National Beneficiary Survey Round 4

(Volume 2 of 3): Data Cleaning and Identification of Data Problems

Final Report

February 9, 2012

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Debra Wright

MATHEMATICA
Policy Research

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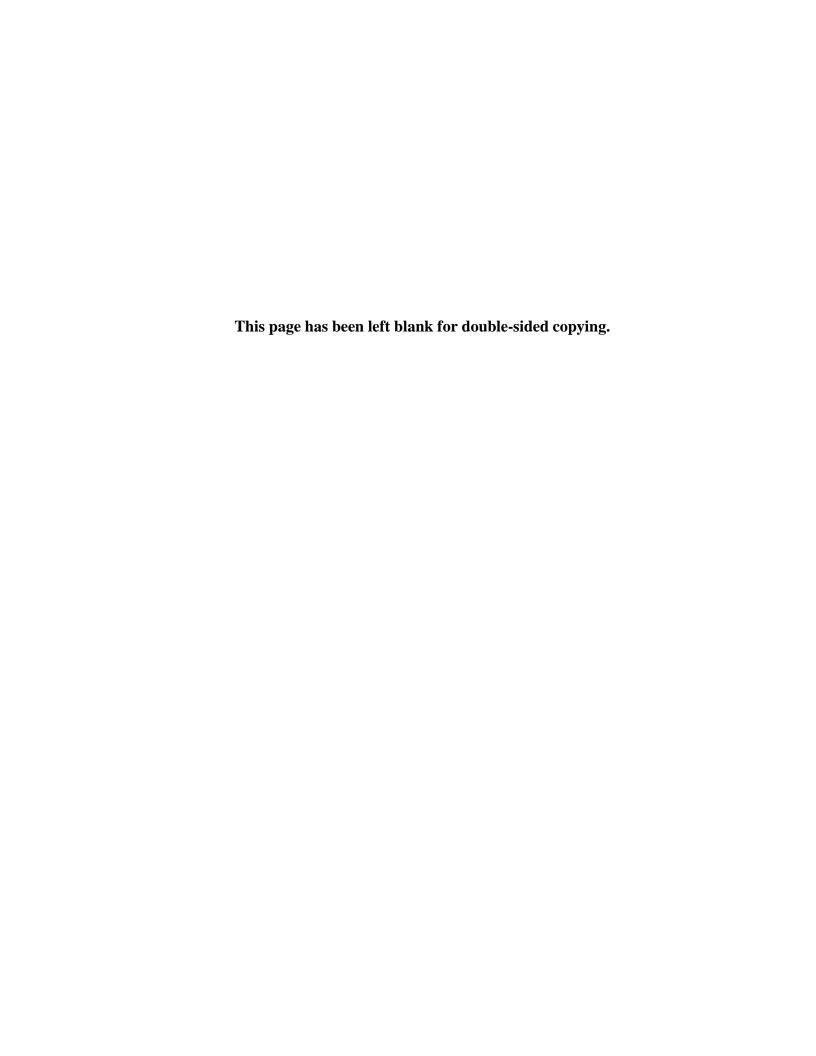Kirsten Barrett
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ERRATA

(Updated December 20, 2016)

The SF-8 mental component summary (MCS) and physical component summary (PCS) scores provided in the original National Beneficiary Survey (NBS) data files were calculated incorrectly. The original values excluded an intercept constant needed to scale the scores to general population norms. The intercept constant values are -10.11675 for the MCS, and -9.36839 for the PCS.

Because the intercept constants were not applied, the scores provided in the original data files were too high relative to what they should be on the population-based scale. Thus, if comparing NBS respondents to the general population, NBS respondents would appear healthier than they should. However, within the NBS respondent sample, the scores still appropriately represented greater or lesser mental and physical health according to the design of the SF-8.

The MCS and PCS variables included in the current data files have been corrected and are now valid for comparisons to other populations.

