)
OTHER	06	
DON'T KNOW	d	(F17)
REFUSED	r	(F17)

(E51=01 and F1=01 and F12=01 and F13=01 and F15=00 and F16=06)

F16 Other. What other reason?

<OPEN> ______ _____ (F20)

> DON'T KNOW...... d REFUSED.....r

(E51=01 and F1=01 and F12=01 and F13=01 and F15=01, 00)

F17. CHECK: WAS TICKET ASSIGNED TO STATE VR AGENCY IN 2004 (F15=01)?

YES	01	
NO	00	(F20)

(E51=01 and F1=01 and F12=01 and F13=01 and F15=01,00 and F17=01)

SOFT EDIT: You said that {your/NAME's} State VR agency accepted {your/his/her} Ticket some time in 2004 (F15=01), but I show that you told me earlier {you/NAME} had not assigned {your/his/her} Ticket in 2004 (E51=01). Is it correct that {you/NAME} participated in the Ticket to Work program in 2004 through {your/his/her} State VR agency?

YES, DID PARTICIPATE IN 2004	01	
NO, DID NOT PARTICIPATE IN 2004	00	(F20)
DON'T KNOW	d	(F20)
REFUSED	r	(F20)

(E51=01 and F1=01 and F12=01 and F13=01 and F15=01,00 and F17=01 and F18=01)

F19. I have encountered a problem with the interview and need to speak with my supervisor. I will call you back shortly. Thank you for your time.

INTERVIEWER: GO TO PARALLEL BREAKOFF BLOCK, END INTERVIEW AND STATUS SUPERVISOR REVIEW 380.

CONTACT WITH EMPLOYMENT NETWORKS OTHER THAN THE STATE VR AGENCY

F20. The next questions are about {your/NAME's} contact with Employment Networks, other than {your/his/her} state vocational rehabilitation agency, {VRNAME}. In 2004, did {you/NAME} contact any Employment Networks other than {your/NAME's} state VR Agency to use {your/his/her} Ticket or to talk about getting services from them?

PROBE: Employment Networks are organizations or businesses that offer services to help people with disabilities work or earn more money as part of the Ticket to Work Program. Employment Networks can be public or private and can include the

	State Vocational Rehabilitation Age	ency.	can	be public or private and can inclu
		YES NO DON'T KNOW REFUSED.	00 d	(F28)
(E51=0 ²) F21.	1 and F1=01 and F20=01) How many other Employment Netv	vorks did {you/NAME} contact in 2004?		
	PROBE: Your best guess is fine.			
		NUMBER (1-2) (1-15)		
		DON'T KNOWREFUSED		
(E51=0° F22.		ONE EMPLOYMENT NETWORK IN F21, REA ing to ask about {your/NAME's} overall experien		

Employment Networks that {you/

PROGRAMMER: USE "ANY OF" AND "NETWORKS" IF {NAME} CONTACTED MORE THAN ONE EN (F21>1). Did {you/NAME or his/her representative} try to use {your/NAME's} Ticket to sign up with {any of} the Employment Network(s) {you/he/she} contacted?

YES	01	(F24)
NO	00	
DON'T KNOW	d	(F24)
REFUSED	r	(F24)

(E51=01 and F1=01 and F20=01 and F22=00)

PROGRAMMER: USE "NETWORKS" and "ANY OF" IF {NAME} CONTACTED MORE THAN ONE EN (F21>1). F23. Why didn't {you/NAME or his/her representative} try to use {your/NAME's} Ticket with (any of) the Employment Network(s) {you/he/she} contacted?

INTERVIEWER: ENTER VERBATIM RESPONSE

<open></open>			(F30)
	DON'T KNOWREFUSED	,	

(E51=01 F24.	E51=01 and F1=01 and F20=01 and F22=01,d,r) 24. PROGRAMMER: USE "ANY OF" AND "NETWORKS" IF {NAME} CONTACTED MORE THAN ONE EN (F21>1). In 2004, did {any of} the Employment Network(s) {you/NAME} tried to use {your/his/her} Ticket with accept {your/NAME's Ticket?			
	YES	01	(F26)	
	NO	00	. ,	
	DON'T KNOW		• •	
	REFUSED	r	(F30)	
(E51=0 F25.	and F1=01 and F20=01 and F22= 01,d, r and F24=00) PROGRAMMER: USE "NETWORKS" IF {NAME} CONTACTED MORE THAN ON Overall, why didn't the Employment Network(s) {you/NAME} tried to use {your/his.in 2004?	/her}	Ticket with accept {your/NAME's} Ticket	
	PROGRAMMER: USE "THESE" AND "NETWORKS" IF {NAME} CONTACTED M	OKE	E THAN ONE EN (F21>1)	
	PROBE: Were there any other reasons why {these/this} Employment Network(s 2004?	s) wo	ould not accept {your/NAME'S} Ticket in	
	INTERVIEWER: CODE ALL THAT APPLY.			
	NOT TAKING TICKETS WHEN CONTACTED	01	(F30)	
	DID NOT OFFER SERVICES {NAME} NEEDED	02	(F30)	
	EMPLOYMENT NETWORK DID NOT SERVE PEOPLE WITH			
	{NAME`S} DISABILITY/NEEDS	03	(F30)	
	{NAME} NOT WILLING/ABLE TO WORK FULL-TIME/ ENOUGH HOURS	∩4	(F30)	
	{NAME} NOT WILLING TO GO OFF OF DISABILITY BENEFITS		` ,	
	OTHER		()	
	DON'T KNOW	d	(F30)	
	REFUSED	r	(F30)	
•	and F1=01 and F20=01 and F22= 01,d,r and F24=00 and F25=06) er. What Other reason?			
	<open></open>			
	DON'T KNOWREFUSED			
	GO TO F30			
(E51=01 F26.	and F1=01 and F20=01 and F22= 01,d,r and F24=01) PROGRAMMER: USE "ONE OF" AND "NETWORKS" IF {NAME} CONTACTED N	ИOR	RE THAN ONE EN (F21>1).	
	You said that {one of} the Employment Network{s} {you/NAME} tried to use {you Ticket some time during 2004 (F24=01), but I show that you told me earlier {you/n in 2004 (E51=01). Is it correct that {you/NAME} participated in the Ticket program	NAM	E} had not assigned {your/his/her} Ticket	
	YES, DID PARTICIPATE IN 2004	<u>01</u>		
	NO, DID NOT PARTICIPATE IN 2004		(F30)	
	DON'T KNOW		` '	
	REFUSED	r	(F30)	

(E51=01 and F1=01 and F20=01 and F22= 01,d,r and F24=01 and F26=01)

F27. I have encountered a problem with the interview and need to speak with my supervisor. I will call you back shortly. Thank you for your time.

OR REVIEW 380.

	INTERVIEWER: GO TO PARALLE	L BREAKOFF BLOCK, END INTERVIEW AND S	TATUS SU	IPERVISOR R	EVIEW	/ 380.
RECEI	/ED INFORMATION BUT DID NOT	CONTACT ENs IN 2004				
(E51=0 F28.	1 and F1=01 and F20=00,d,r) CHECK: DID {NAME} RECEIVE IN CONTACT THEM (F12=00 AND F2	FORMATION ABOUT EMPLOYMENT NETWOR 20=00)?	KS (F4=01) BUT DID NO)T	
		YES 01	1			
		NO				
(E51=0 F29.		B=01) t the Employment Networks in {your/NAME's}, why didn't {you/NAME or his/her representative	-	-	State	Vocational
	INTERVIEWER: CODE ALL THAT	APPLY.				
	CHANGED MINDFAMILY RESPONSIBILITI FAMILY WOULD NOT SU COULD NOT GET RELIA! ECONOMIC CONDITIONS OPPORTUNITIES EXIST FEARED SERVICES WOI INFORMATION TOO CON EMPLOYMENT NETWOR ENS TOO FAR AWAY COULD NOT GET IN CON NO ENS PROVIDED SER' NO ENS SERVE MY KIND OTHER DON'T KNOW	IDITION PPORT BLE TRANSPORTATION S CHANGED – NO LONGER THINK JOB T JLD ENDANGER BENEFITS NFUSING – DID NOT KNOW WHERE TO START K {NAME} WANTED WAS NOT PARTICIPATING NTACT WITH ENS VICES {NAME} NEEDS O OF DISABILITY		02 (F30) 03 (F30) 04 (F30) 05 (F30) 06 (F30) 07 (F30) 08 (F30) 09 (F30) 11 (F30) 11 (F30) 13 (F30) 14 d (F30)		
-	1 and F1=01 and F20=00,d, r and F2 ΓHER. What other reason?	8=01 and F29=14)				
	<open></open>					
		DON'T KNOW c				
FUTUF	E PLANS ABOUT TICKET TO WOR	K PARTICIPATION				
(E51=0 F30.	1 and F1=01) Do you think {you/NAME} will try to	participate in the Ticket to Work program at any ti	ime in the t	future?		
		VEQ 04	Ī			
		YES				
		· · - · · · · · · · · · · · · · · · · ·	-			

GO TO F33

DON'T KNOW d REFUSED.....r

AWARE OF TICKET PROGRAM BUT DID NOT TRY TO GET INFORMATION OR PARTICIPATE DURING 2004

(E35=00,d,r) OR (E51=01 and F1=00,d,r)

F31. What are the main reasons {you did/NAME did} not try to participate in the Ticket to Work program in 2004?

KNOWLEDGE OF TICKET TO WORK PROGRAM

(E35=00,d,r or E51=01)

F33. Now I'm going to read you some statements about the Ticket to Work program. For each statement, please tell me if it is something {you/NAME or his/her representative} knew before today or not.

DON'T KNOW...... d
REFUSED...... r

PROGRAMMER: INSERT STATEMENT BELOW HERE

Is this something {you/NAME or his/her representative} knew before today or not?

INTERVIEWER: REPEAT AS NECESSARY

			DID NOT		
		KNEW	KNOW		
		BEFORE	BEFORE	DON'T	
		TODAY	TODAY	KNOW	REFUSED
a.	Ticket to Work is a program to help people with disabilities get training				
	Or other employment services to improve their ability to work. These				
	employment services are paid for by Social Security?	01	00	d	r
b.	Ticket to Work participants are free to choose an employment service				
	provider from among a network of employment service providers in the				
	program?	01	00	d	r
C.	{Your/NAME's} employment service provider in the Ticket to Work	0.	00	•	·
0.	program is not paid by Social Security unless {you go/(he/she) goes}				
	back to work?	01	00	d	r
d.	While participating in the Ticket to Work program, Social Security will not	٠.		~	·
	conduct a review of {your/NAME's} medical eligibility for disability				
	benefits?	01	00	d	r
				-	•

DID NOT

8/23/2005 F-9 ROUND 2 VERSION

SECTION G: EMPLOYMENT-RELATED SERVICES AND SUPPORTS USED IN 2004

SERVICE PROVIDERS

(All)

G1. PROGRAMMER: USE LANGUAGE BELOW IF {NAME} IS <u>NOT</u> IN LONGITUDINAL SAMPLE FROM ROUND 1 (S2=01,03) Next, I will ask about different types of services that people with disabilities sometimes get in order to improve their ability to work or live independently.

First, I will ask about employment services {you/NAME} may have received.

(IF DISABLED BEFORE AGE 16 (B18_AGE < 16 OR IF BIRTHYEAR – B18_YEAR <16)) Since age 16, {have you/has NAME} received any employment services to help {you/him/her} get a job?

(IF DISABLED AT AGE 16 OR LATER (B18_AGE ≥ 16 OR IF BIRTHYEAR - B18_YEAR ≥ 16)) Since becoming disabled, {have you/has NAME} received any employment services to help {you/him/her} get a job?

PROGRAMMER: USE LANGUAGE BELOW IF {NAME} IS IN LONGITUDINAL SAMPLE FROM ROUND 1 (S2=02) Next, I will ask about different types of services that people with disabilities sometimes get in order to improve their ability to work or live independently.

First, I will ask about employment services (you/NAME) may have received.

Thinking about 2004, did {you/NAME} receive any employment services to help {you/him/her} get a job?

YES	01	
NO	00	(G10)
DON'T KNOW	d	(G10)
REFUSED	r	(G10)

(G1=01)

G2. What was the name of the place {you/NAME} went to for those employment services?

PROGRAMMER: DISPLAY Anyplace else? ON SCREEN FOR PROVIDERS 2 THROUGH 8

INTERVIEWER: PRESS 'ENTER' FOR NO OTHER PLACE

PROBE 1: IF RESPONDENT DOESN'T KNOW NAME: I need to enter something that will help identify the place {you/NAME} received these services from in later questions. What could I enter to help us identify this place later? Street name, address, person spoken with there, even the color of the building would help identify it.

PROBE 2: (IF (S2=01,03 AND E36=01) OR (IF S2=02 and E37a=01 or E37b=01 or E37=01)):

This includes services {you/NAME} received from an Employment Network.

PROVIDER 1 <string=240> _</string=240>	
REFLISED	

2/28/2012 G-1 ROUND 2 VERSION

G1=01) G3.	•	PARTICIPANT IN 2004 (E37=01) OR (IF S2=0)2 AN	ND EN2004=01)?
		YES	01	
		NO	00	(G7)
		HROUGH G6 ONLY FOR THE FIRST AND S FROM R1 E39 OR ROUND1 EN FROM R1 E4		OND 2004 EMPLOYMENT NETWORKS
G1=01 G4.		NT NETWORK IN 2004 (DISPLAY FIRST/SE ROM R1 E46)} ON THIS LIST {DISPLAY LIST		
		YES	01	(DISPLAY SECOND EN FROM E39
		OR ROUND1 EN FROM R1 E39 OR ROUND NO		N FROM R1 E46 OR SKIP TO G7)
G1=01 G5.	and G3=01 and G4=00) In 2004, did {you/NAME} receive 6 ROUND1 EN FROM R1 E39 OR R	employment services from {FIRST/SECOND E COUND1 EN FROM R1 E46)}?	MPL	OYMENT NETWORK IN 2004 (E39 OF
		YES	01	
		NO		• •
		DON'T KNOW REFUSED		• •
G1=01 G6.	ROUND1 EN FROM R1 E46)} to the	D EMPLOYMENT NETWORK FROM 2004	•	OR ROUND1 EN FROM R1 E39 OF
		PRESS 1 TO CONTINUE	01	
G1=01) G7.	•	UGH G9 FOR EACH PLACE LISTED IN G2	2 IN	CLUDING EMPLOYMENT NETWORKS
	Thinking about {PROVIDER FROM	I G2}, was this place:		
		A state agency,	01	(G8)
		A private business, or		(NEXT PROVIDER OR G10)
		DON'T KNOW		(NEXT PROVIDER OR G10)
		REFUSED		· ·
G1=01 G7_oth.	and G7=03)			
	INTERVIEWER: PLEASE SPECIF	Y		
	<open></open>			(NEXT PROVIDER OR G10)
		DON'T KNOW	d	(NEXT PROVIDER OR G10)
		REFUSED		(NEXT PROVIDER OR G10)

G8.	and G7=01) CHECK: WAS {PROVIDER FRO	M G2} A STATE AGENCY (G7 = 01)?				
		YES	01			
		NO	02	(NEXT PROVIDER OR G10)		
•	and G7=01 and G8=01)					
G9.	Was this place a:					
	A vacational rababilitation	an aganay	01	(NEXT DDO)/IDED OD C10)		
		on agency,				
				(NEXT PROVIDER OR GTO)		
		y,		(NEVT DDO) (IDED OD 040)*		
		ployment/unemployment office,				
	• • • • • • • • • • • • • • • • • • • •	e		· ·		
				· ·		
				,		
*Note: (G9=6 is a new category added at F	2; value of "other" category (G9=5) maintained t	or c	omparability across rounds.		
-	G7=01 and G8=01 and G9=04)					
G9_oth	INTERVIEWER: PLEASE SPEC	FY				
	<open></open>			(NEXT PROVIDER OR G10)		
		DON'T KNOW				
		REFUSED	r	(NEXT PROVIDER OR G10)		
(G1=01 G9_oth	G7=01 and G8=01 and G9=05) 2. INTERVIEWER: PLEASE SPEC	FY				
	<open></open>			(NEXT PROVIDER OR G10)		
		DON'T KNOW	Ь	(NEXT PROVIDER OR G10)		
		REFUSED				
			-	(,		
(AII)						
G10.		GE BELOW IF $\{NAME\}$ IS \underline{NOT} IN LONGITUDIN help them learn new skills so they can get a new				
	•	6 (B18_AGE < 16 OR IF BIRTHYEAR - B18_ elp {you/him/her} get a <u>new</u> job or change caree		AR <16)) Since age 16, {have you/ha		
	(IF DISABLED AT AGE 16 OR LATER (B18_AGE ≥ 16 OR IF BIRTHYEAR - B18_YEAR ≥ 16)) Since becoming disabled {have you/has NAME} received any training to help {you/him/her} get a <u>new job</u> or change careers?					
	PROBE: Please do not include p	aces you already told me about.				
	Sometimes people get training to	GE BELOW IF {NAME} IS IN LONGITUDINAL Sometimes of them learn new skills so they can get a new any training to help {you/him/her} get a new job of the properties of the prope	v job	or change careers.		
	PROBE: Please do not include p	aces you already told me about.				
		YES	01			
		NO		(G15)		
		DON'T KNOW		• •		

REFUSED.....r (G15)

(G10=01)

G11. What was the name of the place {you/NAME} went to for that training? PROBE: Please do not include any places you already told me about.

PROGRAMMER: DISPLAY Anyplace else? ON SCREEN FOR PROVIDERS 2 THROUGH 8

INTERVIEWER: PRESS 'ENTER' FOR NO OTHER PLACE

PROBE 1: IF RESPONDENT DOESN'T KNOW NAME: I need to enter something that will help identify the place {you/NAME} received these services from in later questions. What could I enter to help us identify this place later? Street name, address, person spoken with there, even the color of the building would help identify it.

PROBE 2: (IF (S2=01,03 AND E36=01) OR (IF S2=02 and E37a=01 or E37b=01 or E37=01)):

This includes services {you/NAME} received from an Employment Network.

		ING=240>		
	PROVIDER 2 < STR	RING=240>		
	PROVIDER 3 < STR	RING=240>		
	PROVIDER 4 < STR	RING=240>		
		RING=240>		
	PROVIDER 6 < STR	RING=240>		
	PROVIDER 7 < STR	RING=240>		
	PROVIDER 8 < STR	RING=240>		
	REFUSED		r	
PROGRAMM (G10=01)	IER: FOR EACH PROVID	DER LISTED IN G11 DISPLAY G12		
G12. INTE	ERVIEWER: HAS THE R	ESPONDENT ALREADY MENTIONED	O (PROVIDER LIS	TED IN G11}?
	ERVIEWER: IF THE LIST NTIONED YET.	OF PROVIDERS ALREADY MENTIO	NED IS BLANK, N	IO PROVIDERS HAVE BEEN
	=	S ALREADY MENTIONED INCLUDE {	DISPLAY PROVID	DERS FROM G2}:
		YES	01	(PROGRAMMER: DELETE ONE
		MENTION)		•
		NO	00	(NEXT PROVIDER OR G13)
	AED. ASK C42 TUDOUG	H G14 FOR EACH NEW PROVIDER L	ISTED IN C44	
(G10=01)	IER. ASK GIS INKOUGI	H G14 FOR EACH NEW PROVIDER L	JOIED IN GIT.	
•	king about (NEW PPOVI	DER FROM G11}, was this place:		
G13. 111111	iking about (NEW 1 100V)	DENT NOW GTT, was this place.		
		A state agency,	01	(G14)
		A private business,		•
		A school or college		,
		Some other type of place		()
		DON'T KNOW		(NEXT PROVIDER OR G15)
		REFUSED		
*Note: G13=4	4 is a new category added	d at R2; value of "other" category (G13		,
(G10=01 and	I G13=03)			
G13_oth.	3 3 10 - 00)			
	ERVIEWER: PLEASE SP	ECIFY		
<of< td=""><td>PEN></td><td></td><td></td><td>(NEXT PROVIDER OR G15)</td></of<>	PEN>			(NEXT PROVIDER OR G15)
		DON'T KNOW		
		REFUSED	r	(NEXT PROVIDER OR G15)

(G10=01 and G13=01) G14. Was this place a: A vocational rehabilitation agency,...... 01 (NEXT PROVIDER OR G15) Some other state agency, or 04 DON'T KNOW...... d (NEXT PROVIDER OR G15) REFUSED...... r (NEXT PROVIDER OR G15) (G10=01 and G13=01 and G14=04) G14_oth. INTERVIEWER: PLEASE SPECIFY <OPEN> (NEXT PROVIDER OR G15) DON'T KNOW...... d NEXT PROVIDER OR G15) REFUSED......r (NEXT PROVIDER OR G15) (All) G15. PROGRAMMER: USE LANGUAGE BELOW IF {NAME} IS NOT IN LONGITUDINAL SAMPLE FROM ROUND 1 (S2=01,03) Sometimes people with disabilities receive medical services to improve their ability to work or help them live independently. Some examples of these services are physical therapy, surgery, and help getting special equipment or devices. (IF DISABLED BEFORE AGE 16 (B18_AGE < 16 OR IF BIRTHYEAR - B18_YEAR <16)) Since age 16, {have you/has NAME} received any medical services to improve {your /his/her} ability to work or live independently? (IF DISABLED AT AGE 16 OR LATER (B18 AGE ≥ 16 OR IF BIRTHYEAR - B18 YEAR ≥ 16)) Since becoming disabled, {have you/has NAME} received any medical services to improve {your/his/her} ability to work or live independently? PROBE: Please do not include places you already told me about. PROGRAMMER: USE LANGUAGE BELOW IF {NAME} IS IN LONGITUDINAL SAMPLE FROM ROUND 1 (S2=02)

PROBE: Please do not include places you already told me about.

YES	01	
NO	00	(G19)
DON'T KNOW	d	(G19)
REFUSED	r	(G19)

Sometimes people with disabilities receive medical services to improve their ability to work or help them live independently.

Some examples of these services are physical therapy, surgery, and help getting special equipment or devices. In 2004, did {you/NAME} receive any medical services to improve {your/his/her} ability to work or live independently?

G15=01)

G16. What was the name of the place {you/NAME} went to for those medical services?

PROBE: Please do not include any places you already told me about.