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CONTENTS

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TABLES

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ACRONYMS

ADL	Activities of Daily Living
CAPI	Computer-Assisted Personal Interviewing
CATI	Computer-Assisted Telephone Interviewing
EN	Employment Network
IADL	Instrumental Activities of Daily Living
ICD-9	International Classification of Diseases—9th revision
IWP	Individual Work Plan
NAICS	North American Industry Classification System
NBS	National Beneficiary Survey
SOC	Standard Occupational Classification
SSA	Social Security Administration
SSDI	Social Security Disability Insurance (Title II of the Social Security Act)
SSI	Supplemental Security Income (Title XVI of the Social Security Act)
SVRA	State Vocational Rehabilitation Agency (also called SVRA or VR)
TRS	Telecommunications Relay Service
TTY	Teletypewriter
TTW	Ticket to Work and Self-Sufficiency Program

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I. INTRODUCTION

As part of an evaluation of the Ticket to Work and Self-Sufficiency Program (TTW), Mathematica Policy Research (Mathematica) conducted Round 4 of the National Beneficiary Survey (NBS) in 2010. The survey, sponsored by the Social Security Administration's (SSA) Office of Retirement and Disability Policy, collected data from a national sample of SSA disability beneficiaries (hereafter referred to as the Representative Beneficiary Sample) and a sample of TTW participants (hereafter referred to as the Ticket Participant Sample). Mathematica collected data by using computer-assisted telephone interviewing (CATI), along with computer-assisted personal interviewing (CAPI) followups of CATI nonrespondents and of those who preferred or needed an in-person interview to accommodate their disabilities.

A voluntary employment program for people with disabilities, TTW was authorized by the Ticket to Work and Work Incentives Improvement Act of 1999 (TTWIIA). The legislation was designed to create market-driven services to help disability beneficiaries become economically self-sufficient. Under the program, SSA provides beneficiaries with a "Ticket," or a coupon, that they may use to obtain employment support services, including vocational rehabilitation, from an approved provider of the beneficiary's choice (called Employment Networks or ENs).[1]

A. NBS Objectives

The NBS is one of several components of an evaluation of the impact of TTW relative to the current system, the SSA Vocational Rehabilitation Reimbursement Program, which has been in place since 1981. The evaluation includes a process analysis as well as an impact and participation analysis. Along with the NBS, data sources include SSA administrative records and interviews with program stakeholders. The NBS collects data needed for the TTW evaluation that are not available from SSA administrative data or other sources.

The NBS has five objectives:

1. To provide critical data on the work-related activities of Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) beneficiaries, particularly as the activities relate to TTW implementation

2. To collect data on the characteristics and program experiences of beneficiaries who use their Ticket

3. To gather information on beneficiaries who do not use their Ticket and the reasons behind their decision

4. To collect data that will allow us to evaluate the employment outcomes of Ticket users and other SSI and SSDI beneficiaries

5. To collect data on service use, barriers to work, and beneficiaries' perceptions about TTW and other SSA programs that are designed to help SSA beneficiaries with disabilities find and retain jobs

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[1] For more information on the Ticket to Work Program, see Thorton et al. (2004).

In addition to meeting the study objectives, the Round 4 survey assessed the impact of changes made to the TTW program in July 2008, when new regulations took effect.

Round 4 NBS data will be combined with SSA administrative data to provide critical information on access to jobs and employment outcomes for beneficiaries, including those who do and do not participate in the TTW program. Though some sections of the NBS target beneficiary activity directly related to TTW, most of the survey captures more general information on SSA beneficiaries, including their disabilities, interest in work, use of services, and employment. As a result, SSA and external researchers who are interested in disability and employment issues may use the survey data for other policymaking and program-planning efforts.

B. NBS Sample Design Overview

SSA implemented the TTW program in three phases over three years, with each phase corresponding to about one-third of the states. The initial NBS survey design called for four national cross-sectional surveys (called "rounds") of Ticket-eligible SSA disability beneficiaries—one each in 2003, 2004, 2005, and 2006—and cross-sectional surveys of Ticket participants in each of three groups of states (Phase 1, Phase 2, and Phase 3 states)—defined by year of program implementation (Bethel and Stapleton 2002).[2] In addition, the design called for the first TTW participant cohort in each group of Ticket roll-out states to be followed longitudinally until 2006. The design subsequently underwent revision to accommodate Phase 1 data collection starting in 2004 rather than in 2003. In addition, Round 4 was postponed until 2010 to address the experiences of TTW participants under the new TTW regulations that took effect in July 2008. In Table I.1, we provide the original planned sample sizes for all rounds of data collection.