PROGRAMMER: DISPLAY Anyplace else? ON SCREEN FOR PROVIDERS 2 THROUGH 8

INTERVIEWER: PRESS 'ENTER' FOR NO OTHER PLACE

PROBE 1: IF RESPONDENT DOESN'T KNOW NAME: I need to enter something that will help identify the place {you/NAME} received these services from in later questions. What could I enter to help us identify this place later? Street name, address, person spoken with there, even the color of the building would help identify it.

PROBE 2: (IF (S2=01,03 AND E36=01) OR (IF S2=02 and E37a=01 or E37b=01 or E37=01)):

This includes services {you/NAME} received from an Employment Network.

PROVIDER 1 < STRING=	240>		
PROVIDER 2 < STRING=	=240>		
PROVIDER 3 < STRING=	=240>		
PROVIDER 4 < STRING=	=240>		
PROVIDER 5 < STRING=	=240>		
	=240>		
	=240>		
PROVIDER 8 < STRING=	=240>		
REFUSED		r	
PROGRAMMER: FOR EACH PROVIDER L (G15=01)	ISTED IN G16 DISPLAY G17.		
	NDENT ALREADY MENTIONED (PROVIDER	LIS	TED IN G16\?
	PROVIDERS ALREADY MENTIONED IS BLAN		
_	READY MENTIONED INCLUDE (DISPLAY PRO	OVIE	DERS FROM G2 AND G11}:
	YESMENTION)	01	(PROGRAMMER: DELETE ONE
	NO	00	(NEXT PROVIDER OR KindPlace)
PROGRAMMER: ASK KINDPLACE FOR EA			
KindPlace. Thinking about {NEW PROVIDE	R FROM G16}, was this place:		
	A clinic,	01	(NEXT PROVIDER OR G19)
	A hospital	02	(NEXT PROVIDER OR G19)
	A doctor's office, or	03	(NEXT PROVIDER OR G19)
	Some other type of place?	04	
	DON'T KNOW	d	(NEXT PROVIDER OR G19)
	REFUSED	r	(NEXT PROVIDER OR G19)
(G15=01 and KindPlace=04)			
OtherSpecify. INTERVIEWER: PLEASE SP	ECIFY		
<open></open>			(NEXT PROVIDER OR G19)
	DON'T KNOW		
	REFUSED	r	(NEXT PROVIDER OR G19)

(All)

G19. PROGRAMMER: USE LANGUAGE BELOW IF {NAME} IS <u>NOT</u> IN LONGITUDINAL SAMPLE FROM ROUND 1 (S2=01,03) Sometimes people go to a mental health professional to get therapy or counseling to improve their ability to work or live independently.

(IF DISABLED BEFORE AGE 16 (B18_AGE < 16 OR IF BIRTHYEAR – B18_YEAR <16)) Since age 16, {have you/has NAME} received mental health therapy or counseling to improve {your/his/her} ability to work or live independently? This could include treatment for alcohol or drug abuse.

(IF DISABLED AT AGE 16 OR LATER (B18_AGE ≥ 16 OR IF BIRTHYEAR - B18_YEAR ≥ 16)) Since becoming disabled, {have you/has NAME} received mental health therapy or counseling to improve {your/his/her} ability to work or live independently? This could include treatment for alcohol or drug abuse.

PROBE: Please do not include places you already told me about.

PROGRAMMER: USE LANGUAGE BELOW IF {NAME} IS IN LONGITUDINAL SAMPLE FROM ROUND 1 (S2=02):

Sometimes people go to a mental health professional to get therapy or counseling to improve their ability to work or live independently.

In 2004, did {you/NAME} receive mental health therapy or counseling to improve {your/his/her} ability to work or live independently? This could include treatment for alcohol or drug abuse.

PROBE: Please do not include places you already told me about.

YES	01	
NO	00	(G23)
DON'T KNOW	d	(G23)
REFUSED	r	(G23)

(G19=01)

G20. What was the name of the place {you/NAME} went to for therapy or counseling? PROBE: Please do not include any places you already told me about.

PROGRAMMER: DISPLAY Anyplace else? ON SCREEN FOR PROVIDERS 2 THROUGH 8

INTERVIEWER: PRESS 'ENTER' FOR NO OTHER PLACE

PROBE 1: IF RESPONDENT DOESN'T KNOW NAME: I need to enter something that will help identify the place {you/NAME} received these services from in later questions. What could I enter to help us identify this place later? Street name, address, person spoken with there, even the color of the building would help identify it.

PROBE 2: (IF (S2=01,03 AND E36=01) OR (IF S2=02 and E37a=01 or E37b=01 or E37=01)):

This includes services {you/NAME} received from an Employment Network.

PROVIDER 1 <string=240> _</string=240>	
PROVIDER 5 < STRING=240>	
PROVIDER 6 < STRING=240>	
PROVIDER 7 < STRING=240>	
PROVIDER 8 < STRING=240>	
REFUSED	

PROGRAMMER: FOR EACH PROVIDER LISTED IN G20 DISPLAY G21. (G19=01)G21. INTERVIEWER: HAS THE RESPONDENT ALREADY MENTIONED {PROVIDER LISTED IN G11}? INTERVIEWER: IF THE LIST OF PROVIDERS ALREADY MENTIONED IS BLANK, NO PROVIDERS HAVE BEEN MENTIONED YET. INTERVIEWER: PROVIDERS ALREADY MENTIONED INCLUDE (DISPLAY PROVIDERS FROM G2, G11, AND G16): YES...... 01 (PROGRAMMER: DELETE ONE PROGRAMMER: ASK KINDPLACE FOR EACH NEW PROVIDER LISTED IN G20. (G19=01)KindPlace. Thinking about {NEW PROVIDER FROM G20}, was this place: DON'T KNOW...... d (NEXT PROVIDER OR G23) REFUSED...... r (NEXT PROVIDER OR G23) (G19=01 and KindPlace=05) OtherSpecify. INTERVIEWER: PLEASE SPECIFY <OPEN> (NEXT PROVIDER OR G23) DON'T KNOW d (NEXT PROVIDER OR G23) REFUSED......r (NEXT PROVIDER OR G23)

(All)

G23. PROGRAMMER: USE LANGUAGE BELOW IF {NAME} IS <u>NOT</u> IN LONGITUDINAL SAMPLE FROM ROUND 1 (S2=01,03) (IF DISABLED BEFORE AGE 16 (B18_AGE < 16 OR IF BIRTHYEAR – B18_YEAR <16)) Since age 16, {have you/has NAME} enrolled in school or taken any classes to help {you/him/her} get a new job or change careers? Please do not include any training you have already told me about.

(IF DISABLED AT AGE 16 OR LATER (B18_AGE \geq 16 OR IF BIRTHYEAR - B18_YEAR \geq 16)) Since becoming disabled, {have you/has NAME} enrolled in school or taken any classes to help {you/him/her} get a new job or change careers? Please do not include any training you have already told me about.

- PROBE 1: This could include vocational training in high school, college classes, or other instructional programs.
- PROBE 2: Please don't include places you already told me about.

PROGRAMMER: USE LANGUAGE BELOW IF {NAME} IS IN LONGITUDINAL SAMPLE FROM ROUND 1 (S2=02): In 2004, did {you/NAME} enroll in school or take any classes to help {you/him/her} get a new job or change careers? Please do not include any training you have already told me about.

PROBE 1: This could include vocational training in high school, college classes, or other instructional programs.

PROBE 2: Please don't include places you already told me about.

YES	01	
NO	00	(G29a)
DON'T KNOW	d	(G29a)
REFUSED	r	(G29a)

(G23=01)

G24. Where did {you/NAME} enroll in school or take classes?

PROBE: Please do not include any places you already told me about.

PROGRAMMER: DISPLAY Anyplace else? ON SCREEN FOR PROVIDERS 2 THROUGH 8

INTERVIEWER: PRESS 'ENTER' FOR NO OTHER PLACE

PROBE 1: IF RESPONDENT DOESN'T KNOW NAME: I need to enter something that will help identify the place {you/NAME} received these services from in later questions. What could I enter to help us identify this place later? Street name, address, person spoken with there, even the color of the building would help identify it.

PROBE 2: (IF (S2=01,03 AND E36=01) OR (IF S2=02 and E37a=01 or E37b=01 or E37=01)):

This includes services {you/NAME} received from an Employment Network.

	PROVIDER 2 < STRING= PROVIDER 3 < STRING= PROVIDER 4 < STRING= PROVIDER 5 < STRING= PROVIDER 6 < STRING= PROVIDER 7 < STRING= PROVIDER 8 < STRING=	240>	r	
PROGRAMMEI (G23=01)	R: FOR EACH PROVIDER L	ISTED IN G24 DISPLAY G25.		
G25. INTER INTER MENT	RVIEWER: IF THE LIST OF F TONED YET.	ONDENT ALREADY MENTIONED {PROVIDER PROVIDERS ALREADY MENTIONED IS BLAN READY MENTIONED INCLUDE {DISPLAY PRO	IK, N	IO PROVIDERS HAVE BEEN
		YES MENTION) NO		
			00	(NEXT FROVIDER OR G20)
(G10=01 or G2				
G26. {Are ye	ou/Is NAME} <u>currently</u> enroll	ed in school or taking any classes?		
		YES NO	00 d	(G29a)
(G10=01 or G2	3=01 and G26=01)			
G27. {Are ye	ou/Is NAME} working toward	a degree, a certificate or license, or {are you/is	(he	/she)} just taking classes?
		WORKING TOWARD DEGREE WORKING TOWARD CERTIFICATE/		
		ONLY TAKING CLASSES	03	` ,
		DON'T KNOW		

(G10=01 or G23=01 and G26=01 and G27=01,02)

G28. PROGRAMMER: IF G27=01 USE "DEGREE" AND IF G27=02 USE "CERTIFICATE OR LICENSE" Toward what type of {degree/certificate or license} {are you/is NAME} working?

INTERVIEWER: CODE C	ONE	ONLY.
---------------------	-----	-------

		/ALENCE PROGRAM/COURSES		(G29)
	ASSOCIATE DEGREE PROGRAUNDERGRADUATE DEGREE PROGRAOTHER	AM (AA DEGREE) PROGRAM (BA, BS DEGREE) AM (e.g., MA, MS, MD, EdD)	03 04 05 06 d	(G29) (G29) (G28f_oth) (G29)
G28b_oth.	G23=01 and G26=01 and G27=01,02	and G28=02)		
<0	PEN>			(G29)
		T KNOW		, ,
G28f_oth.	G23=01 and G26=01 and G27=01,02			
<0	PEN>			
	= * · ·	T KNOW		
•	G23=01 and G26=01 and G27=01 or (re you/Is NAME} a full-time or part-time	•		
	PAR* DON	-TIME I-TIME IT KNOW JSED	02 d	
DE-DUPLIC	ATION OF THE LIST OF PROVIDERS	S		
(All) G29a. CH	HECK: DID {NAME} RECEIVE ANY SE	RVICES (G1=1 OR G10=1 OR G15=1 C)R G	19=1)?
	YES.		01	

2/28/2012 G-10 ROUND 2 VERSION

NO 02 (G48)

(G29a=01)

G30_1.

PROGRAMMER: LIST PROVIDERS FROM G2, G11, G16, AND G20.

INTERVIEWER: IF A PROVIDER APPEARS ON THE LIST BELOW MORE THAN ONCE, ENTER THE NUMBER IN FRONT OF <u>ONE</u> OF THE PROVIDER NAMES TO DELETE IT FROM THE LIST. DO NOT MARK BOTH PROVIDER NAMES AS DUPLICATES.

INTERVIEWER: ONCE A PROVIDER NAME HAS BEEN DELETED, IT WILL APPEAR IN TEAL.

NONE/DONE 00

(G29a=01)

G30_1. You said {you/NAME} received employment, medical, and therapy services from {LIST BELOW}. I want to be sure that each service provider is listed only once. Are any of these providers the same?

INTERVIEWER: IF A PROVIDER APPEARS ON THE LIST BELOW MORE THAN ONCE, ENTER THE NUMBER IN FRONT OF <u>ONE</u> OF THE PROVIDER NAMES TO DELETE IT FROM THE LIST. DO NOT MARK BOTH PROVIDER NAMES AS DUPLICATES.

INTERVIEWER: ONCE A PROVIDER NAME HAS BEEN DELETED, IT WILL APPEAR IN TEAL.

NONE/DONE 00

PROGRAMMER: IF ALL PROVIDERS DELETED, DISPLAY, YOU HAVE DELETED ALL PROVIDERS. RETURN TO G30 AND DELTE DUPLICATES ONLY.

ONCE YOU HAVE SELECTED THE APPROPRIATE PROVIDER FOR DELETION (OR SELECTED 'NONE/DONE') SUPPRESS THE SECOND ERROR MESSAGE TO CONTINUE.

WHEN SERVICES RECEIVED

PROGRAMMER: IF {NAME} IS IN LONGITUDINAL SAMPLE FROM ROUND 1 (S2=02), SKIP QUESTIONS G33_BASE THROUGH G35

S2=01,03 and (G29a=01)

G33_base. Next, I would like to know when {you/NAME} last received services from the places I just read and more about the kinds of services {you/he/she} received from those places.

INTERVIEWER: PRESS 1 TO CONTINUE 01

PROGRAMMER: IF {NAME} IS NOT IN LONGITUDINAL SAMPLE FROM ROUND 1 (S2=01,03), ASK G33 THROUGH G35 FOR EACH PLACE LISTED IN G30_1 AFTER DE-DUPLICATION.

S2=01,03 and (G29a=01)

G33. PROBE: Next, I would like to know when {you/NAME} last received services from the places I just read and more about the kinds of services {you/he/she} received from those places.

Think about all the services {you/NAME} received from {PROVIDER FROM G30_1 DE-DUPLICATED LIST}. In what year did {you/he/she} <u>last</u> receive services from {PROVIDER FROM G30_1 DE-DUPLICATED LIST}? Was it in 2005, in 2004, or before 2004?

IN 2005	01	(NEXT PROVIDER OR G35)
IN 2004	02	(NEXT PROVIDER OR G36)
BEFORE 2004	03	(NEXT PROVIDER OR G48)
DON'T KNOW	d	
DEELIGED	r	

G34. Was it:

Within the last 2 years	01	
2 to 5 years ago,	02	(NEXT PROVIDER OR G48)
5 to 10 years ago, or	03	(NEXT PROVIDER OR G48)
More than 10 years ago?	04	(NEXT PROVIDER OR G48)
DON'T KNOW	d	(NEXT PROVIDER OR G48)
REFUSED	r	(NEXT PROVIDER OR G48)

S2=01,03 and (G29a=01 and G33=01,d,r and G34=01)

G35. Did {you/NAME} receive services from {PROVIDER FROM G30_1 DE-DUPLICATED LIST} at any time in 2004?

YES	01	(NEXT PROVIDER OR G35a)
NO	00	(NEXT PROVIDER OR G48)
DON'T KNOW	d	(NEXT PROVIDER OR G48)
REFUSED	r	(NEXT PROVIDER OR G48)

SPECIFIC SERVICES RECEIVED FROM PROVIDERS AND SERVICE-RELATED EXPERIENCES IN 2004

(G29a=01 and G33=01,d,r and G34=01 and G35=01)

G35a. CHECK: DID {NAME} RECEIVE SERVICES FROM ANY PROVIDER IN 2004 (S2=01,03 AND G33=02 OR G35=01) OR (S2=02 AND DE-DUPLICATED PROVIDERS LISTED IN G30_1) FOR ANY PROVIDER IN DE-DUPLICATED LIST?

YES	01	
NO	00	(G48)

PROGRAMMER: ASK G36 THROUGH G47 FOR EACH PROVIDER LISTED IN G30_1 (AFTER DE-DUPLICATION) IF USED IN 2004 (S2=01,03 AND G33=02 OR G35=01) OR (S2=02 AND DE-DUPLICATED PROVIDERS LISTED IN G30_1)

(G35a=01 or G33=02)

G36. In 2004, please tell me if {you/NAME} received any of the following services from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2004}. Did {you/he/she} receive:

PROBE: from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2004 for G36_a thru G36_m}.

					DON'T	
		<u>YES</u>	NO.	NA	KNOW	REFUSED
a.	Physical therapy?	01	00	02	d	r (G37)
b.	Occupational therapy?	01	00	02	d	r (G37)
	PROBE: Occupation therapy is treatment that helps people achieve					
	independence in all areas of their lives and can include home and job					
	site evaluations, skills assessments, equipment recommendations,					
	and other treatment to help improve a person's ability to perform daily					
	activities.					
c.	Speech therapy?	01	00	02	d	r (G37)
e.	Special equipment or devices?	01	00	02	d	r (G37)
f.	Personal counseling or therapy?	01	00	02	d	r (G37)
g.	Group therapy?	01	00	02	d	r (G37)
d.	Medical services?	01	00	02	d	r (G37)*
h.	A work or job assessment?	01	00	02	d	r (G37)
i.	Help to find a job?	01	00	02	d	r (G37)
j.	Training to learn a new job or skill?	01	00	02	d	r (G37)
k.	Advice about modifying {your/his/her} job or work place?	01	00	02	d	r (G37)
l.	On-the-job training, job coaching, or support services?	01	00	02	d	r (G37)
m.	Anything else that I didn't mention?	01	00	02	d	r (G36m_oth)

*Note: G36d moved to after G36g at R2.

(G35a=	=01 or G33=02 and G36e=01)			
G36e_				
	INTERVIEWER: PLEASE SPECI	FY		
	<open></open>			
		DON'T KNOWREFUSED		
		REFUSED	ı	
(G35a=	=01 or G33=02 and G36m=01)			
G36m_				
	INTERVIEWER: PLEASE SPECI	FY		
	<open></open>			
		DON'T KNOW	d	
		REFUSED		
			•	
(G35a=	=01 or G33=02)			
G37.		u/NAME} receive these services from {PROVID		
	USED IN 2004}? You can tell me	e either the total number of times in 2004 or the to	tal number of times per week or per mo	nth.
	PROBE: How many times did {yo	u/NAME} go to the place or have contact with the	service provider in 2004?	
		TOTAL TIMES IN 2004	01 (G37 T2004)	
		TIMES PER WEEK		
		TIMES PER MONTH		
		DON'T KNOW		
		REFUSED	r (G39)	
(G35a= G37_T	=01 or G33=02 and G37=01) 2004.			
	PROBE: READ IF NECESSARY: 2004?	How many times did {you/NAME} go to the place	e or have contact with the service provi	der iı
		 (1-99) (1-999)		
		DON'T KNOW	d	
		REFUSED		
		GO TO G39		
(C35a-	=01 or G33=02 and G37=02)			
G37_T	•			
	PROBE: READ IF NECESSARY per week?	: How many times did {you/NAME} go to the pla	ce or have contact with the service pro	vide
		1 1 1 1		
		 (1.7) (1.00)		
		(1-7) (1-99)		
		DON'T KNOW	d	
		REFUSED		

(G35a=01 or G33=02 and G37=02) G38_week. In 2004, about how many weeks did {you/NAME} get these services? |__|_| WEEKS (1-52)DON'T KNOW...... d REFUSED..... **GO TO G39** (G35a=01 or G33=02 and G37=03) G37_Tmonth. PROBE: READ IF NECESSARY: How many times did {you/NAME} go to the place or have contact with the service provider per month? (1-31) (1-99) DON'T KNOW...... d REFUSED.....r (G35a=01 or G33=02 and G37=03) G38_month. In 2004, about how many months did {you/NAME} get these services? |__|_| MONTHS (1-12)DON'T KNOW...... d REFUSED.....r (G35a=01 or G33=02) About how long did each service session with {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2004} last? G39. MINUTES...... 01 (G39_min) HOURS...... 02 (G39 hr) DON'T KNOW...... d (G40) REFUSED.....r (G40) (G35a=01 or G33=02 and G39=01) G39 min. INTERVIEWER: ENTER NUMBER OF MINUTES. |__|_| (1-59) (1-240) DON'T KNOW...... d REFUSED.....r

GO TO G40

(G35a=0	01 or G33=02 and G39=02)		
G39_hr.	INTERVIEWER: ENTER NUMBER	OF HOURS.	
		(1-5) (1-24)	
		DON'T KNOW	
		GO TO G40	
•	01 or G33=02 and G39=03) y. INTERVIEWER: ENTER NUMBE	R OF DAYS	
G55_ua	y. INTERVIEWER. ENTER NOWIDE	KOI DATS.	
		(1-3) (1-90)	
		DON'T KNOW	
		REFUSED	r
	01 or G33=02) How useful to {you/NAME} were to 2004}? Would you say they were:	the services provided by {PROVIDER FROM (G30_1 DE-DUPLICATED LIST IF USED IN
		Very useful,	01
		Somewhat useful,	02
		Not very useful, or	03
		Not at all useful?	04
		DON'T KNOW	
		NEI OGED	'
(G35a=0 G41.	01 or G33=02) CHECK: WAS {NAME} A TICKET	PARTICIPANT IN 2004 (E37=01) OR (IF S2=02	2 AND EN2004=01)?
		YES	01
		NO	
(G35a=0 G42.	01 or G33=02 and G41=01) CHECK: IS THE INTERVIEWER A ROUND1 EN FROM R1 E39 OR F	ALREADY ASKING ABOUT AN EMPLOYMEN ROUND1 EN FROM R1 E46)?	T NETWORK USED IN 2004 (SEE E39 OR
		YES	
		NO	00
(G35a=0 G43.	E37a=01 and E37b=01) OR (IF S2 Did {you/NAME} receive any of the	ONE EMPLOYMENT NETWORK IN 2004 ((I	DE-DUPLICATED LIST IF USED IN 2004}
	DDOOD ANAMED, OTHERWISE US		
		SE lese services from {PROVIDER FROM G30_1 et was assigned to {EMPLOYMENT NETWORI	

2/28/2012 G-15 ROUND 2 VERSION

E39 OR ROUND1 EN FROM R1 E46)}?

(G35a=01 or G33=02 and G41=01 and G42=00)

G44. PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2004 ((IF S2=01,03 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1))

Employment Networks often arrange services with other providers. In 2004, did any of {your/NAME's} Employment Networks arrange for any of the services {you/he/she} received from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2004}?

PROGRAMMER: OTHERWISE USE

Employment Networks often arrange services with other providers. In 2004, did {EMPLOYMENT NETWORK IN 2004 (E39 OR ROUND1 EN FROM R1 E39 OR ROUND1 EN FROM R1 E46)} arrange for any of the services {you/NAME} received from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2004}?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

PAYMENT FOR SERVICES

(G35a=01 or G33=02)

G45. In 2004, who paid for the services {you/NAME} received from {PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2004}?

PROBE: Anybody else?

INTERVIEWER: CODE ALL THAT APPLY.

{NAME}	01	G47)
{PROVIDER FROM G30_1 DE-DUPLICATED LIST IF USED IN 2004} \dots		
NO ONE		
FAMILY	04	(G47)
HEALTH INSURANCE/OTHER INSURANCE		
EMPLOYMENT NETWORK		
MEDICARE	07	(G46)
MEDICAID	80	(G46)
EMPLOYER	09	(G46)
NON-PROFIT ORGANIZATION SERVING PEOPLE WITH		
DISABLITIES	10	(G46)
WORKER'S COMPENSATION		
DISABILITY INSURANCE	12	(G46)
OTHER	13	
DON'T KNOW	d	
REFUSED	r	

(G35a=01 or G33=02 and G45=13) G45_oth.

INTERVIEWER: PLEASE SPECIFY

<OPEN> _____

DON'T KNOW	C
REFUSED	-

2/28/2012 G-16 ROUND 2 VERSION

(G35a= G46.		3,d,r) or (his/her)} family have to pay for any part of th DE-DUPLICATED LIST IF USED IN 2004}?	ne cost of the services {you/he/she} received
		YES	01
		NO	
		DON'T KNOW	,
		REFUSED	r
(G35a= G47.	=01 or G33=02 and G46=01,d,r) About how much did {you or your/	NAME or (his/her)} family have to pay in 2004?	Your best estimate is fine.
	INTERVIEWER: ROUND TO NEA	REST DOLLAR.	
		PER WEEK	01 (G47 wook)
		PER MONTH	
		PER YEAR	
		DON'T KNOW	
		REFUSED	•
•	=01 or G33=02 and G46=01,d,r and	G47=01)	
G47_w	reek. INTERVIEWER: ROUND TO NEA INTERVIEWER: ENTER AMOUN		
		\$, . 00 (1–300) (1-999	9)
		DON'T KNOWREFUSED	
		GO TO G48	
(G35a=	=01 or G33=02 and G46=01,d,r and nonth.	G47=02)	
_	INTERVIEWER: ROUND TO NEA INTERVIEWER: ENTER AMOUN		
		\$, . 00 (1-1,200) (1-1,200)	-9,900)
		DON'T KNOWREFUSED	-
		GO TO G48	
-	=01 or G33=02 and G46=01,d,r and ear. INTERVIEWER: ROUND TO NI INTERVIEWER: ENTER AMOL	EAREST DOLLAR.	
		\$, . 00 (1-14,400) (1-99,000)
		DON'T KNOW	
		REFUSED	r
(AII) G48.	CHECK: WAS {NAME} A TICKET	PARTICIPANT IN 2004 (E37=01) OR (IF S2=0	2 AND EN2004=01)?
		YES	01
		NO	
		_	- · · · · · · · · · · · · · · · · · · ·

MONEY RECEIVED FROM EMPLOYMENT NETWORK IN 2004

(G48=01)

G49. PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2004 ((IF S2=01,03 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1))

In 2004, did any Employment Network give {you/NAME} money to use for any reason?

PROGRAMMER: OTHERWISE USE

In 2004, did {EMPLOYMENT NETWORK IN 2004 (E39 OR ROUND1 EN FROM R1 E39 OR ROUND1 EN FROM R1 E46)} give {you/NAME} money to use for any reason?

PROBE: This includes money to purchase services, equipment, or use in any other way.

YES	01	
NO	00	(G52)
DON'T KNOW	d	(G52)
REFUSED	r	(G52)

(G48=01 and G49=01)

G50. PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2004 ((IF S2=01,03 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1))

In 2004, how much money did {you/NAME} receive from all Employment Networks?

PROGRAMMER: OTHERWISE USE

In 2004, how much money did {you/NAME} receive from {EMPLOYMENT NETWORK IN 2004 (E39 OR ROUND1 EN FROM R1 E39 OR ROUND1 EN FROM R1 E46)}?

PROBE 1: You can tell me the total amount per week or per month.

PROBE 2: Your best estimate is fine.

INTERVIEWER: ROUND TO NEAREST DOLLAR

TOTAL AMOUNT IN 2004	01	(G50_T2004)
PER WEEK	02	(G50_Tweek)
PER MONTH	03	(G50_Tmonth)
DON'T KNOW	d	(G52)
REFUSED	r	(G52)

(G48=01 and G49=01 and G50=01) G50_T2004.

PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2004 ((IF S2=01,03 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1))

PROBE: READ IF NECESSARY In 2004, how much money did {you/NAME} receive from all Employment Networks?

PROGRAMMER: OTHERWISE USE

PROBE: READ IF NECESSARY In 2004, how much money did {you/NAME} receive from {EMPLOYMENT NETWORK IN 2004 (E39 OR ROUND1 EN FROM R1 E39 OR ROUND1 EN FROM R1 E46)}?

\$ _, , .00	(1-3,500) (1-20,000) (G52)
DON'T KNOW	d (G52)
REFUSED	r (G52)

2/28/2012 G-18 ROUND 2 VERSION

(G48=01 and G49=01 and G50=02) G50_Tweek.

PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2004 ((IF S2=01,03 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1))

PROBE: READ IF NECESSARY In 2004, how much money did {you/NAME} receive from all Employment Networks per week?

PROGRAMMER: OTHERWISE USE

PROBE: READ IF NECESSARY In 2004, how much money did {you/NAME} receive from {EMPLOYMENT NETWORK IN 2004 (E39 OR ROUND1 EN FROM R1 E39 OR ROUND1 EN FROM R1 E46)} per week?

\$ _, , _ .00 (1-65	5) (1-385)	(G5	1_weeks)
DON'T KNOW		. d	(G52)	
REFUSED		. r	(G52)	

(G48=01 and G49=01 and G50=02 and G50_Tweek \neq d,r) G51_weeks.

PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2004 ((IF S2=01,03 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1))

How many weeks in 2004 {did you/did NAME} receive this money from {your/his/her} Employment Networks?

PROGRAMMER: OTHERWISE USE

About how many weeks in 2004 did {you/NAME} receive this money from {{EMPLOYMENT NETWORK IN 2004 (E39 OR ROUND1 EN FROM R1 E39 OR ROUND1 EN FROM R1 E46)} in 2004?

(G48=01 and G49=01 and G50=03) G50_Tmonth.

PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2004 ((IF S2=01,03 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1))

PROBE: READ IF NECESSARY In 2004, how much money did {you/NAME} receive from all Employment Networks per month?

PROGRAMMER: OTHERWISE USE

PROBE: READ IF NECESSARY In 2004, how much money did {you/NAME} receive from {EMPLOYMENT NETWORK IN 2004 (E39 OR ROUND1 EN FROM R1 E39 OR ROUND1 EN FROM R1 E46)} per month?

\$ _, _, .00 (1-300) (1-1,700) ((G51_months)
DON'T KNOW	d	(G52)
REFUSED	r	(G52)

(G48=01 and G49=01 and G50=03 and G50_Tmonth \neq d,r) G51_months.

PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK IN 2004 ((IF S2=01,03 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1))

How many months in 2004 (did you/did NAME) receive this money from (your/his/her) Employment Networks?

PROGRAMMER: OTHERWISE USE

About how many months in 2004 did {you/NAME} receive this money from{{EMPLOYMENT NETWORK IN 2004 (E39 OR ROUND1 EN FROM R1 E39 OR ROUND1 EN FROM R1 E46)} in 2004?

|__|_ | MONTHS
(1-12)

DON'T KNOW....... d
REFUSED...... r

WHY USED SERVICES IN 2004

(All)

G52. CHECK: DID {NAME} USE ANY SERVICES IN 2004 (G33=02 OR G35=01 FOR ANY PROVIDER IN DE-DUPLICATED LIST USED IN 2004)?

(G52=01)

G53. The next few questions are about why {you/NAME} decided to use the employment, medical, or therapy services {you/he/she} used in 2004.

Thinking only about the services {you/NAME} used in 2004, what are the main reasons {you/he/she} decided to use these services?

INTERVIEWER: CODE ALL THAT APPLY.

TO FIND A JOB/GET A BETTER JOB	01	(G54)
TO INCREASE INCOME	02	(G54)
TO IMPROVE HEALTH/ WELL BEING	03	(G54)
TO IMPROVE ABILITY TO DO DAILY ACTIVITIES	04	(G54)
TO AVOID A CONTINUING DISABILITY REVIEW	05	(G54)
SOMEONE PRESSURED {NAME} TO PARTICIPATE	06	(G55)
WANTED ACCESS TO A SPECIFIC PROGRAM/SERVICE/		
RESOURCE	07	(G54)
OTHER	80	
TO BE MORE INDEPENDENT		(G54)
DON'T KNOW	d	(G54)
REFUSED	r	(G54)

(G52=01 and G53=08)

G53h_oth.

INTERVIEWER: PLEASE SPECIFY

<OPEN)_____

DON'T KNOW d
REFUSED r

(G52=0)	01 and G53=01-05,07,08,d,r)			
G54.	Did anybody pressure {you/NAME} to use	any services when {you/NAME} did not v	wan	t to?
	_		-	
	NO		00	(G58)
	DON'	T KNOW	d	(G58)
	REFL	JSED	r	(G58)
-	01 and G54=01)			
G55.	Who pressured {you/NAME} to use these	services?		
	INTERVIEWER: CODE ALL THAT APPLY	۲.		
	PARENT/GUARDIAN		01	(G56)
				, ,
				, ,
				` '
				, ,
		MADK		` '
		WORK		,
		N CASE MANAGER		,
				,
				, ,
				,
				(G56)
	OTHER		12	
	DON'T KNOW		d	(G56)
	REFUSED		r	(G56)
(G52=0)	01 and G54=01 and G55=12)			
G55_ot	:h.			
	INTERVIEWER: PLEASE SPECIFY			
	<open></open>			
	DON'	T KNOW	d	
	REFL	JSED	r	
	NEI C		•	
(G52=0	01 and G54=01)			
G56.	How did {your/NAME's} {FILL PERSON(S) FROM G55} pressure {you/him/her} to	use	these services'
	PROBE: What did they say or do that mad	de {you/NAME} feel pressured?		
	INTERVIEWED CORE ALL THAT ARRIVA	,		
	INTERVIEWER: CODE ALL THAT APPLY	۲.		
	SAID {NAME} WOULD LOSE DI			
	INSURANCE BENEFITS		01	(G57)
	ENCOURAGED/WOULD NOT T	AKE "NO" FOR AN ANSWER	02	(G57)
	THREATENED TO WITHHOLD	SERVICES	03	(G57)
	THREATENED TO TAKE AWAY			•
		JSE)	04	(G57)
				v /
	DON'T KNOW		h	(G57)
	30_0			(00.)

-	1 and G54=01 and G56=05)			
G56_oth	ո. INTERVIEWER: PLEASE SPECIF	Υ		
	<open></open>			
		DON'T KNOW		
(G52=0 ⁻ G57.		ed these services, listen to this statement and tured to use these services was in {my/NAME's}		
	INTERVIEWER: READ IF NECES	SARY.		
		STRONGLY AGREE	02 03 04 d	
INFORM	MATION ABOUT SERVICES IN 200	4		
(AII) G58.	Now I want to ask you about how and did not use.	easy it is to get information about services. The	his iı	ncludes both services {you/NAME} used
	Thinking only about 2004, did {youservices to help {you/NAME} work	ou/NAME} or {your/his/her} representative con or live independently?	itact	anyone to try to get information about
		YES NO	00 d	(G60)
(G58=0 ⁻ G59.	,	ou/NAME} or {your/his/her} representative to	get 1	the information {you/they} wanted about
		Very easy, Somewhat easy, Not very easy, or Not at all easy? DON'T KNOW	02 03 04 d	
SERVIC	ES NEEDED BUT NOT RECEIVE) IN 2004		
(All) G60.	In 2004, were there any services, improved {your/his/her} ability to w	equipment, or other supports that {you/NAME} ork or live independently?	nee	eded but did not receive that would have
		YES NO DON'T KNOW	00 d	(G62)

G60=0 361.	Why {were you/was NAME} unable	to get these services?	
	<open></open>		
		DON'T KNOW	
AII) 962.	CHECK: WAS {NAME} A TICKET F	PARTICIPANT IN 2004 (E37=01) OR (IF S2=02	? AND EN2004=01)?
		YES	,

SECTION H UNIVERSE: (E37=01) OR (IF S2=02 AND EN2004=01 AND (E21=01 OR E24=01 OR E25=01))
VARIABLES NEEDED FROM OTHER SECTIONS: RTYPE, B30, E37, E38, E39, E40mth, E40yr, E42mth, E42yr
PRELOADED VARIABLES: VRNAME, IDATE, LOCALPAA, S2, ROUND1 E39, ROUND1 E40MTH, ROUND1 E40YR, ROUND1 E42MTH, ROUND1 E42YR, ROUND1 E47MTH, ROUND1 E47YR

SECTION H: TICKET PARTICIPANTS IN 2004

(S2=0 ¹ H1.	CHECK: DID {NAME} STAR	nd E37a=01 or E37b=01 or E37=01) T PARTICIPATING IN TICKET TO WOI STARTED WITH AT LEAST ONE EN		/ EN IN E39) AND
		/ITH ANY EN BEFORE 2004 (E40_YR 00) OR (S2=02 AND R1E47YR=01 AND		NY EN IN E3)) OF
		YES		
(S2=0 ⁻ H2.	· · · · · · · · · · · · · · · · · · ·	nd E37a=01 or E37b=01 or E37=01) ar me questions about {your/NAME's} exp		/ork program.
		PRESS 1 TO CONTINUE	01	
PROG	RAM EXPERIENCES OF FIRS	T-TIME TICKET PARTICIPANTS IN 20	04	
S2=01 H3.	,03 and (E37=01 and H1=01) Why did {you/NAME} decide	to participate in the Ticket to Work prog	ram?	
	INTERVIEWER: ENTER VER	RBATIM RESPONSE		
	<open></open>			
		DON'T KNOWREFUSED		
S2=01 H4.	,03 and (E37=01 and H1=01) How soon after receiving {yo four weeks?	our/his/her} Ticket did {you/NAME} try t	o use it? Was it within four weeks of	receiving it or after
		WITHIN FOUR WEKS	01	
		AFTER FOUR WEEKS	, ,	
		DON'T KNOW REFUSED		
S2=01 H5.	,03 and (E37=01 and H1=01 ar	nd H4=01,d,r) d {your/his/her} Ticket, did {you/he/she	} put off getting any employment ser	vices because (vou
	,	use {your/his/her} Ticket to get employ	, , , , , , , , , , , , , , , , , , , 	<u></u>
		YES	01	
		NO	00	
		DON'T KNOW	d	
		REFUSED	r	
	,03 and (E37=01 and H1=01 ar	· ·	. "	
H6.	use {your/his/her} Ticket to h	{your/his/her} Ticket, did {you/he/she} pelp {you/him/her} get a job?	ut oil working because {you were/(he/s	site) was} waiting to
		YES	01	
		NO		
		DON'T KNOW		

2/28/2012 H-1 ROUND 2 VERSION

REFUSED.....r

S2=01,03 and (E37=01 and H1=01)

H7. Thinking only about <u>2004</u>, whom did {you/NAME or (his/her) representative} contact to get information about the Ticket to Work program?

Did (you/NAME or (his/her) representative) contact...

I	NTERVIEWER: REPEAT STEM AS N	ECESSARY				
					DON'T	
			YES	NO	KNOW	REFUSED
а	. The Social Security Administration	?	01	00		r (H8)
b			01	00	d	r (H8)
c	. The State Vocational Rehabilitation	n Agency or (VRNAME)?	01	00	d	r (H8)
C		e Organization (BPAO)?	01	00	d	r (H8)
e		?	01	00	d	r (H8)
f	•		01	00	d	r (H8)
ç	•		01	00	d	r (H8)
h			01	00	d	r
	. ,	re organizations or businesses that				
		disabilities work or earn more money				
		ram. Employment Networks can be				
	· · · · · · · · · · · · · · · · · · ·	the State Vocational Rehabilitation				
	Agency.					
i.			01	00	d	r (H7i_Other)
i.			01	00	d	r (H7i_Other)
١.	Autyone cloot		01	00	u	1 (1111_011101)
S2-01 03	and (E37=01 and H1=01 and H7h=01)				
	r. What Employment Network did you	•				
11/11_0010	1. What Employment Network did you	oomaot:				
<	OPEN>					
	DC	N'T KNOW	d			
	RE	FUSED	r			
S2=01,03	and (E37=01 and H1=01 and H7i=01)					
H7i_Othe	. What other Agency or Organization?					
<	OPEN>					
	DC	N'T KNOW	d			
	RE	FUSED	r			
S2=01,03	and (E37=01 and H1=01 and H7j=01)					
H7j_Othe	. Who else?					
<	OPEN>					
	DC	N'T KNOW	d			
	RE	FUSED	r			
S2=01,03	and (E37=01 and H1=01)					
H8. I	n general, how easy was it for {you/h	NAME or (his/her) representative} to go	et the info	ormation	{you/they}	wanted about the
Т	icket to Work program? Was it:					
		ry easy,				
		mewhat easy,				
		t very easy, or	03			
	NI.	t at all agov?	0.4			

 Not at all easy?
 04

 DON'T KNOW
 d

 REFUSED
 r

S2=01,03 and (E37=01 and H1=01)

H9. CHECK: IS {NAME} A PROXY RESPONDENT (RTYPE=02)?

YES	01	(H12)
NO	00	

DID NOT

S2=01,03 and (E37=01 and H1=01 and H9=00)

H10. Now I'm going to read you some statements about the Ticket to Work program. For each statement, please tell me if it is something you knew before today or not.

Is this something you knew before today or not?

			<u> 100 100 1</u>		
		KNEW	KNOW		
		BEFORE	BEFORE	DON'T	
		TODAY	TODAY	KNOW	REFUSED
a.	Participation in the Ticket to Work program is voluntary and you do not have to participate to keep your disability benefits.	01	00	d	r
b.	You can, during any month, take back your Ticket and give it to another Employment Network or participating provider.	01	00	d	r
C.	To remain in the program you must participate in the activities described in your individual work plan during the first few years, and work for 3 to 6 months each year during the later years of your participation.	01	00	d	r
d.	While you are working, you can keep your Medicaid and/or Medicare benefits.	01	00	d	r

S2=01,03 and (E37=01 and H1=01 and H9=00)

H11. Before you started participating, how much would you say you knew about the Ticket to Work program? Would you say:

A lot,	01
Some,	02
A little, or	03
Nothing?	04
DON'T KNOW	d
REFUSED	r

INFORMATION ABOUT EMPLOYMENT NETWORKS

S2=01,03 and (E37=01 and H1=01)

H12. Now, I'd like to ask you about Employment Networks. Employment Networks are organizations or business that offer services to help people with disabilities work or earn more money as part of the Ticket to Work Program.

<u>Before</u> {you/NAME or (his/her) representative} used {your/NAME's} Ticket in 2004, did {you/NAME or (his/her) representative} get any information about the Employment Networks that serve {your/NAME's} area?

PROBE: Employment Networks can be public or private and can include the State Vocational Rehabilitation Agency, or {VRNAME}.

YES	01	
NO	00	(H21)
DON'T KNOW	d	(H21)
REFUSED	r	(H21)

S2=01,03 and (E37=01 and H1=01 and H12=01) H13. Did {you/NAME or (his/her) representative} rece	eive information about Employment Ne	tworks in the mail?
	01	
	00	` '
	OW d	, ,
REFUSED	r	(H15)
C2 04 02 and /E27 04 and H4 04 and H42 04 and H4	2 04)	
S2=01,03 and (E37=01 and H1=01 and H12=01 and H1 H14. Who sent {you/NAME or (his/her) representativ	· · · · · · · · · · · · · · · · · · ·	Networks?
TITH. WITO SETT (YOUTWINE OF (HIS/HET) TOPICSETTALIN	of the information about Employment	votworks:
INTERVIEWER: CODE ALL THAT APPLY.		
SOCIAL SECURITY ADMINISTRATION	DN 01	(H15)
MAXIMUS	02	(H15)
STATE VOCATIONAL REHABILITATI	ON AGENCY or {VRNAME} 03	(H15)
A BENEFITS PLANNING AND ASSIS		,
(BPAO)	04	(H15)
A BENEFITS SPECIALIST OR CASE		` '
FRIEND/FAMILY MEMBER		
INDEPENDENT LIVING CENTER		
EMPLOYMENT NETWORK		
OTHER AGENCY/ORGANIZATION_		
OTHER	10	(H14j_O)
DON'T KNOW		
REFUSED	r	(H15)
S2=01,03 and (E37=01 and H1=01 and H12=01 and H1 H14h_Other. What Employment Network? <open></open>		
DONETIVAL	OW d	
KEFUSED	r	
S2=01,03 and (E37=01 and H1=01 and H12=01 and H1 H14i_Other. What other Agency or Organization?	3=01 and H14=09)	
<open></open>		
DONUT IZAL	OW d	
	•	
KEFUSED	r	
S2=01,03 and (E37=01 and H1=01 and H12=01 and H1 H14j_Other. Who else?	3=01 and H14=10)	
<open></open>		
<open></open>		
DON'T KN	OW d	
	r	
S2=01,03 and (E37=01 and H1=01 and H12=01) H15. Did somebody call {you/NAME or (his/her) representations}	esentative} to talk about Employment l	Networks?
VEC	01	
1 E 5		

2/28/2012 H-4 ROUND 2 VERSION

 H16.

INTERVIEWER: CODE ALL THAT APPLY.

SOCIAL SECURITY ADM	INISTRATION	01	(H17)
MAXIMUS		02	(H17)
STATE VOCATIONAL RE	HABILITATION AGENCY OR {VRNAME}	03	(H17)
	AND ASSISTANCE ORGANIZATION (BPAO)		
	T OR CASEWORKER		, ,
	R		, ,
	CENTER		, ,
	RK		(1117)
	NIZATION		(H16i O)
	W27111011		
KLI OSED		'	(1117)
S2=01,03 and (E37=01 and H1=01 and H12 H16h_Other. What Employment Network?	2=01 and H15=01 and H16=08)		
<open></open>			
	DON'T KNOW	٩	
	REFUSED		
	KEI GOLD	'	
S2=01,03 and (E37=01 and H1=01 and H12 H16i_Other. What other Agency or Organiza	· · · · · · · · · · · · · · · · · · ·		
<open></open>			
	DON'T KNOW	Ч	
	REFUSED		
	11	·	
S2=01,03 and (E37=01 and H1=01 and H12 H16j_Other. Who else?	2=01 and H15=01 and H16=10)		
<open></open>			
	DON'T KNOWREFUSED		
20 04 00 4/507 04 444 04 444			
S2=01,03 and (E37=01 and H1=01 and H12		lotu	arka in naraan?
H17. Did somebody talk to {you/NAME o	or (his/her) representative} about Employment N	ietw	orks in-person?
	YES	01	
	NO	00	(H19)
	DON'T KNOW		(H19)
	REFUSED		(H19)
			` '

S2=01,03 and (E37=01 and H1=01 and H12=01 and H17=01)
H18. Who talked to {you/NAME or (his/her) representative} about Employment Networks?