Under the initial design, the Round 4 surveys were to concentrate largely on following the Ticket Participant Sample interviewed in earlier rounds and on interviewing new Ticket participants in Phase 3 states. The cross-sectional Representative Beneficiary Sample in Round 4 was to be substantially smaller than the cross-sections in earlier rounds. However, changes in the Federal regulations that substantially altered the TTW program made it less meaningful to track the long-term experiences of beneficiaries who participated in the program under the old regulations. As a result, Ticket participants from previous rounds were not re-interviewed in Round 4 as part of the longitudinal sample and the sample design underwent revision to include a larger cross-section sample of beneficiaries and a representative cross-sectional Ticket Participant Sample.

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[2] The Ticket to Work program, implemented in 2002, was phased in nationwide over three years. In 2002, the first year of the program, SSA distributed Tickets in 13 Phase 1 states: Arizona, Colorado, Delaware, Florida, Illinois, Iowa, Massachusetts, New York, Oklahoma, Oregon, South Carolina, Vermont, and Wisconsin. In the Phase 2 roll-out, from November 2002 through September 2003, SSA distributed Tickets in 20 Phase 2 states and the District of Columbia: Alaska, Arkansas, Connecticut, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Montana, Nevada, New Hampshire, New Jersey, New Mexico, North Dakota, South Dakota, Tennessee, and Virginia. The Phase 3 roll-out ran from November 2003 through September 2004; SSA distributed Tickets in the remaining 17 Phase 3 states: Alabama, California, Hawaii, Idaho, Maine, Maryland, Minnesota, Nebraska, North Carolina, Ohio, Pennsylvania, Rhode Island, Texas, Utah, Washington, West Virginia, and Wyoming as well as in American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the Virgin Islands.

Table I.1. National Beneficiary and TTW Participant Sample Sizes—Initial Design

Sample[a]			Year 1	Year 2	Year 3	Year 4	All Years[c]
National Beneficiary Samples			7,200	4,800	2,400	1,500	15,900
Longitudinal TTW Participant Samples	Phase 1 Cohorts	(1)[b]	1,000	922	850	784	3,556
		(2)		1,000			1,000
	Phase 2 Cohorts	(1)		1,000	922	850	2,772
		(2)			1,000		1,000
	Phase 3 Cohorts	(1)			1,000	922	1,922
		(2)				1,000	1,000
	Total		1,000	2,922	3,772	3,556	11,250
Total Sample Size			8,200	7,722	6,172	5,056	27,150

Source: NBS Sample Design Report (Bethel and Stapleton 2002).

[a]Sample sizes refer to number of completed interviews

[b](1) = TTW participant longitudinal sample; (2) = TTW participant cross-sectional supplement

[c]This column is a tabulation of the number of interviews, not the number of sample members. Longitudinal cases may be included several times in these counts, depending on the number of completed interviews for the sample member in question.

In Rounds 1 through 3, we stratified Ticket participants by the implementation phase of their state of residence and, within each phase, according to the reimbursement system under which their Ticket provider received payments: the traditional cost reimbursement (CR) program, the milestone-outcome payment system, or the outcome-only payment system.[3] In the fourth round, it was no longer necessary to stratify by implementation phase since the TTW program was up and running in all areas. In Rounds 1 through 3, many of the Ticket participants sampled as having a Ticket assigned to a milestone-outcome or outcomes-only provider were signed up with State Vocational Rehabilitation Agencies (SVRA) rather than with ENs. Thus, the first three rounds overrepresented participants signed up with SVRAs. To compensate, in Round 4, we stratified the participant sample by the following provider and payment types: (1) participants with Tickets assigned to SVRAs receiving payments under the traditional CR payment system (referred to in this report as "traditional SVRA") and (2) participants with Tickets assigned to ENs or SVRAs functioning as ENs under the TTW program (referred to in this report as "non–SVRA ENs" and "SVRA ENs"). Participants who assigned their Ticket to an EN were oversampled. Because the number of tickets assigned to the SVRA ENs and Non-SVRA ENs was low among Ticket participants, we selected both a clustered and unclustered sample of participants for each provider type. The sample of participants using the traditional payment type was limited to a clustered sample. For the Ticket Participant Sample, the target population included beneficiaries who had used the Ticket at least once on January 1, 2009 or between January 1, 2009 and October 2, 2009. The target number of completed interviews for participants at Round 4 was 3,000 overall, with a target of approximately