INTERVIEWER: CODE ALL THAT APPLY.

	SOCIAL SECURITY ADMINISTRATION			(H19) (H19)
;	STATE VOCATIONAL REHABILITATION AGENCY OR {VRNA A BENEFITS PLANNING AND ASSISTANCE ORGANIZATION	ME} (BPAO)	03 04	(H19) (H19)
	A BENEFITS SPECIALIST OR CASEWORKER			(H19)
	FRIEND/FAMILY MEMBER			(H19)
	NDEPENDENT LIVING CENTEREMPLOYMENT NETWORK		07 08	(H19)
	OTHER AGENCY/ORGANIZATION		09	(H18i_O)
	OTHER			(H18j_O)
	DON'T KNOW			(H19)
	REFUSED			(H19)
S2=01,03 and (E37=01 and H18h_Other. What other En	H1=01 and H12=01 and H17=01 and H18=08) nployment Network?			
<open></open>				
	DON'T KNOWREFUSED			
S2=01,03 and (E37=01 and H18i_Other. What other Ago	H1=01 and H12=01 and H17=01 and H18=09) ency or Organization?			
<open></open>				
	DON'T KNOW	d		
	REFUSED			
S2=01,03 and (E37=01 and H18j_Other. Who else?	H1=01 and H12=01 and H17=01 and H18=10)			
<open></open>				
	DON'T KNOW	d		
	REFUSED			
S2=01,03 and (E37=01 and H19. Did {you/NAME or	H1=01 and H12=01) (his/her) representative} learn about Employment Networks on	a web site?		
	YES	01		
	NO	00		
	DON'T KNOW	d		
	REFUSED			

2/28/2012 ROUND 2 VERSION H-6

S2=01,03 and (E37=01 and H1=01 and H12=01) In general, how useful was the information {you/NAME or (his/her) representative} received about the Employment H20. Networks that serve {your/NAME's} area? Was it: Very useful, 01 Somewhat useful, 02 Not at all useful? 04 DON'T KNOW...... d REFUSED.....r **CONTACT WITH STATE VR AGENCIES** S2=01,03 and (E37=01 and H1=01) The next questions are about the vocational rehabilitation agency in {your/NAME's} state. In {your/NAME's} state the H21. vocational rehabilitation agency is called {VRNAME}. I'm going to refer to this as {your/NAME's} State VR agency. In 2004, did {you/NAME or his/her representative} contact {your/his/her} State VR agency to use {your/his/her} Ticket or talk about getting services from them? NO 00 (H26) DON'T KNOW d (H26) REFUSED.....r (H26) S2=01.03 and (E37=01 and H1=01 and H21=01) Did {you/NAME or (his/her) representative} try to use {your/NAME's} Ticket to sign up with the State VR agency in 2004? YES...... 01 (H24) NO 00

S2=01,03 and (E37=01 and H1=01 and H21=01 and H22=00)

H23. Why didn't {you/NAME or his/her representative} try to use {your/NAME's} Ticket with the State VR agency in 2004?

INTERVIEWER: ENTER VERBATIM RESPONSE

<OPEN> _____ (H26)

DON'T KNOW...... d (H26)
REFUSED...... r (H26)

DON'T KNOW...... d (H24)
REFUSED...... r (H24)

S2=01,03 and (E37=01 and H1=01 and H21=01 and H22=01,d,r)

H24. Did the State VR agency accept {your/NAME'S} Ticket in 2004?

YES	01	H26)
NO	00	
DON'T KNOW	d	(H26)
REFUSED	r	(H26)

INTERVIEWER: CODE ALL THAT APPLY. NOT TAKING TICKETS WHEN CONTACTED...... 01 (H26) {NAME} NOT WILLING/ABLE TO WORK FULL-TIME/ {NAME} NOT WILLING TO GO OFF OF DISABILITY BENEFITS 05 (H26) DON'T KNOW...... d (H26) REFUSED...... r (H26) S2=01,03 and (E37=01 and H1=01 and H21=01 and H22=01,d,r and H24=00 and H25=06) H25_Other. What Other reason? <OPEN> DON'T KNOW...... d REFUSED.....r CONTACT WITH OTHER EMPLOYMENT NETWORKS S2=01,03 and (E37=01 and H1=01) H26. In 2004, other than the Employment Network (you/NAME) assigned (your/his/her) Ticket to, did (you/NAME or (his/her) representative) contact any other Employment Networks to use {your/his/her} Ticket or talk about getting services from them? YES...... 01 DON'T KNOW d (H32) REFUSED..... r (H32) S2=01,03 and (E37=01 and H1=01 and H26=01) How many other Employment Networks did (you/NAME) contact in 2004? H27. PROBE: Your best guess is fine. |__|_| NUMBER (1-2) (1-15)DON'T KNOW...... d REFUSED.....r S2=01,03 and (E37=01 and H1=01 and H26=01) PROGRAMMER: USE "ANY OF "AND "NETWORKS" IF {NAME} CONTACTED MORE THAN ONE EN (H27>1). Did {you/NAME or (his/her) representative} try to use {your/NAME's} Ticket to sign up with {any of) the other Employment Network(s) {you/NAME or (his/her) representative} contacted in 2004? YES...... 01 (H31) NO 00 DON'T KNOW...... d (H32)

S2=01,03 and (E37=01 and H1=01 and H21=01 and H22=01,d,r and H24=00)

H25.

Why didn't the State VR agency accept {your/NAME's} Ticket in 2004?

REFUSED..... r (H32)

S2=01, H29.		26=01 and H28=00) "AND "NETWORKS" IF {NAME} CONTA ner) representative} try to use {your/NA			` '
	Network(s) {you/NAME or (his/he	r) representative} contacted in 2004?			
	INTERVIEWER: ENTER VERBA	TIM RESPONSE			
	<open></open>		(H32)	
		DON'T KNOW	d (H32)	
		REFUSED	•	•	
S2=01, H31.		26=01 and H28=01) AND "NETWORKS" IF {NAME} CONTA ployment Network(s) {you/NAME} tried to			
	INTERVIEWER: CODE ALL TH	AT APPLY.			
	DID NOT OFF EMPLOYMEN' WITH {NAME'S {NAME} NOT \ ENOUGH HO {NAME} NOT \ OTHER (SPEC DON'T KNOW	TICKETS WHEN CONTACTEDER SERVICES {NAME} NEEDED T NETWORK DID NOT SERVE PEOPLE B} DISABILITY/NEEDS	ENEFITS	02 03 04 05 06 d	(H32) (H32) (H32) (H32) (H32)
	03 and (E37=01 and H1=01and H2 ther. What Other reason?	26=01 and H28=01 and H31=06)			
	<open></open>				
		DON'T KNOWREFUSED			
S2=01, H32.	03 and (E37=01 and H1=01) Is there any information {you/Nation Employment Network?	AME or (his/her) representative} needed	d, but didn't g	et when {	you/they} were choosing ar
		YES			
		NO	•	,	
		DON'T KNOWREFUSED	•	•	
S2=01, H33.	03 and (E37=01 and H1=01 and H What information did {you/NAME				
	INTERVIEWER: ENTER VERBA	TIM RESPONSE			
	<open></open>				
		DON'T KNOWREFUSED			

S2=01,03 and (E37=01 and H1=01 and H32=01,00, d or r)

H33a. CHECK: DID {NAME} ANSWER DON'T KNOW OR REFUSE TO E40MTH, E40YR ORE42MTH, E42YR FOR ANY EMPLOYMENT NETWORK IN 2004 (E40mth=d,r or E40yr=d,r or E42mth=d,r or E42yr=d,r) FOR ANY EMPLOYMENT NETWORK IN 2004)?

YES	01	
NO	00	(H34)

S2=01,03 and (E37=01 and H1=01 and H32=01, 00, d or r and H33a=01)

H33b. Earlier you said that you were signed up with the following Employment Networks in 2004 {LIST EN'S FROM E39}.

In 2004, which of these employment networks were you signed up with the longest?

PROBE: Your best estimate is fine.

PROGRAMMER: DISPLAY IF NO ROUND 1 EN FILLED: INTERVIEWER: RESPONSE 1 IS NOT A VALID CHOICE.

PROGRAMMER: ALLOW INTERVIEWER TO CHECK ONE EMPLOYMENT NETWORK. THIS EMPLOYMENT NETWORK SHOULD BE USED AS THE LONGEST EMPLOYMENT NETWORK IN 2004 FOR QUESTIONS H34, H35, H36, H37, H40, H41, H42.

S2=01,03 and (E37=01 and H1=01)

H34. PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK (E38>1), FILL NAME OF EMPLOYMENT NETWORK (E39) THAT {NAME} WAS SIGNED UP WITH THE LONGEST (STOP DATE (E42mth, E42yr) – START DATE (E40mth, E40yr)) OR INTERVIEW DATE {IDATE} - START DATE (E40mth, E40yr))

Next, I'm going to read you some statements about the individual work plan {you/NAME} developed with {{LONGEST} EMPLOYMENT NETWORK IN 2004}. An individual work plan, sometimes called an IWP, is the plan for the services and activities that {your/NAME's} Employment Network will provide. Please tell me if you strongly agree, agree, disagree, or strongly disagree with each statement.

PROBE: These plans are also sometimes called Individual Plans for Employment or IPEs.

		STRONGLY			STRONGLY	DON'T	
		<u>AGREE</u>	<u>AGREE</u>	DISAGREE	DISAGREE	KNOW	REFUSED
a.	{You/NAME and (his/her) representative} helped develop {your/NAME's} individual work plan	. 01	02	03	04	d	r
b.	{You/NAME and (his/her) representative} could choose the goals {you/NAME} wanted in {your/his/her} individual work						
C.	plan	. 01	02	03	04	d	r
d.	goals	. 01	02	03	04	d	r
	if {you/he/she} wanted to	. 01	02	03	04	d	r

2/28/2012 H-10 ROUND 2 VERSION

S2=01,03 and (E37=01 and H1=01)

H35. PROGRAMMER: IF MORE THAN ONE EMPLOYMENT NETWORK (E38>1), FILL NAME OF EMPLOYMENT NETWORK ((E39) THAT {NAME} WAS SIGNED UP WITH THE LONGEST (STOP DATE (E42mth, E42yr) – START DATE (E40mth, E40yr) OR INTERVIEW DATE {IDATE} - START DATE (E40mth, E40yr))

Why did {you/NAME or (his/her) representative} choose {{LONGEST} EMPLOYMENT NETWORK IN 2004}?

INTERVIEWER: CODE ALL THAT APPLY.

STAFF WERE MOST RESPONSIVE/COURTEOUS/		
KNOWLEDGEABLE	01	(H35a)
MOST WILLING TO PROVIDE THE SERVICES (NAME) WANT	TED 02	(H35a)
SERVED PEOPLE WITH {NAME'S} DISABILITY/NEEDS	03	(H35a)
WAIT FOR SERVICES WAS NOT TOO LONG	04	(H35a)
ONLY PROVIDER NEARBY/CLOSEST PROVIDER	05	(H35a)
ONLY PROVIDER WILLING TO ACCEPT TICKET	06	(H35a)
OTHER	07	
DON'T KNOW	d	(H35a)
REFUSED	r	(H35a)
S2=01,03 and (E37=01 and H1=01 and H35=07)		
H35_Other. What Other reason?		
<open></open>		
DON'T KNOW	d	

PROGRAM EXPERIENCES OF ALL PARTICIPANTS IN 2004

(S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01) AND (H1=01)

H35a. CHECK: DID {NAME} ANSWER DON'T KNOW OR REFUSE TO E40mth, E40yr OR E42mth, E42yr FOR ANY EMPLOYMENT NETWORK IN 2004 (IF S2=01,02,03 and E40mth=d,r or E40yr=d,r or E42mth=d, or E42yr=d,r FOR ANYEMPLOYMENT NETWORK IN 2004) OR (IF S2=02, ALSO CHECK (ROUND1 E40MTH =d,r ROUND 1E40YR =d,r, ROUND1 E42MTH =d,r, ROUND1 E42YR =d,r, ROUND1 E47MTH=d,r, ROUND1 E47YR=d,r) FOR EN FILLED IN QUESTION E37a)?

REFUSED.....r

YES	01	
NO	00	(H36)

(S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01) AND (H1=01 and H35a=01)

H35b. Earlier you said that you were signed up with the following Employment Networks in 2004 {IF S2=01,03 LIST EN'S FROM E39 BUT IF S2=02 LIST EN'S FROM E39 AND LIST 2004 EN THAT WAS FILLED IN QUESTION E37a}.

In2004, which of these employment networks were you signed up with the longest? PROBE: Your best estimate is fine.

PROGRAMMER: ALLOW INTERVIEWER TO CHECK ONE EMPLOYMENT NETWORK. THIS EMPLOYMENT NETWORK SHOULD BE USED AS THE LONGEST EMPLOYMENT NETWORK IN 2004 FOR QUESTIONS H36, H37, H40, H41, H42.

2/28/2012 H-11 ROUND 2 VERSION

(S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01)

H36. PROGRAMMER: (IF S2=01,03 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1), FILL NAME OF 2004 EMPLOYMENT NETWORK (IF S2=01,03 THIS IS FROM E39 BUT IF S2=02 THIS IS FROM E39 OR EN THAT WAS FILLED IN QUESTION E37a) THAT {NAME} WAS SIGNED UP WITH THE LONGEST IN 2004.

IF MORE THAN ONE EMPLOYMENT NETWORK IN 2004 AND S2=01 OR 03, OR THEN CALCULATE TIME WITH EACH EN DURING 2004 ONLY. IF TWO ENS HAVE SAME LENGTH, USE EN SIGNED UP WITH MOST RECENTLY (LATEST END MONTH IN 2004).

IF (S2=01 OR 03 AND E37=01 AND E41=00) OR (S2=02 AND WAS NOT SIGNED UP WITH EN AT ROUND 1, AND E37=01 AND E41=00) THEN USE (STOP DATE (E42mth, E42yr) –START DATE (E40mth, E40yr)).

IF S2=01 OR 03 AND E37=01 AND E41=01 THEN USE ((12, 2004) - START DATE (E40mth, E40yr)).

IF S2=01 OR 03 AND STOP DATE (E42mth, E42yr) OR START DATE (E40mth, E40yr) ARE MISSING OR STOP DATES<2004, USE FILL AT H33b or H35b.

IF S2=02 AND E37a=01 USE EN FILLED IN QUESTION E37a (ROUND 1 EN).

IF S2=02 AND E37a=00 INCLUDE ROUND 1 EN IS CALCULATION AND COMPARE TO ENS LISTED IN E39. USE (STOP DATE (E37amth, E37ayr) –START DATE FROM ROUND 1(ENSTMTH, ENSTYR)) AND (STOP DATE (E42mth, E42yr) – START DATE (E40mth, E40yr)) OR ((12, 2004) - START DATE (E40mth, E40yr)) IF CURRENTLY SIGNED UP WITH AN EN (E41=01). IF NO EN IN E39, USE ROUND 1 EN FILLED IN QUESTION E37A.

IF S2=02 AND E37=01 AND E41=00 THEN USE (STOP DATE (E42mth, E42yr) -START DATE (E40mth, E40yr))

IF S2=02 AND STOP DATE (E42mth, E42yr) OR START DATE (E40mth, E40yr) IS MISSING OR STOP DATES<2004, LENGTH=DK, USE FILL AT H33b or H35b)

IF S2=02 AND E37=01 AND E41=01 THEN USE ((12, 2004) - START DATE (E40mth, E40yr)).

PROGRAMMER: IF H1=00, USE QUESTION BELOW

PROGRAMMER: IF (IF S2=01,03 and E38>1) OR (IF S2=02 and E37a=01 and E37b=01) OR (IF S2=02 and E38>1) USE "THE LONGEST".

Now I'm going to focus on the services {you/NAME} received from the Employment Network {you were/NAME was} with {the longest} in 2004, {{LONGEST} EMPLOYMENT NETWORK IN 2004}. For each of the following statements about {{LONGEST} EMPLOYMENT NETWORK IN 2004}, please tell me if you strongly agree, agree, disagree, or strongly disagree. If the statement does not apply just say so.

2/28/2012 H-12 ROUND 2 VERSION

PROGRAMMER: OTHERWISE USE

For each of the following statements about {{LONGEST} EMPLOYMENT NETWORK IN 2004} in 2004, please tell me if you strongly agree, agree, disagree, or strongly disagree.

		STRONGLY			STRONGLY	DON'T		DOES NOT
		AGREE	AGREE	DISAGREE	DISAGREE	KNOW	REFUSED	APPLY
a.	Staff were courteous	01	02	03	04	d	r	na
b.	Staff were able to answer	01	02	02	04	۵	_	
c.	{your/NAME'S} questions	ΟI	02	03	04	d	r	na
0.	opinions and concerns	01	02	03	04	d	r	na
d.	{{LONGEST} EMPLOYMENT							
	NETWORK IN 2004) responded to							
	{your/NAME's} requests for changes to {your/his/her} Individual							
	Work Plan.	01	02	03	04	d	r	na
	PROBE: An individual work plan is							
e.	sometimes called an IWP. {{LONGEST} EMPLOYMENT							
€.	NETWORK IN 2004) offered all the							
	services (you/NAME) needed to							
	meet {your/his/her} work goals	01	02	03	04	d	r	na
f.	The services provided were those included in {your/NAME'S}							
	Individual Work Plan	01	02	03	04	d	r	na
	PROBE: An individual work plan is							
	sometimes called an IWP.							
g.	The services provided were available when {you/NAME} needed							
	them.	01	02	03	04	d	r	na
h.	Overall, the services provided							
	helped {you/NAME} meet	01	02	03	04	٨		no
	{your/his/her} work goals	ΟI	02	03	04	d	r	na

(S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01)

H37. During 2004, did {you/NAME} have any problems with the services {you/he/she} received from {{LONGEST} EMPLOYMENT NETWORK IN 2004}?

YES	01	
NO	00	(H39)
DON'T KNOW		
REFUSED	r	(H39)

(S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01) AND (H37=01) H38. What problems did {you/NAME} have during 2004?

INTERVIEWER: ENTER VERBATIM RESPONSE

		YES	
(S2=01, H40.	You told me earlier that {you/NAM	7a=01 or E37b=01 or E37=01) AND(H39=01) IE} worked at a job during 2004. How much 04} help {you/NAME) to get or keep the job or	
		Helped a lot,	01
		Helped somewhat,	
		Helped very little, or	
		Didn't help at all?	
		Job ended before services started	
		DON'T KNOW	d
		REFUSED	r
(S2=01, H41.	03 and E37=01) OR (S2=02 and E3 In 2004, {were you/was NAME} e {you/he/she} did not want?	7a=01 or E37b=01 or E37=01) ver pressured by {{LONGEST} EMPLOYMEN	NT NETWORK IN 2004} staff to take a job
		YES	01
		NO	
		DON'T KNOW	d
		REFUSED	r
H42.	than {you/he/she} wanted?	YES NODON'T KNOW	01 00 d
			
(S2=01, H43.	03 and E37=01) OR (S2=02 and E3' Since {you/NAME} started participate been in reaching {your/his/her} work	ating in the Ticket to Work program, how suc	ccessful do you think (you have/he/she has)
		Very successful,	01
		Somewhat successful,	
		Not very successful, or	
		Not at all successful?	
		DON'T KNOW	d
		REFUSED	r
(S2=01, H44.	03 and E37=01) OR (S2=02 and E3 CHECK: IS {NAME} A PROXY RES		
		YES	01 (H46)
		NO	• •
		-	

(S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01)H39. CHECK: DID {NAME} WORK IN 2004 (B30 =01)?

H45.	Overall, how satisfied are ye	ou with the Ticket to Work program? Wou	ıld you say:	
		Very satisfied,	01	
		Somewhat satisfied,	02	
		Not very satisfied, or		
		Not at all satisfied?		
		DON'T KNOW		
		REFUSED		
PROBI	LEMS WITH EMPLOYMENT	NETWORKS		
(S2=01	.03 and F37=01) OR (S2=02	and E37a=01 or E37b=01 or E37=01)		
H46.	These next questions are	about any problems {you/NAME} might haring 2004, did {you/NAME} have any page 2004.		
		YES	01	
		NO	00 (I1)	
		DON'T KNOW	d (l1)	
		REFUSED	r (l1)	
(S2=01 H47.	, , ,	and E37a=01 or E37b=01 or E37=01) AN tate VR agency, another Employment Ne	` '	
		STATE VR AGENCY	01	
		EMPLOYMENT NETWORK	02	
		BOTH	03	
		DON'T KNOW		
		REFUSED		
(S2=01 H48.	,03 and E37=01) OR (S2=02 What was the problem about	and E37a=01 or E37b=01 or E37=01) ANut?	ID (H46=01)	
	INTERVIEWER: ENTER VE	ERBATIM RESPONSE		
	<open></open>			
		DON'T KNOW	d	
		REFUSED	r	
(S2=01 H49.	, , ,	and E37a=01 or E37b=01 or E37=01) AN else do anything to try to solve the proble	•	
		YES	01	
		NO))
		DON'T KNOW	•	•
		REFUSED	,	
			(,,,,,,	•

(S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01) AND (H44=00)

2/28/2012 H-15 ROUND 2 VERSION

PROBE: Anything else? INTERVIEWER: CODE ALL THAT APPLY. REFERRED TO DOCUMENTS/INFORMATION ABOUT PROVIDER/ PROGRAM 01 (H51) CONTACTED EN IN WRITING 03 (H51) CONTACTED MAXIMUS BY PHONE 04 (H51) CONTACTED SSA IN WRITING 07 (H51) CONTACTED {LOCAL PROTECTION & ADVOCACY AGENCY} FOR HELP 09 (H54) CONTACTED CASE WORKER/JOB COACH....... 10 (H51) DON'T KNOW...... d (H51) REFUSED...... r (H51) (S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01) AND (H46=01 and H49=01 and H50=11) H50_Other. What else did you do? <OPEN> _____ DON'T KNOW d REFUSED.....r (S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01) AND (H46=01 and H49=01 and H50=01-08 or 10,11,d,r) H51. Did {you/NAME or (his/her) representative} ever receive information from any source about where to get help solving problems with an employment network or state VR agency? YES...... 01 NO 00 (H53) DON'T KNOW d (H53) REFUSED..... r (H53) (S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01) AND (H46=01 and H49=01 and H50=01-08 or 10,11,d,r and H51=01) H52. From whom did {you/NAME} get this information? INTERVIEWER: CODE ALL THAT APPLY. STATE VOCATIONAL REHABILITATION AGENCY OR {VRNAME}...... 01 (H53) MAXIMUS 03 (H53) BENEFITS PLANNING AND ASSISTANCE ORGANIZATION (BPAO) ... 05 (H53) DON'T KNOW...... d (H53) REFUSED...... r (H53)

(S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01) AND (H46=01 and H49=01)

What did {you/NAME} or someone else do to try to solve the problem?

H50.

	<open></open>			
		DON'T KNOW	d	
		REFUSED		
S2_01	02 and E27_01\ OP (S2_02 a	and E272_01 or E27b_01 or E27_01) A	ND (H46=01 and H49=01 and H50=01-08 or	10 11 dr \
32=01 153.			ncy in {your/NAME's} area, called {LOCALPA	
			aries when they are having problems with d Advocacy agencies. The agency in your a	
		YES	01	
		NO	00 (H56)	
		DON'T KNOW		
		REFUSED	r (H56)	
S2=01 154.			ND (H46=01 and H49=01 and H50=09 or H53 om {LOCALPAA}, how easy was it to get	
		Very easy,	01	
		Somewhat easy,	02	
		Not very easy, or	03	
		Not at all easy?	04	
		DON'T KNOW		
		DON'T KNOWREFUSED		
	PROGRAMMER: IF H47 = 0	REFUSEDand E37a=01 or E37b=01 or E37=01) A 01, USE "STATE VR AGENCY", IF H47 D THE EMPLOYMENT NETWORK",		H47=03, USE
S2=01 1 55.	PROGRAMMER: IF H47 = 0 "STATE VR AGENCY ANI EMPLOYMENT NETWORK" How helpful was {LOCALPA	REFUSED and E37a=01 or E37b=01 or E37=01) A 01, USE "STATE VR AGENCY", IF H47 D THE EMPLOYMENT NETWORK",	r ND (H46=01 and H49=01 and H50=09 or H53 i=02, USE "EMPLOYMENT NETWORK", IF H IF H47=DK OR RF USE "STATE VR A presentative} solve the problem with the	H47=03, USE GENCY OR
	PROGRAMMER: IF H47 = 0 "STATE VR AGENCY ANI EMPLOYMENT NETWORK" How helpful was {LOCALPA	REFUSED	r ND (H46=01 and H49=01 and H50=09 or H53 red), USE "EMPLOYMENT NETWORK", IF H IF H47=DK OR RF USE "STATE VR And the problem with the problem with the problem with the problem with the problem.	H47=03, USE GENCY OR
	PROGRAMMER: IF H47 = 0 "STATE VR AGENCY ANI EMPLOYMENT NETWORK" How helpful was {LOCALPA	REFUSED and E37a=01 or E37b=01 or E37=01) A 01, USE "STATE VR AGENCY", IF H47 D THE EMPLOYMENT NETWORK", A} in helping {you/NAME or (his/her) rep k/State VR Agency and the Employmen	r ND (H46=01 and H49=01 and H50=09 or H53 e=02, USE "EMPLOYMENT NETWORK", IF H IF H47=DK OR RF USE "STATE VR A presentative} solve the problem with the t Network}? Were they:	H47=03, USE GENCY OR
	PROGRAMMER: IF H47 = 0 "STATE VR AGENCY ANI EMPLOYMENT NETWORK" How helpful was {LOCALPA	REFUSED and E37a=01 or E37b=01 or E37=01) A 01, USE "STATE VR AGENCY", IF H47 D THE EMPLOYMENT NETWORK", A} in helping {you/NAME or (his/her) rep k/State VR Agency and the Employmen Very helpful,	ND (H46=01 and H49=01 and H50=09 or H53) i=02, USE "EMPLOYMENT NETWORK", IF IF H47=DK OR RF USE "STATE VR ADDRESS SOLVE THE PROBLEM WITH THE IT NETWORK)? Were they:	H47=03, USE GENCY OR
	PROGRAMMER: IF H47 = 0 "STATE VR AGENCY ANI EMPLOYMENT NETWORK" How helpful was {LOCALPA	REFUSED and E37a=01 or E37b=01 or E37=01) A b1, USE "STATE VR AGENCY", IF H47 D THE EMPLOYMENT NETWORK", A} in helping {you/NAME or (his/her) rep k/State VR Agency and the Employmen Very helpful,	r ND (H46=01 and H49=01 and H50=09 or H53 i=02, USE "EMPLOYMENT NETWORK", IF IF H47=DK OR RF USE "STATE VR A presentative} solve the problem with the it Network}? Were they:	H47=03, USE GENCY OR
	PROGRAMMER: IF H47 = 0 "STATE VR AGENCY ANI EMPLOYMENT NETWORK" How helpful was {LOCALPA	REFUSED and E37a=01 or E37b=01 or E37=01) A 01, USE "STATE VR AGENCY", IF H47 D THE EMPLOYMENT NETWORK", A} in helping {you/NAME or (his/her) rep k/State VR Agency and the Employmen Very helpful,	r ND (H46=01 and H49=01 and H50=09 or H53 F=02, USE "EMPLOYMENT NETWORK", IF IF IF H47=DK OR RF USE "STATE VR A presentative} solve the problem with the it Network}? Were they:	H47=03, USE GENCY OR
	PROGRAMMER: IF H47 = 0 "STATE VR AGENCY ANI EMPLOYMENT NETWORK" How helpful was {LOCALPA	REFUSED and E37a=01 or E37b=01 or E37=01) A b1, USE "STATE VR AGENCY", IF H47 D THE EMPLOYMENT NETWORK", A} in helping {you/NAME or (his/her) rep k/State VR Agency and the Employmen Very helpful,	r ND (H46=01 and H49=01 and H50=09 or H53 F=02, USE "EMPLOYMENT NETWORK", IF IF IF H47=DK OR RF USE "STATE VR A presentative} solve the problem with the it Network}? Were they:	H47=03, USE GENCY OR
147=D S2=01	PROGRAMMER: IF H47 = 0 "STATE VR AGENCY ANI EMPLOYMENT NETWORK" How helpful was {LOCALPA, Agency/Employment Networ	REFUSED and E37a=01 or E37b=01 or E37=01) A b1, USE "STATE VR AGENCY", IF H47 D THE EMPLOYMENT NETWORK", A} in helping {you/NAME or (his/her) rep k/State VR Agency and the Employmen Very helpful,	r ND (H46=01 and H49=01 and H50=09 or H53 reo2, USE "EMPLOYMENT NETWORK", IF H IF H47=DK OR RF USE "STATE VR A presentative} solve the problem with the t Network}? Were they:	H47=03, USE GENCY OR
155. 147=D	PROGRAMMER: IF H47 = 0 "STATE VR AGENCY ANI EMPLOYMENT NETWORK" How helpful was {LOCALPA, Agency/Employment Networ K OR RF as "STATE VR AGEI, ,03 and E37=01) OR (S2=02 a)	REFUSED and E37a=01 or E37b=01 or E37=01) A b1, USE "STATE VR AGENCY", IF H47 D THE EMPLOYMENT NETWORK", A} in helping {you/NAME or (his/her) rep k/State VR Agency and the Employmen Very helpful,	r ND (H46=01 and H49=01 and H50=09 or H53 if =02, USE "EMPLOYMENT NETWORK", IF IF IF H47=DK OR RF USE "STATE VR A presentative} solve the problem with the it Network}? Were they:	H47=03, USE GENCY OR
147=D S2=01	PROGRAMMER: IF H47 = 0 "STATE VR AGENCY ANI EMPLOYMENT NETWORK" How helpful was {LOCALPA, Agency/Employment Networ K OR RF as "STATE VR AGEI, ,03 and E37=01) OR (S2=02 a)	REFUSED and E37a=01 or E37b=01 or E37=01) A D1, USE "STATE VR AGENCY", IF H47 D THE EMPLOYMENT NETWORK", A} in helping {you/NAME or (his/her) rep k/State VR Agency and the Employmen Very helpful,	r ND (H46=01 and H49=01 and H50=09 or H53 are 102, USE "EMPLOYMENT NETWORK", IF H IF H47=DK OR RF USE "STATE VR Are 100 presentative) solve the problem with the at Network)? Were they:	H47=03, USE GENCY OR
147=D S2=01	PROGRAMMER: IF H47 = 0 "STATE VR AGENCY ANI EMPLOYMENT NETWORK" How helpful was {LOCALPA, Agency/Employment Networ K OR RF as "STATE VR AGEI, ,03 and E37=01) OR (S2=02 a)	REFUSED and E37a=01 or E37b=01 or E37=01) A 01, USE "STATE VR AGENCY", IF H47 D THE EMPLOYMENT NETWORK", A} in helping {you/NAME or (his/her) rep k/State VR Agency and the Employmen Very helpful,	r ND (H46=01 and H49=01 and H50=09 or H53 are 102, USE "EMPLOYMENT NETWORK", IF H IF H47=DK OR RF USE "STATE VR Are 100 presentative) solve the problem with the 100 to Network)? Were they:	H47=03, USE GENCY OR

(S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01) AND (H46=01 and H49=01 and H50=01-08 or 10,11,d,r and

(S2=01 H57.	,03 and E37=01) OR (S2=02 and E CHECK: IS {NAME} A PROXY RE	37a=01 or E37b=01 or E37=01) AND (H46=01 and H49=01) SPONDENT (RTYPE=02)?	
		YES	
PROGI	RAMMER: IF H56=00,d,r THEN SKI	P TO H59.	
(S2=01 H58.	,03 and E37=01) OR (S2=02 and E How satisfied are you with how the	37a=01 or E37b=01 or E37=01) AND (H46=01 and H49=01 and H56=01 and H57=00) e problem was solved? Are you:	
		Very satisfied,	
		Not at all satisfied?	
(S2=01 H59.	PROGRAMMER: IF H47 = 01, US	B7a=01 or E37b=01 or E37=01) AND (H46=01 and H49=01 and H57=00) BE "STATE VR AGENCY", IF H47=02, USE "EMPLOYMENT NETWORK", IF H47=03, UBE EMPLOYMENT NETWORK", IF H47=DK OR RF USE "STATE VR AGENCY"	
	Overall, how satisfied are you wit Employment Network} in trying to	h the helpfulness of the {State VR Agency/Employment Network/State VR Agency and solve this problem? Are you:	the
		Very satisfied, 01 Somewhat satisfied, 02	
		Not very satisfied, or	
		Not at all satisfied? 04	
		DON'T KNOW d REFUSED r	

GO TO 11.

(S2=01,03 and E37=01) OR (S2=02 and E37a=01 or E37b=01 or E37=01) AND (H46=01 and H49=00,d,r) H60. Why didn't {you/NAME or (his/her) representative} do anything to try to solve the problem?

INTERVIEWER: CODE ALL THAT APPLY.

PROBLEM SOLVED ITSELF	01	(H61)
WAS NOT WORTH THE BOTHER	02	(H61)
DID NOT KNOW WHAT TO DO	03	(H61)
HAS NOT HAD TIME TO TAKE ACTION YET	04	(H61)
WAS AFRAID OF GETTING IN TROUBLE WITH EMPLOYMENT		
NETWORK	05	(H61)
DID NOT THINK IT WOULD DO ANY GOOD	06	(H61)
CHANGED EMPLOYMENT NETWORK BEFORE PROBLEM WAS		
ADDRESSED	07	(H61)
LEFT TICKET PROGRAM BEFORE PROBLEM WAS ADDRESSED	80	(H61)
OTHER	09	
DON'T KNOW	d	(H61)
REFUSED	r	(H61)

2/28/2012 H-18 ROUND 2 VERSION

•	03 and E37=01) OR (S2=02 and E37a=01 of the state of the	or E37b=01 or E37=01) AND (H46=01 a	nd H49=00,d,r and H60=09)
	<open></open>		
		KNOW	
	KEFU	SED	I
(S2=01 H61.	03 and E37=01) OR (S2=02 and E37a=01 of PROGRAMMER: IF H47 = 01, USE "STA" "STATE VR AGENCY AND THE EMPLOY	TE VR AGENCY", IF H47=02, USE "EN	nd H49=00,d,r) MPLOYMENT NETWORK", IF H47=03, USE
	Did (you/NAME or (his/her) representativ (State VR Agency/Employment Network/State VR	•	how to get help solving problems with the etwork}?
	YES		01
	NO		00
		KNOW	
	REFU	SED	r

SECTION I UNIVERSE: ALL

VARIABLES FROM OTHER SECTIONS: NONE PRELOADED INFORMATION: THIS MONTH, LAST YEAR

SECTION I: HEALTH AND FUNCTIONAL STATUS

GENE	RAL HEALTH STATUS			
(All)				
Ì1.	The next questions are ab	out {your/NAME's} health.		
	Overall, how would you ra	te {your/NAME's} health during the past 4 weeks?		
		Excellent,	01	
		Very good,	02	
		Good,	03	
		Fair,	04	
		Poor, or		
		Very poor		
		DON'T KNOW		
		REFUSED		
(All)				
l2.	During the past 4 weeks, I or climbing stairs?)	how much did physical health problems limit {your	NAME's} usual physical a	activities (such as walking
		Not at all,	01	
		Very little,		
		Somewhat,		
		Quite a lot, or		
		Could {you/he/she} not do physical		
		activities?	05	
		DON'T KNOW		
		REFUSED		
(All)				
I3.		how much difficulty did {you/NAME} have doing our/his/her} physical health?	{your/his/her} daily work	, both at home and away
		None at all,	01	
		A little bit,		
		Some,		
		•		
		Quite a lot, or		
		Could {you/he/she} not do daily work? .		
		DON'T KNOWREFUSED	***************************************	
(AII) I4.	How much bodily pain {ha	ve you/has NAME} had in the past 4 weeks?		
		None,	01	
		Very mild,		
		Mild,		
		Moderate,		
		Severe, or		
		Very severe?		
		V CI Y 3C VCI C!		

I-1 **ROUND 2 VERSION** 8/23/2005

DON'T KNOW...... d REFUSED.....r

l5.	During the past 4 weeks, how mu	uch energy did {you/NAME} have?	
		Very much,	01
		Quite a lot,	
		Some,	
		A little, or	
		None?	
		DON'T KNOW	
		REFUSED	
		1,21,0020	·
(All)			
16.	During the past 4 weeks, how m activities with family or friends?	uch did {your/NAME's} physical health or emotion	onal problems limit {your/his/her} usual social
		Not at all,	01
		Very little,	
		Somewhat,	
		Quite a lot, or	
		Could {you/he/she} not do social activities?	
		DON'T KNOW	
		REFUSED	
		1,21,0020	·
(All)			
l7.	During the past 4 weeks, how n depressed or irritable?)	nuch {have you/has NAME} been bothered by e	motional problems (such as feeling anxious,
		Not at all,	01
		Slightly,	
		Moderately,	
		Quite a lot, or	
		Extremely?	
		DON'T KNOW	
		REFUSED	
			·
(All)			
18.	During the past 4 weeks, how r work, school or other daily activit	nuch did personal or emotional problems keep ies?	{you/NAME} from doing {your/his/her} usual
		Not at all,	01
		Very little,	
		Somewhat,	
		Quite a lot, or	
		Could {you/he/she} not do daily activities?	
		DON'T KNOW	
		REFUSED	
(AII) I9.	Compared to {THIS MONTH, LA	ST YEAR}, how would you rate {your/NAME's} he	ealth in general now?
		Much better now,	01
		Somewhat better now,	
		About the same,	
		Somewhat worse now, or	
		Much worse now?	
		DON'T KNOW	
		DEFISED.	∽ r

(All)

(AII) I10.	{Do you/Does NAME} take any	prescription medications for any ongoing	physical health conditions?
	PROBE: Please do not include	over the counter medication such as cold	or headache medication.
		YES	01
		NO	
		DON'T KNOW	
		REFUSED	r
(AII)			
l11.	{Do you/Does NAME} take any	prescription medications for any ongoing	mental or emotional conditions?
		YES	01
		NO	00
		DON'T KNOW	d
		REFUSED	r
(All)			
Ì12.	Since {THIS MONTH, LAST Y hospital, clinic, or doctor's office	· · ·	ny treatment for a mental or emotional condition at
	PROBE: Do not include medic	cations.	
		VEO	04 (147)
		YES	• •
		NO	,
		DON'T KNOW	
		REFUSED	r (117)
	ADL, AND FUNCTIONAL LIMIT	ATIONS	
(All) I17a.		that all beneficiaries be asked these que	ow much difficulty {you have/NAME has} doing thes estions. Please give me your best answer even if the
	{Do you/Does NAME} ever we	ar glasses or contact lenses?	
		YES	01
		NO	
		DON'T KNOW	
		REFUSED	
(I17a=0 I17b.	· · · · · · · · · · · · · · · · · · ·	ny difficulty seeing words and letters in	ordinary newsprint even when wearing {your/his/he
	glasses of contact lenses?		
		YES	01 (I19)
		NO	00 (I21)
		DON'T KNOW	d
		REFUSED	r
(I17a=a I18.	nswer and I17b=d,r) {Do you/Does NAME} have an	y difficulty seeing words and letters in ordi	nary newsprint?
		YES	01
		NO	
		DON'T KNOW	
		DEFLICED.	V

(I17b=0 ⁻ I19.		ices, special equipment, or other special assi or equipment, Braille, a guide dog, or a white ca		•
	PROBE: Do not include glasses or o	contact lenses.		
		YES	01	
		NO	00	(I21)
		DON'T KNOW		,
		REFUSED		
(I17b=0	1,d,r and I18=01,d,r and I19=01)			
Ì20.	•	ypes of assistance {do you/does NAME} use?		
	PROBE: Anything else?			
	INTERVIEWER: CODE ALL THAT	APPLY.		
	TELESCOPIC LENSES		01	(I21)
	ADAPTED COMPUTER E	QUIPMENT	02	(121)
	BRAILLE		03	(121)
	READERS		04	(I21)
	GUIDE DOG		05	(I21)
	WHITE CANE		06	(I21)
	OTHER SEEING ASSISTA	NCE	07	
	DON'T KNOW		d	(I21)
	REFUSED		r	(I21)
-	I,d,r and I18=01,d,r and I19=01 and er. What other seeing assistance?	120=07)		
	<open></open>			
		DON'T KNOW	d	
		REFUSED	r	
(All)				
I21.	{Do you/Does NAME} have any d wear{s} one?	ifficulty hearing normal conversation even if	usir	ng a hearing aid if {you/he/she} usually
		YES	01	
		NO	00	(I25)
		DON'T KNOW	d	
		REFUSED	r	
(I21=01	d,r)			
Ì22.	• •	at is said in normal conversation at all?		
		YES	01	
		NO	-	

DON'T KNOW...... d
REFUSED...... r

(I21=01 I23.	{Do you/Does NAME} use any de	vices, special equipment, or other special ass mplifier, TTY or teletype, an assistive listening o		· · · · · · · · · · · · · · · · · · ·
		YES NO DON'T KNOW REFUSED	00 d	(125)
(I21=01 I24.	,d,r and I23=01) What devices, equipment, or other	types of assistance {do you/does NAME} use?		
	PROBE: Anything else?			
	INTERVIEWER: CODE ALL THAT	APPLY.		
-	PHONE AMPLIFIER TDD TTY OR TELETYPE CLOSED CAPTION TV ASSISTIVE LISTENING/S INTERPRETER OTHER HEARING ASSIS DON'T KNOW REFUSED ,d,r and I23=01 and I24=08) ner. What other hearing assistance?	TANCE	02 03 04 05 06 07 08 d	(125) (125) (125) (125) (125) (125) (125)
	«OFEN»	DON'T KNOW	4	
		REFUSED		
(AII) I25.	{Do you/Does NAME} have any diff	iculty having {your/his/her} speech understood	bec	ause of a health condition or problem?
		YES NO DON'T KNOW REFUSED	00 d	(129)
(I25=01 I26.		our/his/her} speech understood at all?		
	, ,	n speech and does not include sign language '	spe	ech'.
		YESNO	-	

DON'T KNOW d
REFUSED r

(125=01	.d.r)			
127.	{Do you/Does NAME} use any device	ces, special equipment, or other special assistation uch as a voice synthesizer or voice amplifier?	ance	because of difficulty speaking or having
		YES	-	
		NO		(I29)
		DON'T KNOW		
		REFUSED	r	(129)
(125-01	d,r and I27=01)			
128.		ypes of assistance {do you/does NAME} use?		
	PROBE: Anything else?			
	INTERVIEWER: CODE ALL THAT	APPLY.		
	VOICE SYNTHESIZER		Ω1	(120)
				• •
		PRETER		(129)
		ANCE		
				(I29)
	REFUSED		r	(129)
-	d,r and I27=01 and I28=04) er. What other speech assistance?			
	<open></open>			
		DON'T KNOW		
(All)				
I29.	{Do you/Does NAME} have any diffi	culty walking without assistance for a quarter of	of a i	mile or about 3 city blocks?
		YES	01	
		NO	00	(133)
		DON'T KNOW		(100)
		REFUSED		
		NET 0025	•	
(129=01	,d,r)			
Ì30.	· · · · · · · · · · · · · · · · · · ·	uarter of a mile without assistance at all?		
		YES	01	
		NO	00	
		DON'T KNOW		
		REFUSED		
(129=01)	,d,r)			
l31.		ces, special equipment, or other special assist prosthetic device, or a personal care attendant?		e because of difficulty walking, such as a
		YES	<u>01</u>	
		NO	-	(133)
				` '
		DON'T KNOW		
		REFUSED	r	(133)