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[3] ENs may choose to be paid under the traditional payment system or under one of two other payment systems developed specifically for the Ticket program: (1) an outcome-only payment system or (2) a milestone-outcome payment system. Under both systems, SSA makes up to 60 monthly payments to the EN for each assigned beneficiary who does not receive SSDI or SSI payments because of work or earnings. Under the milestone-outcome payment system, SSA pays smaller monthly payments in the event that the beneficiary leaves cash benefits, but it will also pay the EN for up to four milestones achieved by a beneficiary.

750 interviews each for traditional SVRAs and SVRA ENs and 1,500 interviews for non–SVRA ENs.

The target population in Round 4 for both the Representative Beneficiary and Ticket Participant Samples consisted of SSI and/or SSDI beneficiaries between the ages of 18 and 65. For the Representative Beneficiary Sample, the target population included beneficiaries in all 50 states and the District of Columbia who were in an active pay status as of June 30, 2009.[4] As in prior rounds, we stratified the cross-sectional Representative Beneficiary Sample by four age-based strata: 18- to 29-year-olds, 30- to 39-year-olds, 40- to 49-year-olds, and 50-year-olds and older. To ensure a sufficient number of persons seeking work, beneficiaries in the first three cohorts were oversampled (18- to 49-year-olds). The target number of completed interviews for Round 4 was 667 beneficiaries in each of the three younger age groups (18 to 29 years, 30 to 39 years, and 40 to 49 years). For those 50 years and older, the target number of completed interviews totaled 400 beneficiaries. Table 1.2 summarizes the actual sample sizes and number of completed interviews for both samples under the revised design.

Table I.2. NBS Round 4 Actual Sample Sizes, Target Completes, and Completes—Implemented Design

Sampling Strata	Sample Size	Target Completed Interviews	Actual Completed Interviews
Representative Beneficiary Sample	3,683	2,400	2,298
18- to 29-years-old	1,029	666	634
30- to 39-years-old	1,032	666	625
40- to 49-years-old	1,019	666	643
50 or more	603	402	396
Ticket Participant Sample	4,334	3,000	2,780
Employment Networks	3,251	2,250	2,030
Non-SVRA providers	2,157	1,500	1,352
SVRA providers	1,094	750	678
Traditional SVRA	1,083	750	750
Total Sample Size	8,017	5,400	5,078

Source: NBS, Round 4.

For all survey rounds, the NBS used a multistage sampling design with a supplemental single-stage sample for some Ticket participant populations. For the multistage design, data from SSA on the counts of eligible beneficiaries in each county formed the primary sampling units (PSU), which consisted of one or more counties. The same PSUs were used for all four rounds, with the selection of PSUs occurring in Round 1. The sampling design section of the User's Guide (Wright et al. 2012) details the selection of PSUs.

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[4] Beneficiaries in the Representative Beneficiary sample with selected non-payment status codes were included only if the denial variable was blank. However, based on our experience in prior rounds, we received an updated data extraction after sampling and prior to fielding to identify beneficiaries who may have been in a "holding" status at the time of sample selection, but who had subsequently been denied benefits. These cases were coded as ineligible prior to fielding. Due to time constraints, this extraction was limited to SSI files at Round 4. Hence, the payment-type distribution among ineligible cases contains more SSI-only cases and fewer SSDI-only cases than would be expected if the ineligible cases were like the rest of the population. Individuals in the TTW Participant sample were not evaluated based on pay status since they were determined to be "Ticket eligible" by SSA.

C. Round 4 Survey Overview

The NBS was designed and implemented to maximize both response and data quality. Table I.3 describes the most significant sources of potential non-sampling error identified at the outset of the NBS and describes the ways we attempted to minimize the impact of each. A more detailed discussion of our approach to minimizing total survey error can be found in Appendix A of the Round 4 User's Guide (Wright et al. 2012).