(I29=01,d,r and I31=01) What devices, equipment, or other types of assistance {do you/does NAME} use? 132. PROBE: Anything else? INTERVIEWER: CODE ALL THAT APPLY. PERSONAL CARE ASSISTANT 05 (I33) OTHER MOBILITY ASSISTANCE ______ 08 DON'T KNOW...... d (I33) REFUSED...... r (133) (I29=01,d,r and I31=01 and I32=08) 132 Other. What other mobility assistance? <OPEN> _____ DON'T KNOW...... d REFUSED..... (All) {Do you/Does NAME} have any difficulty climbing up 10 steps without resting? 133. YES...... 01 DON'T KNOW d REFUSED.....r (133=01,d,r)134. {Are you/Is NAME} able to climb 10 steps at all? YES...... 01 NO 00 DON'T KNOW d REFUSED.....r (All) {Do you/Does NAME} have any difficulty lifting and carrying something as heavy as 10 pounds, such as a full bag of 135. groceries? YES...... 01 NO 00 (I37) DON'T KNOW d

REFUSED.....r

(135=0	1,d,r)			
Ì36.		ift and carry 10 pounds at all?		
		YES		
		NO		
		DON'T KNOW	d	
		REFUSED	r	
(All)	(De vev/Dees NAME) hour		de and financia to de things and a midding o	
137.	grasping a pencil?	e any difficulty using {your/nis/ner} nan	ds and fingers to do things such as picking u	p a glass o
	grasping a pencir	YES	01	
		NO		
			* *	
		DON'T KNOW		
		REFUSED		
(137=0	1 d r)			
(137 – 3 138.		use {your/his/her} hands and fingers to g	rasp and handle at all?	
	()	(, ,		
		YES	01	
		NO	-	
		DON'T KNOW		
		REFUSED		
		REPUSED		
(All)				
(7 (II) 139.	{Do you/Does NAME} have	any difficulty reaching over {your/his/he	r} head?	
.00.	(Bo you, Boos 14, tiving) Have	arry armounty rodorning over (your/mo/no	ij nodd.	
		YES	01	
		NO		
		DON'T KNOW	* *	
		REFUSED		
		REFUSED	1	
(139=0	1.d.r)			
I40.		each over {your/his/her} head at all?		
	,	, , , , , , , , , , , , , , , , , , ,		
		YES	01	
		NO		
		DON'T KNOW		
		REFUSED		
		NEI OSED		
(All)				
l41.	{Do you/Does NAME} have	any difficulty standing or being on {your	/his/her} feet for one hour?	
	, , , , , , , , , , , , , , , , , , , ,			
		YES	01	
		NO		
		DON'T KNOW	, ,	
		REFUSED		
		KLI OSLD	1	
(141=0	1,d,r)			
(111–0 142.		stand on {your/his/her} feet at all?		
	()	Granner Granner Grant Gr		
		YES	01	
		NO		
		DON'T KNOW		
		REFUSED	1	

(All)				
l43.	{Do you/Does NAME} have a	nny difficulty stooping, crouching or knee	eling?	
		YES		
		NO	00 (I45)	
		DON'T KNOW	d	
		REFUSED	r	
(143=0	1,d,r)			
144.	{Are you/Is NAME} able to st	oop, crouch, or kneel at all?		
		YES	04	
		NO		
		DON'T KNOW	d	
		REFUSED	r	
/ A II\				
(AII) 145.	{Do you/Does NAME} have a	iny difficulty getting around inside {your/	his/her} home?	
140.	(Do you/Does tw/twiz) have a	any dimedity getting around molde (your,	morner; morne:	
		YES	01	
		NO	00 (147)	
		DON'T KNOW	, ,	
		REFUSED		
		REFUSED	I	
(145=0	1.d.r)			
146.		he help of another person in order to ge	t around inside {your/his/	/her} home?
	,		O	•
		YES	01	
		NO	00	
		DON'T KNOW	d	
		REFUSED		
(All)				
147.		any difficulty getting around outside {y	our/his/her} home, for ex	xample to shop or visit a doctor's
	office?			
		YES	01	
		NO		
		DON'T KNOW		
		REFUSED	r	
(147=0	1 d r)			
148.		he help of another person in order to ge	t around outside {vour/hi	is/her} home?
110.	(Do you, Dood IV IVIL) Hood I	no noip of another person in order to go	t around outoido (youi/m	contains name.
		YES	01	
		NO		
		DON'T KNOW		
		REFUSED	r	
(AII)				
(All) 149.	{Do you/Does NAME} have a	any difficulty getting into and out of bed	or a chair?	
•	(-) <u> </u>	, , , , , , , , , , , , , , , , , , ,		
		YES	01	
		NO		
		DON'T KNOW	• • •	
		REFUSED	r	

(149=0)	1,d,r)			
I50.	(Do you/Does NAME) need the he	elp of another person in order to get into and out	of b	ed or a chair?
		YES	Ω1	
		NO		
		-		
		DON'T KNOW		
		REFUSED	r	
(All)				
l51.	{Do you/Does NAME} have any d	ifficulty bathing or dressing?		
		YES	01	
		NO	00	(153)
		DON'T KNOW		(/
		REFUSED		
(154 0	4			
(I51=0 ⁻ I52.		elp of another person in order to bathe or dress?		
	(= c , c = = c = c = = = = ,			
		YES	01	
		NO	00	
		DON'T KNOW	Ч	
		REFUSED		
		REFUSED	ı	
(AII)				
I53.	(Do you/Does NAME) have any d	ifficulty shopping for personal items, such as toil	et ite	ems or medicine?
		YES	01	
		NO	00	(155)
		DON'T KNOW		(100)
		REFUSED	ı	
(153=0	1,d,r)			
l54.	(Do you/Does NAME) need the he	elp of another person in order to shop for person	al ite	ems?
		YES	Ω1	
		_		
		NO		
		DON'T KNOW	u	
		REFUSED	r	
(All)				
155.	{Do you/Does NAME} have any d	ifficulty preparing {your/his/her} own meals?		
		YES	01	
		NO	-	(157)
		DON'T KNOW		(107)
		REFUSED	r	
(I55=0	1,d,r)			
l56.	· · · · · · · · · · · · · · · · · · ·	elp of another person in order to prepare {your/h	is/he	er} meals?
		YES	01	
		NO	00	
		DON'T KNOW		
		REFUSED		

(AII) I57.	{Do you/Does NAME} have an	y difficulty eating?		
	PROBE: This includes difficulty	chewing, swallowing, or using utensils.		
		YES	01	
		NO		(150)
		DON'T KNOW		(100)
		REFUSED		
(157=01	.d.r)			
158.		e help of another person in order to eat?		
		YES	01	
		NO	-	
		DON'T KNOW		
		REFUSED		
(All)				
I59.	{Do you/Does NAME} have a I	ot of trouble concentrating long enough to finis	sh everyda	ay tasks?
		YES	01	
		NO		
		DON'T KNOW		
		REFUSED		
(All)				
I60.	{Do you/Does NAME} have a I	ot of trouble coping with day-to-day stresses?		
		YES	01	
		NO	00	
		DON'T KNOW	d	
		REFUSED	r	
(AII) I61.	{Do you/Does NAME} have a I	ot of trouble getting along with other people an	nd making	or keeping friendships?
		YES	01	
		NO	00	
		DON'T KNOW	d	
		REFUSED		
ALCOP	IOL ABUSE			
(All)				
162.	These next questions are about do/NAME does} not drink alcol	ut {your/NAME's} use of alcohol. Please remnol at all, just say so.	nember th	at your answers are confidential. If {you
	In the past 12 months, have {y	ou/ friends or family} ever felt {you/NAME} oug	ght to cut	down on {your/his/her} drinking?
		YES	01	
		NO		
		IF VOLUNTEERED: I DON'T DRINK		(172)
		DON'T KNOW		
		REFUSED		

1	162=	Λ1	٦ſ	١.	А	r
u	いっ	v	 м	, ,		

In the past 12 months, have people annoyed (you/NAME) by criticizing (your/his/her) drinking?

YES	01	
NO	00	
IF VOLUNTEERED: I DON'T DRINK	02	(172)
DON'T KNOW	d	
REFUSED	r	

(I62=01,00,d,r and I63=01,00,d,r)

In the past 12 months, {have you/has NAME} ever felt bad or guilty about {your/his/her} drinking?

YES	01	
NO	00	
IF VOLUNTEERED: I DON'T DRINK	03	(172)
DON'T KNOW	d	
REFUSED	r	

(I62=01,00,d,r and I63=01,00,d,r and I64=01,00,d,r)

In the past 12 months, {have you/has NAME} ever had a drink first thing in the morning to steady {your/his/her} nerves, get rid of a hangover, or get the day started?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

(I62=01,00,d,r and I63=01,00,d,r and I64=01,00,d,r)

During the past 12 months, has {your/NAME's} doctor or another health professional advised {you/NAME} to stop using alcohol or recommended that {you/he/she} participate in a program to help {you/him/her} stop using alcohol?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

(I62=01,00,d,r and I63=01,00,d,r and I64=01,00,d,r)

During the past 12 months, {have you/has NAME} received treatment or counseling for {your/his/her} use of alcohol?

YES	01	(172)
NO	00	(172)
DON'T KNOW	d	(172)
REFUSED	r	(172)

DRUG ABUSE

(All)

The next questions are about the use of prescription and non-prescription drugs. I will be asking if {you have/NAME has} ever used these drugs on {your/his/her} own. By 'on {your/his/her} own' I mean using non-prescription drugs or using prescription drugs in a non-prescribed manner, such as using larger quantities than prescribed or for longer periods than prescribed. Examples of non-prescription drugs are marijuana or pot, speed, crack or cocaine, LSD, or Ecstasy.

During the past 12 months, {have you/has NAME} used drugs on {your/his/her} own more than 5 times?

PROBE: Have you used drugs to get high or used drugs without a prescription or in larger amounts than prescribed?

YES	01
NO	00 (J1)
DON'T KNOW	d (J1)
REFUSED	r (J1)

172=01)			
73.	•	I (you/NAME) find (you/he/she) need at high on the amount (you/he/she) ha		get an effect or that
		YES	01	
		NO		
		DON'T KNOW		
		REFUSED		
172=01 74.	•	d {you/NAME} have emotional or ph	vsical problems from using drugs –	such as withdrawal
,		ling crazy, paranoid, depressed or un		
		YES	01	
		NO	00	
		DON'T KNOW		
		REFUSED		
170 04	,			
172=01 75.	During the past 12 months has prescription drugs or recomm	s {your/NAME's} doctor or another he nended that {you/he/she} participate on drugs in a non-prescribed manner?	· · · · · · · · · · · · · · · · · · ·	
		YES	01	
		NO	00	
		DON'T KNOW	d	
		REFUSED		
172=01	1			
76.	·	ave you/has NAME} received treatment a non-prescribed manner?	nt or counseling for {your/his/her} use	e of non-prescription
		YES	01	
		NO		
		DON'T KNOW		
		REFUSED		
		KEI OOED		

SECTION J: HEALTH INSURANCE

(A II)			
(All) J1.	Now, I'm going to ask you about di	fferent types of health insurance coverage {you	u/NAME} might have.
	{Are you/Is NAME} currently cover	ed by Medicare?	
		nce coverage provided nationally to certain di iciaries that have been receiving benefits for m	
		YES	
		NO	
		DON'T KNOW	
		REFUSED	. r
(All) J2.		S EQUAL TO "MEDICAID" USE FOLLOWING id that pays for health care for persons in ne	
	OTHERWISE USE:		
	There is a program called Medicai	d that pays for health care for persons in need IE'S} CURRENT STATE}. {Are you/Is NAME}	· · · · · · · · · · · · · · · · · · ·
	PROBE: Medicaid is a state medic with disabilities	al assistance program that serves low-income	people and Social Security Income recipients
		YES	. 01
		NO	
		DON'T KNOW	. d
		REFUSED	. r
(All) J4.	{Are you/Is NAME} currently cove	red by military health care, through Armed Fo	orces retirement benefits, the VA, TRICARE
	CHAMPUS, or CHAMP-VA?	,	, , , , , , , , , , , , , , , , , , , ,
	-	health care program for active duty and retire is a health care program for dependents of active duty and retire is a health care program for dependents of active duty and retire is a health care program for active duty and retire is a health care program for active duty and retire is a health care program for active duty and retire is a health care program for active duty and retire is a health care program for active duty and retire is a health care program for active duty and retire is a health care program for active duty and retire is a health care program for active duty and retire is a health care program for dependents of active duty and retire is a health care program for dependents of active duty and retire is a health care program for dependents of active duty and retire is a health care program for active duty and retire is a	
		YES	. 01
		NO	. 00
		DON'T KNOW	
		REFUSED	. г
(All)			
J5.		red by <u>private health insurance</u> , for example, nber, or that {you purchase/(he/she) purchases	
		YES	. 01
		NO	. 00 (J7)
		DON'T KNOW	• •
		REFUSED	. r (J7)

8/23/2005 J-1 ROUND 2 VERSION

(J5=01) J6.		eceive {your/his/her} private health insurance or former employer of {your/his/her} spouse, page of the content		
	INTERVIEWER:IF THE RESPOND INSURANCE, CODE 'PAID BY SE	DENT SAYS THAT THEY OR SOMEONE IN T LF/FAMILY'.	ГНЕ	IR FAMILY PAYS FOR THEIR HEALTH
	SPOUSE'S/PARTNER'S/I PAID BY SELF/FAMILY OTHER SOURCE (SPEC DON'T KNOW	PARENT'S EMPLOYER	02 03 04 d	(J7) (J7) (J7)
•	nd H6=04) r. What is the Other Source?			
	<open></open>			
		DON'T KNOW		
(All) J7.	CHECK: DOES {NAME} HAVE AN	Y TYPE OF INSURANCE (J1=01 OR J2=01 O	R J4	4=01 OR J5=01)?
		YES		(J10)
(J7=00) J8.	It appears that {you do/NAME does doctors, and other health profession	s) not currently have any health insurance cover nals. Is that correct?	erag	e to help pay for services from hospitals
		YES NO DON'T KNOW REFUSED	00 d	
(J7=00 a	nd J8=00) What kinds of health insurance cov	erage {do vou/does NAME} have?		
	PROBE: Any other kind?	5.55 (45) 56, 4555 () INIE] HATO.		

INTERVIEWER: CODE ALL THAT APPLY.

MEDICAID/{STATEMED}	01	(J10)
MEDICARE	02	(J10)
CHAMPUS/CHAMP-VA, TRICARE, VA, OTHER MILITARY	03	(J10)
INDIAN HEALTH SERVICE	04	(J10)
MEDI-GAP	05	(J10)
STATE PROGRAM	06	(J10)
PRIVATE INSURANCE THROUGH OWN EMPLOYER	07	(J10)
PRIVATE INSURANCE THROUGH SPOUSE/PARTNER/		
PARENT	80	(J10)
PRIVATE INSURANCE PAID BY SELF/FAMILY	09	(J10)
OTHER PLAN (SPECIFY) < OPEN>	10	
DON'T KNOW		(J10)
REFUSED	r	(J10)

((J7=00 and J8=00 and J9=10)

REFUSED.....r

SECTION K UNIVERSE: ALL VARIABLES FROM OTHER SECTIONS: RTYPE, B22, B24, B30, B36, C4MTH, C4YR PRELOADED INFORMATION: LAST MONTH, THIS YEAR

SECTION K: INCOME AND OTHER ASSISTANCE

(All) K1.	This includes earnings from work	income {you/NAME} received last month, that and benefits from different programs. When a s and benefits, and don't include earnings or b	answering these questions, please think only
	received.		
		PRESS 1 TO CONTINUE	01
(AII) <i>K</i> 2.	CHECK 1: IS {NAME} CURRENTL	_Y WORKING (B24=01)?	
		YES	
(K2=01) <i>K</i> 2CHE	CK2.	T LEAST ONE JOB PRIOR TO OR DURING LA 2005)?	AST MONTH (C4MTH < OR = LAST MONTH
		YES	· · ·
		JRRENLTY WORKING (B24=01) AND STARTI EAR AND C4YR =2005), GO TO K2A	ED JOB AFTER LAST MONTH THIS YEAR
•	and K2CHECK2=01) CK 3. HAS {NAME} EVER WORKE	ED (B36=01, D, OR R) OR (B22=01, D, OR R) (DR (B24=01, D, OR R)?
		YES	
(K2CHE K2A.	ECK2=00 and K2CHECK3=01) Did {you/NAME} work last month?		
		YES	* *
(K2CHE K3.		NAME} had last month, including all jobs {you/h ST MONTH, THIS YEAR] before taxes and ded	
	INTERVIEWER: ROUND TO NEA	REST DOLLAR	
		\$, . 00 (0-12,500) (0-40,000)	
		DON'T KNOWREFUSED	

K-1 **ROUND 2 VERSION** 8/23/2005

(K2CHECK3=01	and $K2\Delta = 0.1$	and K3>	U)

K3a. Including all jobs {you/NAME} had, how much was left last month, that is in [INSERT LAST MONTH, THIS YEAR], as takehome pay after taxes and other deductions?

INTERVIEWER: ROUND TO NEAREST DOLLAR

\$, .00	
(1 - 11,250)	
(1 – 36,000)	
DON'T KNOW	

REFUSED.....r

(K2CHECK3=01 and K2A=01 and K3> 0)

(All)

K3b. SOFT EDIT: AMOUNT OF TAKE-HOME PAY (K3a) MUST BE LESS THAN OR EQUAL TO AMOUNT PAID BEFORE TAXES AND OTHER DEDUCTIONS (K3). IF RESPONDENT FAILS EDIT, INTERVIEWER READ: I must have recorded an incorrect answer. You said that {you are/NAME is} paid (K3) before taxes and other deductions and that (K3a) is left as take-home pay after taxes and other deductions. Should I change the amount {you are/NAME is} paid before taxes and other deductions or the amount {you take/NAME takes} home after taxes and other deductions?

CHANGE AMOUNT PAID BEFORE TAXES AND OTHER		
DEDUCTIONS	01	(CHANGE K3)
CHANGE AMOUNT OF TAKE-HOME PAY		
SUPPRESS	03	

K4. Thinking about the benefits {you/NAME} received <u>last month</u>, did {you/he/she} receive any income from Social Security?

INTERVIEWER: SHOULD INCLUDE ANY SSI AND SSDI PAYMENTS

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

(All)
 K5. PROGRAMMER: IF {NAME} RECEIVED INCOME FROM ANY SOURCE BELOW (K6a-h=01), ASK K7 THROUGH K10 IMMEDIATELY AFTER EACH 'YES'. OTHERWISE, ASK ABOUT NEXT SOURCE OF INCOME IN K6.

(All)

K6. <u>Last month</u> did {you/NAME} receive any income from...

				DON'T	
		<u>YES</u>	<u>NO</u>	KNOW	REFUSED
a.	Private disability insurance (sometimes called long-term care disability				
	insurance)?	01	00	d	r
b.	Workers' compensation?	01	00	d	r
C.	Veterans' benefits?	01	00	d	r
d.	Public assistance or welfare payments?	01	00	d	r
e.	Unemployment benefits?	01	00	d	r
f.	Private pensions or government employee pensions?	01	00	d	r
g.	Other sources on a regular basis but not from jobs or Social Security?	01	00	D	r (K6_g_oth)
h.	Other sources not on a regular basis?	01	00	D	r (K6_g_oth)

(K6_g=0 K6_g_ot	1) h. What were they?			
	INTERVIEWER: PLEASE SPECIF	FY		
	<open></open>			
		DON'T KNOWREFUSED		
(K6_h=0 K6_h_ot	1) h. What were they?			
INTERV	IEWER: PLEASE SPECIFY			
	<open></open>			
		DON"T KNOW		
(K6=01) K7.	How much income did {you/NAME	E} receive <u>last month</u> from {SOURCE FROM K6	}?	
	INTERVIEWER: ROUND TO NEA	AREST DOLLAR		
		\$, . 00 (GO TO K6 (1-1,000) (1-15,000)	FOR	R NEXT SOURCE OR K11)
		DON'T KNOWREFUSED		
-	and K7=d,r) Was it more than or less than \$30	0?		
		\$300 OR MORE LESS THAN \$300 DON'T KNOW REFUSED	02 d	(K10) (K6 FOR NEXT SOURCE OR K11)
-	and K7=d,r and K8=01) Was it more than or less than \$50	0?		
		\$500 OR MORE LESS THAN \$500 DON'T KNOW	02 d	
		GO TO K6 FOR NEXT SOURCE		

8/23/2005 K-3 ROUND 2 VERSION

OR K11.

(K6=01 K10.	I and K7=d,r and K8=02) Was it more than or less than \$7	150?
		\$150 OR MORE
(All)		KII.
K11.	Did {you/NAME} receive any for family members.	ood stamps <u>last month?</u> This only includes food stamps received by {you/NAME}, not othe
		YES
(K11=0 K12.	•	e food stamps {you/NAME} received <u>last month</u> ? Please include only food stamps received by members.
	INTERVIEWER: ROUND TO NE	EAREST DOLLAR
		\$, . 00 (0-400) (0-950)
		DON'T KNOW d REFUSED r
(AII) K13.	Did {you/NAME} receive assistance.	tance from any other government program <u>last month?</u> For example, housing or energ
		YES
(K13=0 K14.	01) What other assistance did {you/	NAME} receive?
	INTERVIEWER: PROGRAM:	
	<open></open>	
		DON'T KNOW d

REFUSED.....r

(K13=01)

K15. How much income did {you/NAME} receive <u>last month</u> from the assistance you just told me about?

PROBE: Your best estimate is fine.

INTERVIEWER: ROUND TO NEAREST DOLLAR

\$___\, __\, ___\\ . 00 (0-500) (0-10,000)

DON'T KNOW d
REFUSED r

PRELOADED VARIABLES: SAMPLE TYPE (S2)

SECTION L: SOCIODEMOGRAPHIC INFORMATION

PROGRAMMER: L1 AND L2 SKIPPED FOR LONGITUDINAL SAMPLE WHO COMPLETED ROUND 1 (S2=02) (S2=01,03)

L1. I have a few more questions about {you/NAME}.

What is {your/NAME's} ethnic background? {Are you/Is (he/she)}:

Hispanic or Latino, or	01
Not Hispanic or Latino?	02
DON'T KNOW	d
REFLISED	r

(S2=01,03)

L2. What is {your/NAME's} race? {Are you/Is (he/she)}:

INTERVIEWER: CODE ALL THAT APPLY.

Alaska Native or American Indian,	01
Asian,	02
Black or African American,	03
Native Hawaiian or Other Pacific	
Islander, or	04
White	05
DON'T KNOW	d
REFUSED	r

(All)

L3. What is the <u>highest</u> year or grade {you/NAME} finished in school?

INTERVIEWER: READ LIST IF NECESSARY. CODE ONE ANSWER.

INTERVIEWER: IF ATTENDED SCHOOL BUT COMPLETED LESS THAN HIGH SCHOOL, CODE AS 1. IF NEVER ATTENDED SCHOOL, CODE AS 10.

INTERVIEWER: IF RESPONDENT SAYS THEY WERE HOME SCHOOLED, PROBE FOR HIGHEST YEAR, GRADE, DEGREE, OR CERTIFICATE COMPLETED.

DID NOT COMPLETE HIGH SCHOOL OR GED	01
HIGH SCHOOL: GED	02
HIGH SCHOOL: DIPLOMA	03
HIGH SCHOOL: CERTIFICATE OF COMPLETION	04
SOME COLLEGE/SOME POSTSECONDARY VOCATIONAL	
COURSES	05
2-YEAR OR 3-YEAR COLLEGE DEGREE (ASSOCIATE'S DEGREE)	
OR VOCATIONAL SCHOOL DIPLOMA	06
4-YEAR COLLEGE DEGREE (BACHELOR'S DEGREE)	07
SOME GRADUATE WORK/NO GRADUATE DEGREE	80
GRADUATE OR PROFESSIONAL DEGREE	
(e.g., MA, MBA, Ph.D., J.D, M.D)	09
NEVER ATTENDED SCHOOL	10
SPECIAL EDUCATION WITH NO CERTIFICATE OF COMPLETION	11
DON'T KNOW	d
REFUSED	r

8/23/2005 L-1 ROUND 2 VERSION

PROGRAMMER: L4 AND L5 SKIPPED FOR LONGITUDINAL SAMPLE WHO COMPLETED ROUND 1 (S2=02) (S2=01,03)

L4. What is the highest year or grade {your/NAME's} father finished in school?

INTERVIEWER: READ LIST IF NECESSARY. CODE ONE ANSWER.

INTERVIEWER: IF ATTENDED SCHOOL BUT COMPLETED LESS THAN HIGH SCHOOL, CODE AS 1. IF NEVER ATTENDED SCHOOL, CODE AS 10.

INTERVIEWER: IF RESPONDENT SAYS THEY WERE HOME SCHOOLED, PROBE FOR HIGHEST YEAR, GRADE, DEGREE, OR CERTIFICATE COMPLETED.

DID NOT COMPLETE HIGH SCHOOL OR GED	01
HIGH SCHOOL: GED	02
HIGH SCHOOL: DIPLOMA	03
HIGH SCHOOL: CERTIFICATE OF COMPLETION	04
SOME COLLEGE/SOME POSTSECONDARY VOCATIONAL	
COURSES	05
2-YEAR OR 3-YEAR COLLEGE DEGREE (ASSOCIATE'S DEGREE)	
OR VOCATIONAL SCHOOL DIPLOMA	06
4-YEAR COLLEGE DEGREE (BACHELOR'S DEGREE)	07
SOME GRADUATE WORK/NO GRADUATE DEGREE	80
GRADUATE OR PROFESSIONAL DEGREE	
(e.g., MA, MBA, Ph.D., J.D, M.D)	09
NEVER ATTENDED SCHOOL	10
SPECIAL EDUCATION WITH NO CERTIFICATE OF COMPLETION	11
DON'T KNOW	d
REFUSED	r

(S2=01,03)

L5. What is the <u>highest</u> year or grade {your/NAME's} mother finished in school?

INTERVIEWER: READ LIST IF NECESSARY. CODE ONE ANSWER.

INTERVIEWER: IF ATTENDED SCHOOL BUT COMPLETED LESS THAN HIGH SCHOOL, CODE AS 1. IF NEVER ATTENDED SCHOOL, CODE AS 10.

INTERVIEWER: IF RESPONDENT SAYS THEY WERE HOME SCHOOLED, PROBE FOR HIGHEST YEAR, GRADE, DEGREE, OR CERTIFICATE COMPLETED.

DID NOT COMPLETE HIGH SCHOOL OR GED	01
HIGH SCHOOL: GED	02
HIGH SCHOOL: DIPLOMA	03
HIGH SCHOOL: CERTIFICATE OF COMPLETION	04
SOME COLLEGE/SOME POSTSECONDARY VOCATIONAL	
COURSES	05
2-YEAR OR 3-YEAR COLLEGE DEGREE (ASSOCIATE'S DEGREE)	
OR VOCATIONAL SCHOOL DIPLOMA	06
4-YEAR COLLEGE DEGREE (BACHELOR'S DEGREE)	07
SOME GRADUATE WORK/NO GRADUATE DEGREE	80
GRADUATE OR PROFESSIONAL DEGREE	
(e.g., MA, MBA, Ph.D., J.D, M.D)	09
NEVER ATTENDED SCHOOL	10
SPECIAL EDUCATION WITH NO CERTIFICATE OF COMPLETION	11
DON'T KNOW	d
REFUSED	r

(AII) L6ft.	How tall {are you/is NAME}?		
	INTERVIEWER: ENTER FEET		
		 FEET (3-8)	
		DON'T KNOWREFUSED	
(All) L6in.	How tall {are you/is NAME}?		
	PROBE: ROUND TO NEAREST W	/HOLE NUMBER (E.G. ENTER 6 FOR 5 ½ INC	CHES)
	INTERVIEWER: ENTER INCHES.		
		 INCHES (1-12)	
		DON'T KNOWREFUSED	
(AII) L7.	How much {do you/does NAME} we	eigh?	
		_ _ POUNDS (50-300) (50-600)	
		DON'T KNOW	
(AII) L8.	{Are you/Is NAME} now married, wi	dowed, divorced, separated or {have you/has (have you/has	ne/she)} never been married?
		MARRIED	02 (L10) 03 (L10) 04 (L10) 05 (L10) d (L10)
(L8=01) L9.	Do {you/NAME} and {your/his/her}	spouse live in the same household?	
		YES	00
		GO TO L11.	

8/23/2005 L-3 ROUND 2 VERSION

(L8=02,	03,04,05,d,r)
L10.	{Do you/Does NAME} have a long-term partner who lives in the same household with {you/him/her} in a marriage-like relationship?
	YES
(AII) L11.	Which of the following best describes {your/NAME's} living situation?
	INTERVIEWER: READ LIST. CODE ONE ANSWER. 'LIVE WITH CHILDREN' SHOULD BE CODED AS '2'
(L11=05 L11_Otl	PROGRAMER DISPLAY ONLY IF L9≠01 {You live/NAME lives} alone 01 (L11a) {You live/NAME lives} with {your/his/her} parents, guardians, a spouse/partner, or other relative
	DON'T KNOW d
	REFUSED r
(All) L11a.	SOFT EDIT: RESPONDENT CANNOT LIVE IN SAME HOUSEHOLD WITH SPOUSE (L9=01) OR LIVE IN SAME HOUSEHOLD WITH LONG-TERM PARTNER (L10=01) AND LIVEALONE (L11=01). IF RESPONDENT FAILS EDIT, INTERVIEWER READ: I must have recorded an incorrect answer. I show that {you live/NAME lives} in the same household with {your/his/her} spouse or partner and {you/NAME} alone? Could you verify which is correct?
	LIVE WITH SPOUSE OR PARTNER

8/23/2005 L-4 ROUND 2 VERSION

(AII) L12.	The next question is about the pla	ace {you live/NAME lives}. Is this place a		
	INTERVIEWER: CODE ONE ANS	SWER.		
	Single family home		. 01	(L12a)
	Mobile home		. 02	(L12a)
	Regular apartment		. 03	(L12a)
	Supervised apartment		. 04	(L12a)
	-			
		nd care home		
		home		
		iving		
		rvised group residence or facility		(L12a)
	_			
	REFUSED		. r	(L12a)
(L12=12 L12_Ot	2) ner. What is the other type of place	?		
	<open></open>			
		DON'T KNOWREFUSED		
L12a.		ANNOT LIVE ALONE (L11=01) AND LIVE ERVIEWER READ: I must have recorded an ir L12}? Which is correct? LIVE ALONE	. 01 . 02	ect answer. I show that {you/NAME} live (CHANGE L12)
(.				
(AII) L13.	CHECK: DOES {NAME} LIVE IN A	A GROUP SETTING (L12 = 04 - 12)?		
		YES	01	
		NO		(L14)
				,
(L13=01 L15.		with hearing or vision impairments, mental i	llnes	s, mental retardation, or developmental
		VEC	04	
		YES		
		NO .		
		DON'T KNOW		
		REFUSED	. r	
(AII) L14.	CHECK: DOES {NAME} LIVE AL	ONE (L11 = 01) OR LIVE IN GROUP SETTING	(L12	2=4-12)?
		YES	. 01	(L20)
		NO	. 00	

(L14=00))					
L16.	How many adults 18 years of age or older live in {your/NAME's} household, including {yourself/NAME}?					
	PROBE: This includes all adults who usually live there, even if they are temporarily away on business, vacation, in a hospita away at school or on military duty.					
		_ ADULTS (1-4) (1-20)				
(L14=00	n.	DON'T KNOW				
L17.	How many children under 18 years of age live in {your/NAME's} household?					
	PROBE: This includes all children at school.	who usually live there, even if they are temporar	ily away on vacation, in a hospital, or away			
		CHILDREN (0-6) (0-20)				
		DON'T KNOW				
(L14=00 L18.)) CHECK: DO NO CHILDREN LIVE	IN THE HOUSEHOLD (L17 =0)?				
		YES				
(L14=00 L19.	and L18=00) How many of these children are {yo	our/NAME's} own? Please include biological, add	opted, step, and foster children.			
		CHILDREN (0-6) (0-20)				
		DON'T KNOW				
(AII) L20.	{Do you /Does NAME} have childre	n of {your/his/her} own under the age of 18 living	outside of {your/his/her} household?			
	PROBE: Please include biological,	adopted, step, and foster children.				
		YES	0 (L22a) d (L22a)			
(L20=01 L21.		ring in {your/NAME's} household {do you/does (h	e/she)} have?			
		CHILDREN (1-6) (1-20)				
		DON'T KNOW				

(All)

L22a. CHECK: DOES {NAME} HAVE ANY CHILDREN (L17>=1 AND L19>=1) OR (L21>=1)?

(L22a=01)

L22. Are any of {your/NAME's} children, either living with {you/him/her} or not, under the age of six?

YES	01
NO	00
DON'T KNOW	d
REFUSED	r

(All)

L23Aamt.

PROGRAMMER: IF L11=01, 03, or 04, ASK:

What was {your/NAME's} total income in 2004, before taxes or other deductions? Please include money {you/NAME} received from <u>all</u> sources.

PROGRAMMER: IF L11=02, or 05, d, r, ASK:

What was the total combined income of all members of {your/NAME's} household in 2004, before taxes or other deductions? Please include money all members of {your/NAME's} household received from <u>all</u> sources.

PROBE: <u>IF RESPONDENT CANNOT PROVIDE AN ANNUAL AMOUNT</u>: If it is hard to calculate an annual amount can you tell me what your income was per day, week, bi-weekly, twice a month or monthly in 2004.

INTERVIEWER: ROUND TO NEAREST DOLLAR

\$|__|_|, |__|. 00 AMOUNT (10,000-75,000) (0-500,000)

(L23Aamt = numeric response)

L23Ahop. PROBE: PROGRAMMER: IF L11=01, 03, or 04, DISPLAY:

What was {your/NAME's} total income in 2004, before taxes or other deductions? Please include money {you/NAME} received from <u>all</u> sources.

PROBE: PROGRAMMER: IF L11=02, or 05, d, r, DISPLAY:

What was the total combined income of all members of {your/NAME's} household in 2004, before taxes or other deductions? Please include money all members of {your/NAME's} household received from <u>all</u> sources.

PROBE: IF RESPONDENT CANNOT PROVIDE AN ANNUAL AMOUNT: If it is hard to calculate an annual amount can you tell me what your household income was per day, week, bi-weekly, twice a month or monthly in 2004.

PROBE: Is that daily, weekly, bi-weekly, twice a month, or annually?

INTERVIEWER: ENTER HOW OFTEN PAID

ANNUALLY	01	(M1)
MONTHLY	02	(L23b)
TWICE A MONTH	03	(L23b)
WEEKLY	04	(L23b)
BI-WEEKLY	05	(L23b)
DAILY	06	(L23b)
OTHER	07	

(L23Aamt = numeric response and L23Ahop =07) L23Ahop_Other. INTERVIEWER: ENTER OTHER <OPEN> DON'T KNOW...... d REFUSED..... **GO TO L24.** (L23Aamt = numeric response and L23Ahop = 02, 03, 04, 05, 06) PROGRAMMER: USE "{YOUR/NAME'S} HOUSEHOLD" IF L11=02 OR 05, OTHERWISE USE "{YOUR/NAME}" How many {days/weeks/months} did {{you/NAME}/{your household/NAME's household}} receive this income in 2004? |__|_| DAYS / WEEKS / MONTHS (1-365) (1-52) (1/12) DON'T KNOW...... d REFUSED.....r GO TO M1. (L23Aamt = d,r or L23Ahop=07)PROGRAMMER: USE "HOUSEHOLD" IF L11=02 OR 05 L24. Could you please tell me if {your/NAME'S} annual (household) income before taxes and other deductions in 2004 was... \$2,500 or less, 01 \$2, 501 to \$5,000, 02 \$5,001 to \$10,000, 03 \$10,001 to \$20,000, 04 \$20,001 to \$30,000, 05 \$40,001 to \$50,000, 07 More than \$100,000? 10 DON'T KNOW d REFUSED.....r

GO TO M1.

<OPEN> ___

PRELOADED VARIABLES: EXPTYPE, TSTATUS

SECTION M: CLOSING INFORMATION AND OBSERVATIONS

(All) M1. PROGRAMMER: IF WE HAVE NAME, ADDRESS, AND PHONE NUMBER FROM EITHER THE SCREENER OR FROM THE OTHER PRELOADED INFORMATION DISPLAY THAT NAME, ADDRESS, AND PHONE NUMBER. That concludes this interview. Can you please verify (your/NAME'S) current contact information? NAME: {FULL NAME FROM SCREENER OR PRELOADED INFORMATION} STREET ADDRESS 1: {FIRST LINE OF ADDRESS FROM SCREENER OR PRELOADED INFORMATION} STREET ADDRESS 2: {SECOND LINE OF ADDRESS FROM SCREENER OR PRELOADED INFORMATION} STREET ADDRESS 3: {THIRD LINE OF ADDRESS FROM SCREENER OR PRELOADED INFORMATION} CITY OR TOWN: {CITY OR TOWN FROM SCREENER OR PRELOADED INFORMATION} STATE: {STATE FROM SCREENER OR PRELOADED INFORMATION} ZIP CODE: {ZIP CODE FROM SCREENER OR PRELOADED INFORMATION} TELEPHONE NUMBER: {TELEPHONE NUMBER FROM SCREENER OR PRELOADED INFORMATION} INCORRECT INFORMATION ABOVE, NEED TO ENTER NEW DON'T KNOW...... d (M1a) REFUSED.....r (M1a) M1 {PROVIDE BOX FOR DATA ENTRY. 1,0, D, R ARE THE ONLY POSSIBLE RESPONSES; IF M1=01, THEN GO TO QUESTIONS BELOW, OTHERWISE SKIP TO M1a} (M1=01)M1_FirstName. NAME: {DISPLAY FULL NAME FROM SCREENER OR PRELOADED INFORMATION WITH FIRST NAME BOLDED} First name? <OPEN> DON'T KNOW d REFUSED.....r (M1=01)M1 MiddleName. NAME: {DISPLAY FULL NAME FROM SCREENER OR PRELOADED INFORMATION WITH MIDDLE INITIAL BOLDED} Middle initial? <OPEN> _____ DON'T KNOW d REFUSED.....r (M1=01)M1_LastName. NAME: {DISPLAY FULL NAME FROM SCREENER OR PRELOADED INFORMATION WITH LAST NAME BOLDED} Last name?

8/23/2005 M-1 **ROUND 2 VERSION**

DON'T KNOWd REFUSEDr

(M1=01) M1_Con	firm.		
	NAME: {DISPLAY FULL NAME}		
	INTERVIEWER: PRESS 1 TO CO	DNTINUE	
		DDRESS FROM SCREENER OR PRELOADED	D INFORMATION WITH LINE 1 BOLD}
	INTERVIEWER: REFUSED AND I	DON'T KNOW ALLOWED, WILL SKIP REST O	F ADDRESS QUESTIONS.
	<open></open>		
		DON'T KNOWREFUSED	
		DDRESS FROM SCREENER OR PRELOADED Second part of the address.) INFORMATION WITH LINE 2 BOLD}
	<open></open>		
		DON'T KNOWREFUSED	
(M1=01) M1_Addi		DDRESS FROM SCREENER OR PRELOADED) INFORMATION WITH LINE 3 BOLD}
	PROBE: READ IF NECESSARY:	Third part of the address.	
	<open></open>		
		DON'T KNOW	
		DDRESS FROM SCREENER OR PRELOADED	O INFORMATION WITH CITY BOLD}
	<open></open>		
		DON'T KNOWREFUSED	

(M1=01)M1_State. ADDRESS: {DISPLAY ENTIRE ADDRESS FROM SCREENER OR PRELOADED INFORMATION WITH STATE BOLD} State? INTERVIEWER: USE TWO CHARACTER ABBREVIATION. INTERVIEWER: ENTER ZZ TO ENTER INTERNATIONAL CITY AND COUNTRY BELOW. <OPEN> DON'T KNOW...... d REFUSED.....r (M1=01)M1_ZipCode. ADDRESS: {DISPLAY ENTIRE ADDRESS FROM SCREENER OR PRELOADED INFORMATION WITH ZIP CODE BOLD} Zip code? <OPEN> KNOW.....d REFUSED.....r (M1=01)M1 Confirm. ADDRESS: {DISPLAY FULL ADDRESS} INTERVIEWER: PRESS 1 TO CONTINUE (M1=01)M1_PhoneNumber. TELEPHONE: {TELEPHONE NUMBER FROM SCREENER OR PRELOADED INFORMATION} Please give me the telephone number, area code first? <OPEN> DON'T KNOW d REFUSED.....r PROGRAMMER: ASK M1 TIMEZONE IF TIME ZONE IS NOT CURRENTLY ENTERED (M1=01)M1_TimeZone. What time zone is that in? INTERVIEWER: CURRENT TIME ZONE: {DISPLAY TIME ZONE BASED ON} PACIFIC TIME ZONE 04

(M1=0	= -		
M1_Cc		TELEPHONE NUMBER FROM SCREENER OR PRELOADED INFORMATION}	
		FROM SCREENER OR PRELOADED INFORMATION)	
	INTERVIEWER: PRESS 1	TO CONTINUE	
(AII)			
M1a.	{Do you have/Does NAME	have} an email address?	
		V/50	
		YES	
		DON'T KNOW d (M2A)	
		REFUSEDr (M2A)	
/N44 = -	24)		
(M1a=0 M2	What is {your/NAME's} em	ail address?	
	<open></open>		
		DON'T KNOW d	
		REFUSEDr	
(All)			
M2A.			
		{NAME}01 (M2CHECK)	
		PROXY 02	
/N/2A	02)		
(M2A= Confirm	n. What is your first name?		
	INTERVIEWER: PRESS 1	TO CONTINUE	
(M2A=	02)		
M2a_F	ïrstName.		
	NAME: {DISPLAY PROXY First name?	'S FULL NAME FROM SCREENER OR PRELOADED INFORMATION WITH FIRST N	AME BOLD}
	<open></open>		
		DON'T KNOW d REFUSED r	
		1121 0020	
(M2A=	· ·		
M2a_N	IiddleName.	'S FULL NAME FROM SCREENER OR PRELOADED INFORMATION WITH MID	DI E INITIAI
	BOLD}	TO FOLE MAINE FROM SOMELNER OR FREEDADED IN CRIMATION WITH MID	DEL INITIAL
	Middle initial?		
	<open></open>		
		DON'T KNOW d	
		REFUSEDr	

(M2A=02)		
M2a_LastName.		
•	Y PROXY'S FULL NAME FROM SCREENER OR PRELOADED II	NFORMATION WITH LAST NAME BOLD
Last name?		
∠OPENS		
(O) LIV		
	DON'T KNOW	d
	REFUSED	r
(M2A=02)	V PROVICE ELLE NAMES	
Confirm. NAME: {DISPLA	Y PROXY'S FULL NAME}	
INTERVIEWER:	PRESS 1 TO CONTINUE	
	THESS THE SSITTING	
(M2A=02)		
M2a_Address1.		
ADDRESS:		
Street and numb	er?	
INITED\/IE\M/ED·	REFUSED OR DON'T KNOW ALLOWED. WILL SKIP REST OF	ADDDESS OF TESTIONS
INTERVIEWER.	REFUSED OR DON I KNOW ALLOWED. WILL SKIP REST OF A	ADDRESS QUESTIONS.
<open></open>		
	DON'T KNOW	
	REFUSED	r
(M2A=02)		
M2a_Address2.	PLAY ADDRESS1 FROM PREVIOUS QUESTION}	
-	F NECESSARY: Second part of the address.	
<open></open>		
	DON'T KNOW	
	REFUSED	r
(M2A=02)		
M2a_Address3.		
	PLAY ADDRESS1 AND ADDRESS2 FROM PREVIOUS QUESTION	ONS}
PROBE: READ I	F NECESSARY: Third part of the address.	
<open></open>		
	DON'T KNOW	d
	REFUSED	
	NEI OOLD	•
(M2A=02)		
M2a_Address4.		
-	PLAY ADDRESS1, ADDRESS2, AND ADDRESS3 FROM PREVI	OUS QUESTIONS}
PROBE: READ I	F NECESSARY: Fourth part of the address.	
ODEN		
<upen></upen>		
	DON'T KNOW	d
	REFUSED	

(M2A=	•		
M2a_C	•	S1, ADDRESS2, ADDRESS3, AND ADDRESS	4 FROM PREVIOUS QUESTIONS}
	Town or City?		,
	<open></open>		_
		DON'T KNOW	d
		REFUSED	
(M2A=	02)		
M2a_S	•		
	ADDRESS: {DISPLAY ADDR QUESTIONS} State?	ESS1, ADDRESS2, ADDRESS3, ADDRESS	S4, AND TOWN/CITY FROM PREVIOUS
	INTERVIEWER: USE TWO CHA	ARACTER ABBREVIATION. ENTER INTERNATIONAL CITY AND COUNTR	Y BELOW.
	<open></open>		_
		DON'T KNOWREFUSED	
(M2A= M2a_Z	ipCode.	SS1, ADDRESS2, ADDRESS3, ADDRESS4, T	OWN/CITY, AND STATE FROM PREVIOUS
	<open></open>		_
		DON'T KNOWREFUSED	
(M2A= Confirn	02) n. NAME: {DISPLAY PROXY'S FU	LL ADDRESS}	
	INTERVIEWER: PRESS 1 TO 0	CONTINUE	
(M2A=	02)		
•	honeNumber. TELEPHONE NUMBER:		
	Please give me the telephone nu	umber, area code first?	
	<open></open>		-
		DON'T KNOW	d
		PEFLISED	r

PROGRAMMER: ASK M2A_TIMEZONE IF TIME ZONE IS NOT CURRENTLY ENTERED (M2A=02)M2A_TimeZone. What time zone is that in? INTERVIEWER: CURRENT TIME ZONE: {DISPLAY TIME ZONE BASED ON} EASTERN TIME ZONE 07 ATLANTIC TIME ZONE 08 (M2A=02)M2A_Confirm. TELEPHONE NUMBER: {PROXY'S TELEPHONE NUMBER} TIME ZONE: {PROXY'S TIME ZONE} INTERVIEWER: PRESS 1 TO CONTINUE (M2A=02)M2a_Rlshp. How are you related to {NAME}? OTHER RELATIVE OF {NAME} 08 STAFF AT RESIDENCE 10 (M2a_email) DON'T KNOW...... d (M2a email) REFUSED.....r (M2a_email) (M2A=02 and M2a_Rlshp=08) M2a_oth1. INTERVIEWER: PLEASE SPECIFY <OPEN> DON'T KNOW...... d REFUSED.....r (M2A=02 and M2a_Rlshp=09) M2a_oth2. INTERVIEWER: PLEASE SPECIFY <OPEN> DON'T KNOW d

8/23/2005 M-7 ROUND 2 VERSION

REFUSED.....r

(M2A=02)M2a_email. Do you have an email address? YES...... 01 NO 00 (M2CHECK) DON'T KNOW d (M2CHECK) REFUSED.....r (M2CHECK) (M2A=02 and M2a_email=01) M2b. What is your email address? EMAIL ADDRESS: <OPEN>_ DON'T KNOW...... d REFUSED.....r (All) M2CHECK. PROGRAMMER: ONLY ASK M2_PREPAY OF THE TREATMENT GROUP EXPTYPE=01, ELSE GO TO M3. IS {NAME} PART OF THE TREATMENT GROUP (EXPTYPE=01)? YES...... 01 NO 00 (M3) (M2CHECK=01) M2_PrePay. Did {you/NAME} receive a check for \$10.00 in the mail that {you/NAME} can cash? DON'T KNOW...... d (M3) REFUSED...... r (M3) PROGRAMMER: IF CAPI CASE, THEN DISPLAY M2_PREPAY BELOW M2_PrePay. INTERVIEWER: ARE YOU GIVING THE CHECK TO THE RESPONDENT? (M2CHECK=01,00 or M2_PrePay=00,d, r) M3. Would you like the check made out to {you/NAME} or someone else?

(M2_PrePay=00,d, r or M3=02,d,r) PROGRAMMER: WE WOULD LIKE THE FOLLOWING FORMAT TO BE USED FOR THE DISPLAY ON TOP HALF OF SCREEN (IF POSSIBLE, THIS DISPLAY SHOULD CHANGE AS THE INTERVIEWER ENTERS NEW INFORMATION): What is the name and address of the person to whom we should send the \$10.00 check? NAME: {FULL NAME FROM M1} STREET ADDRESS 1: {FIRST LINE OF ADDRESS FROM M1} STREET ADDRESS 2: {SECOND LINE OF ADDRESS FROM M1} STREET ADDRESS 3: {THIRD LINE OF ADDRESS FROM M1} CITY OR TOWN: {CITY OR TOWN FROM M1} STATE: {STATE FROM M1} ZIP CODE: {ZIP CODE FROM M1} TELEPHONE NUMBER: {TELEPHONE NUMBER FROM M1} INCORRECT INFORMATION ABOVE, NEED TO ENTER NEW DON'T KNOW...... d (M6) REFUSED...... r (M6) PROGRAMMER: SEE M1 FOR FORMATTING TO USE FOR BOTTOM OF SCREEN (M2_PrePay=00,d, r or M3=02,d,r and M4=01) M4_Firstname. NAME: First name? <OPEN> ______ DON'T KNOW...... d REFUSED.....r (M2_PrePay=00,d, r or M3=02,d,r and M4=01) M4_Middlename. NAME: {DISPLAY FIRST NAME FROM QUESTION M4_FIRSTNAME} Middle initial? <OPEN>

(M2_PrePay=00,d, r or M3=02,d,r and M4=01)

M4_Lastname.

NAME: {DISPLAY FIRST NAME FROM QUESTION M4_FIRSTNAME AND MIDDLE NAME FROM M4_MIDDLENAME}

DON'T KNOW...... d
REFUSED...... r

Last name?

<OPEN>

DON'T KNOW...... d
REFUSED......r

(M2_PrePay=00,d, r or M3=02,d,r and M4=01)
M4_City.

ADDRESS: {DISPLAY ADDRESS1, ADDRESS2, ADDRESS3, AND ADDRESS4 FROM PREVIOUS QUESTIONS}
Town or city?

<OPEN> _____

DON'T KNOWd REFUSED.....r

REFUSED.....r

(M2_Pre	ePay=00,d, r or M3=02,d,r and M4=	=01)						
M4_Sta	e.							
	ADDRESS: {DISPLAY ADDRE	SS1, ADDRESS2,	ADDRESS3	ADDRESS	4, AND	TOWN/CITY	FROM	PREVIOUS
	QUESTIONS}							
	State?							
	INTERVIEWER: USE TWO CHAP	RACTER ABBREVIA	ATION.					
	INTERVIEWER: ENTER ZZ TO E	NTER INTERNATION	NAL CITY AN	D COUNTRY	BELOW.			
	<open></open>							
		DON'T KNOW			. d			
		REFUSED			. r			
(M2_Pre	Pay=00,d, r or M3=02,d,r and M4=	=01)						
M4_Zip.								
	ADDRESS: {DISPLAY ADDRESS QUESTIONS}	S1, ADDRESS2, AI	DDRESS3, AD	DRESS4, TO	OWN/CITY	/, AND STAT	E FROM	I PREVIOUS
	Zip code?							
	<open></open>							
		DONUT KALOM						
		DON'T KNOW REFUSED						
(M2 Pr	Pay=00,d, r or M3=02,d,r and M4=	-01)						
Confirm		-01)						
	ADDRESS: {DISPLAY FULL ADD	RESS}						
	INTERVIEWER: PRESS 1 TO CO	ONTINUE						
(M2_Pre	Pay=00,d, r or M3=02,d,r and M4=	=01)						
M4_Tel	ephone.							
	TELEPHONE NUMBER:							
	Please give me the telephone nur	mber, area code first	?					
	<open></open>							
		DON'T KNOW						
		REFUSED			. r			
	AMMER: ASK M4_TIMEZONE IF The Pay=00,d, r or M3=02,d,r and M4=		CURRENTLY	ENTERED				
M4_Tim	eZone.							
	What time zone is that in?							
	INTERVIEWER: CURRENT TIME	ZONE: {DISPLAY	TIME ZONE BA	ASED ON}				
	HAWAII/ALEUTIAN TIMI	E ZONE			. 02			
	ALASKA TIME ZONE							
	PACIFIC TIME ZONE							
	MOUNTAIN TIME ZONE							
	CENTRAL TIME ZONE							
	EASTERN TIME ZONE .							
	ATLANTIC TIME ZONE.							

-	ePay=00,d, r or M3=02,d,r and M4=	01)		
M4_Cor	TELEPHONE NUMBER: {DISPLATIME ZO TIME ZONE: {DISPLAY TIME ZO			
	INTERVIEWER: PRESS 1 TO CO	ONTINUE		
(AII) M6.	CHECK: IS {NAME} PART OF TH	E PARTICIPANT SAMPLE (TSTATUS=01)?		
		YES		
		NO	. 00	(M11_Thanks)
(M6=01) M7.	Finally, in about one year the (your/his/her) health and other circ phone number of a close relative of	e Social Security Administration may wish cumstances. In case we have trouble reaching (or friend who is not living with (you/NAME) and ther, brother, sister, aunt, uncle, or close friend	you/ is lil	him/her), what is the name, address, and
	(Do you/Does NAME) have a conta	act person?		
	PROGRAMMER: PLEASE USE SINFORMATION	SAME FORMATTING AS M1 FOR SCREENS	S WI	HEN GATHERING CONTACT PERSON
CONTA	ACT PERSON 1			
		YES NO DON'T KNOW REFUSED	00 d	(M11_Thanks) (M11_Thanks)
	and M7=01) rstName. NAME: First name?			
	<open></open>	DON'T KNOWREFUSED		
•	and M7=01) ddleName. NAME: {DISPLAY FIRST NAME F Middle initial?	ROM CP1_FIRSTNAME}		
	<open></open>			
		DON'T KNOW		

	nd M7=01)	
CP1_Last		
	NAME: {DISPLAY FIRST NAME AND MIDDLE INITIAL FROM CP1_FIRSTNAME	EAND CP1_MIDDLENAME}
L	Last name?	
<	<open></open>	
	DON'T KNOW	
	REFUSED	r
(M6=01 aı	nd M7=01)	
•	NAME: {DISPLAY FULL NAME FROM PREVIOUS QUESTIONS}	
	NTERVIEWER: PRESS 1 TO CONTINUE	
-	nd M7=01)	
CP1_Addı	ressi. ADDRESS:	
	Street and number?	
II	NTERVIEWER: REFUSED OR DON'T KNOW ALLOWED, WILL SKIP REST OF	ADDRESS QUESTIONS.
_	<open></open>	
	COPEN>	
	DON'T KNOW	d
	REFUSED	r
/MC 04 a		
(เชเธ≡บา ai CP1_Addi	nd M7=01)	
-	ADDRESS: {DISPLAY CP1_ADDRESS1}	
	PROBE: READ IF NECESSARY: Second part of the address.	
<	OPEN>	
	DON'T KNOW	d
	REFUSED	r
•	nd M7=01)	
CP1_Addı	ADDRESS: {DISPLAY CP1_ADDRESS1 AND CP2_ADDRESS2}	
	PROBE: READ IF NECESSARY: Third part of the address.	
	·	
<	OPEN>	
	DON'T KNOW	d
	REFUSED	
	1121 0025	•
•	nd M7=01)	
CP1_Addi		
	ADDRESS: {DISPLAY CP1_ADDRESS1, CP2_ADDRESS2, AND CP_ADDRESS	S3}
F	PROBE: READ IF NECESSARY: Fourth part of the address.	
<	<pre><open></open></pre>	
	DON'T KNOW	
	REFUSED	r

-	and M7=01)	
CP1_Ci	=	DDRESS1, CP2_ADDRESS2, CP_ADDRESS3, AND CP_ADDRESS4}
	Town or city?	, _ , _ , _ , ,
	<open></open>	
		DON'T KNOW d REFUSED r
-	and M7=01)	
CP1_St		DDRESS1, CP2_ADDRESS2, CP_ADDRESS3, CP_ADDRESS4, AND CP1_CITY}
	INTERVIEWER: USE TWO CI	IARACTER ABBREVIATION. DENTER INTERNATIONAL CITY AND COUNTRY BELOW.
	<open></open>	
		DON'T KNOWd REFUSEDr
(M6=01 CP1_Zi _l		
	ADDRESS: {DISPLAY CP: CP1_STATE} Zip code?	_ADDRESS1, CP2_ADDRESS2, CP_ADDRESS3, CP_ADDRESS4, CP1_CITY, AN
	<open></open>	
		DON'T KNOW d REFUSED r
•	and M7=01) i. ADDRESS: {DISPLAY CP1_ AND CP1_ZIPCODE}	ADDRESS1, CP2_ADDRESS2, CP_ADDRESS3, CP_ADDRESS4, CP1_CITY, CP1_STAT
	INTERVIEWER: PRESS 1 TO	CONTINUE
•	and M7=01) elephone. TELEPHONE NUMBER: Please give me the telephone	number, area code first?
	<open></open>	
		DON'T KNOW d REFUSED r

PROGRAMMER: ASK CP1_TIMEZONE IF NO TIME ZONE IN SYSTEM FOR NUMBER ENTERED (M6=01 and M7=01) CP1_TimeZone. What time zone is that in?

CP1_TimeZone. What time zone is that in?		
INTERVIEWER: CURRENT TIME ZONE: {DISPLAY TIME ZONE BASED ON}		
HAWAII/ALEUTIAN TIME ZONE	02	
ALASKA TIME ZONE		
PACIFIC TIME ZONE		
MOUNTAIN TIME ZONE		
CENTRAL TIME ZONE		
EASTERN TIME ZONE		
ATLANTIC TIME ZONE	08	
NEWFOUNDLAND TIME ZONE		
OTHER INTERNATIONAL TIME ZONE	98	
(M6=01 and M7=01) Confirm. TELEPHONE NUMBER: {DISPLAY PHONE NUMBER FROM PREVIOUS QUE TIME ZONE: {DISPLAY PHONE NUMBER FROM PREVIOUS QUESTIONS} INTERVIEWER: PRESS 1 TO CONTINUE	STIOI	NS}
(M6=01 and M7=01) M8. How is that person related to {you/NAME}, if at all?		
into. How is that person related to {you/NAME}, if at all?		
{NAME'S} SPOUSE	01	(M9)
{NAME'S} MOTHER	02	(M9)
{NAME'S} FATHER	03	(M9)
{NAME'S} CHILD	04	(M9)
GRANDPARENT OF {NAME}		
BROTHER/SISTER (NATURAL/STEP) OF {NAME}		
AUNT/UNCLE OF {NAME}	07	(M9)
OTHER RELATIVE OF {NAME}		
NOT RELATED		
STAFF AT RESIDENCE		(M9)
DON'T KNOW		(M9)
REFUSED	r	(M9)
(M6=01 and M7=01 and M8=08) M8_h_oth.		
INTERVIEWER: PLEASE SPECIFY		
<open></open>	_	
DON'T KNOW	Ч	
REFUSED		
(MC 04 M7 04 and M0 00)		

REFUSED.....r

CONT	ACT PERSON
	2
(M6=01	and M7=01)
M9.	Can you give

e me the name, address, and phone number of another person? DON'T KNOW d (M11_Thanks) REFUSED..... r (M11_Thanks) (M6=01 and M9=01) CP2_FirstName. NAME: First name? <OPEN> DON'T KNOW...... d REFUSED.....r (M6=01 and M9=01) CP2_MiddleName. NAME: {DISPLAY CP2_FIRSTNAME} Middle initial? <OPEN> _____ DON'T KNOW...... d REFUSED.....r (M6=01 and M9=01) CP2_LastName. NAME: {DISPLAY CP2_FIRSTNAME AND CP2_MIDDLENAME} Last name? DON'T KNOW d REFUSED.....r (M6=01 and M9=01) Confirm. NAME: {DISPLAY CP2_FIRSTNAME, CP2_MIDDLENAME, AND CP2_LASTNAME} INTERVIEWER: PRESS 1 TO CONTINUE (M6=01 and M9=01) CP2_Address1. ADDRESS: Street and number? INTERVIEWER: REFUSED OR DON'T KNOW ALLOWED, WILL SKIP REST OF ADDRESS QUESTIONS. <OPEN> DON'T KNOW...... d REFUSED.....r

(M6=01 and M9=01)

CP2_State.

ADDRESS: {DISPLAY CP2_ADDRESS1, CP2_ADDRESS2, CP2_ADDRESS3 CP2_ADDRESS4, AND CP2_CITY} State?

INTERVIEWER: USE TWO CHARACTER ABBREVIATION.

INTERVIEWER: ENTER ZZ TO ENTER INTERNATIONAL CITY AND COUNTRY BELOW.

<OPEN> ______

DON'T KNOW d
REFUSED r

M6=01 and M9=01)		
CP2_ZipCode.	P2_ADDRESS1, CP2_ADDRESS2, CP2_ADDRESS3	CD2 ADDDESS4 CD2 CITY AND CD2
ZIPCODE}	-z_address1, GFz_address2, GFz_addresss	CF2_ADDRESS4, CF2_CITT, AND CF2
Zip code?		
•		
<open></open>		
	DON'T KNOWREFUSED	
M6=01 and M9=01) Confirm. ADDRESS: {DISPLAY ZIPCODE, AND CP2_ZIPCODE}	CP2_ADDRESS1, CP2_ADDRESS2, CP2_ADDRES	SS3 CP2_ADDRESS4, CP2_CITY, CP2
INTERVIEWER: PRESS 1 TO	CONTINUE	
M6=01 and M9=01) CP2_Telephone. TELEPHONE NUMBER: Please give me the telepho	one number, area code first?	
<open></open>		
	DON'T KNOWREFUSED	
PROGRAMMER: ASK CP2_TIMEZOM6=01 and M9=01) CP2_TimeZone. What time zone is	ONE IF NO TIME ZONE IN SYSTEM FOR NUMBER E	NTERED
or z_minezone. What time zone is	ulat III:	
INTERVIEWER: CURREN	T TIME ZONE: {DISPLAY TIME ZONE BASED ON}	
HAWAII/ALEUTIA	N TIME ZONE	02
ALASKA TIME ZO	DNE	03
	ONE	
	ZONE	
	ZONE	
	ZONEZONE	
	D TIME ZONE	
	ATIONAL TIME ZONE	
M6=01 and M9=01)		
Confirm. TELEPHONE NUMBER: {[DISPLAY CP2 TELEPHONE}	
TIME ZONE: {DISPLAY CF	· · · · · · · · · · · · · · · · · · ·	

INTERVIEWER: PRESS 1 TO CONTINUE

(M6=01 M10.	and M9=01) How is that person related to {you/NAME}, if at all?		
	{NAME'S} SPOUSE	02 03 04 05 06 07 08 09 10 d	(M11_Thanks) (M11_Thanks) (M11_Thanks) (M11_Thanks) (M11_Thanks) (M11_Thanks) (M11_Thanks) (M10_i_oth) (M11_Thanks) (M11_Thanks)
(M6=01 M10_h_	and M9=01 and M10=08) oth. INTERVIEWER: PLEASE SPECIFY		
	<open></open>		
	DON'T KNOW	~	
(M6=01 M10_i_0	and M9=01 and M10=09) oth. INTERVIEWER: PLEASE SPECIFY		
	<open></open>		
	DON'T KNOWREFUSED		
(All) M11_Th	nanks. Thank you for your cooperation. This completes the survey! Thank you aga	ıin.	
	PRESS 1 TO CONTINUE	01	
INTERV	IEWER OBSERVATIONS:		
(All) M11.	INTERVIEWER: INTERVIEWER OBSERVATIONS:		
	Who was the respondent to this interview?		
	INTERVIEWER: PLEASE CODE THE PERSON WITH WHOM YOU CONDUCTE	D M	OST OF THE INTERVIEW.
	{NAME} HIMSELF/HERSELF PROXY FOR {NAME}		(M13)
(M11=0			
M12.	Was {NAME} assisted by anyone during this interview? That is, did anyone help { answers?	NAN	ME} in interpreting the questions or giving

8/23/2005 M-19 ROUND 2 VERSION

 (M11=02 or M12=01)

M13. PROGRAMMER: IFM12=01 FILL "ASSISTANT" AND IF M11=02 FILL "PROXY" How is the {assistant/proxy} related to (NAME)?

INTERVIEWER: IF MORE THAN ONE ASSISTANT OR PROXY, INDICATE THE RELATIONSHIP OF THE ONE YOU CONSIDER TO BE THE MAIN ASSISTANT OR PROXY.

	{NAME'S} SPOUSE		
	{NAME'S} MOTHER	02	(M14)
	{NAME'S} FATHER	03	(M14)
	{NAME'S} CHILD	04	(M14)
	GRANDPARENT OF {NAME}	05	(M14)
	BROTHER/SISTER (NATURAL/STEP) OF {NAME}	06	(M14)
	AUNT/UNCLE OF {NAME}	07	(M14)
	OTHER RELATIVE OF {NAME}		
	NOT RELATED		(M13_i_oth)
	STAFF AT RESIDENCE		
	DON'T KNOW		, ,
	REFUSED		
			,
	02 or M12=01 and M13=08)		
M13_h_			
	INTERVIEWER: PLEASE SPECIFY		
	<open></open>		
	DON'T KNOW	d	
	REFUSED	r	
(M11=0) M13_i_c	2 or M12=01 and M13=09)		
W110_1_0	INTERVIEWER: PLEASE SPECIFY		
	<open></open>		
	DON'T KNOW	Ч	
	REFUSED	-	
/N/4/4 O		ı	
•	2 or M12=01) PROGRAMMER: IFM12=01 FILL "ASSISTANT" AND IF M11=02 FILL "PROXY"		
M14.			
	PROGRAMMER: ONLY DISPLAY RESPONSE OPTION 10, IF M11=02		
	Why was an {assistant/proxy} needed?		
	INTERVIEWER: CODE ALL THAT APPLY.		
	(NAME) DIDNIT (ANOM HOM TO ANOMED	0.4	(B.44.5)
	{NAME} DIDN'T KNOW HOW TO ANSWER		(M15)
	{NAME} HOSPITALIZED		
	{NAME} INSTITUTIONALIZED		(M15)
	{NAME} HAS HEARING PROBLEM		(M15)
	{NAME} HAS SPEECH PROBLEM		(M15)
	{NAME} HAS LANGUAGE PROBLEM		(M15)
	{NAME} HAS POOR MEMORY OR CONFUSION		(M15)
	{NAME} HAS OTHER MENTAL CONDITION		(M15)
	{NAME} HAS PHYSICAL ILLNESS OR DISABILITY		(M15)
	{NAME} FAILED COGNITIVE TEST	11	(M15)*
	OTHER NON-HEALTH RELATED REASON	10	
	DON'T KNOW	d	(M15)
	REFUSED	r	(M15)

^{*}Note: M14=11 is a new category added at R2; value of "other" category (M14=10) maintained for comparability across rounds.