Table I.3. Sources of Error, Description, and Methods to Minimize Impact

Sources of Error	Description	Effort of Minimized
Specification	Error that results when the concept intended to be measured by the question is not the same as the concept the respondent ascribes to the question.	Cognitive interviewing during survey development[a] and pretesting; use of proxy if sample member unable to respond due to cognitive disability
Unit Non-response	Error that occurs when selected sample member is unwilling or unable to participate (failure to interview). Can result in increased variance and potential for bias in estimates if non-responders have different characteristics than responders.	Interviewer training; intensive locating; in-person data collection; refusal conversion; incentives; non-response adjustment to weights.
Item Non-response	Error that results when items are left blank or the respondent reports that he/she does not know the answer or refuses to provide an answer (failure to obtain and record data for all items). Can result in increased variance and potential bias in estimates if non-responders have different characteristics than responders.	Use of probes; allowing for variations in reporting units; assurance of confidentiality; assistance during interview; use of proxy if sample member unable to respond due to cognitive disability; imputation on key variables.
Measurement Error	Errors that occur as a result of the respondent or interviewer providing incorrect information (either intentionally or unintentionally). May result from inherent differences in interview mode.	Same instrument used in both interview modes; Use of probes; adaptive equipment; interviewer training, validation of in-field interviews; assistance during interview; use of proxy if sample member unable to respond due to cognitive disability
Data Processing Errors	Errors in data entry, coding, weighting, and/or analyses.	Coder training; monitoring and quality control checks of coders; quality assurance review of all weighting and imputation procedures

[a]Conducted during survey development phase under a separate contract held by Westat.

Item non-response was not expected to be a large source of error since there were few obviously sensitive items in the survey. In fact, item non-response was greater than 5 percent only for select items asking for wages and household income. Unit non-response was the greater concern given the population, thus the survey was designed to be executed as a dual-mode survey. Mathematica made initial attempts to interview beneficiaries using CATI followed by CAPI of nonrespondents. CAPI interviews were attempted with respondents who requested an in- person interview, needed an in-person interview to accommodate a disability, or did not have a telephone or

whose telephone number could not be located.[5] If a sample person was not able to participate in the survey because of his or her disability, Mathematica sought a proxy respondent. To promote response among Hispanic populations, the questionnaire was available in Spanish. For languages other than English or Spanish, interpreters conducted interviews. A number of additional accommodations were made available for those with hearing and/or speech impairments including teletypewriter (TTY), Telecommunications Relay Service (TRS), amplifiers, and instant messaging technology. To reduce measurement error, the survey instrument was identical in each mode.

Round 4 CATI data collection for both Representative Beneficiary and Ticket Participant samples began in April 2010.[6] Beginning in August 2010, Mathematica began in-person locating and CAPI and continued, concurrent with CATI interviewing, through December 2010. As shown in Table I.2, the NBS Round 4 sample comprised 3,683 cases selected for the Representative Beneficiary Sample and 4,334 cases selected for the Ticket Participant Sample (for a total of 8,017 cases).[7]

1. Completes and Response Rates

In total, Mathematica completed 5,078 cases (including 38 partially completed interviews)[8]— 2,298 from the Representative Beneficiary Sample and 2,780 from the Ticket Participant Samples. An additional 222 beneficiaries and 77 Ticket participants were deemed ineligible for the survey.[9] Across both samples, Mathematica completed 3,936 cases by telephone and 1,142 by CAPI. Proxy interviews were completed for 998 sample members. In 152 cases, the sample member was unable to participate and a proxy could not be identified. The weighted response rate for the Representative Beneficiary Sample was 72.8 percent. The weighted response rate for the Ticket Participant Sample was 71.4 percent. More information about sample selection and sampling weights is available in Grau et al. (2012).

Despite intensive locating and contact efforts, we obtained fewer than the targeted number of completes in most sampling strata at Round 4, particularly for the Ticket Participant EN sample, and achieved response rates that were substantially lower than in prior rounds (see Table I.3). There are two main reasons for this. First, data collection began later than planned due to delays in receiving OMB clearance, thus requiring data collection to continue throughout the fall and winter holiday seasons; these are time periods when sample members are often harder to contact and less likely to agree to participate in a voluntary survey. Overall, more beneficiaries refused participation than in

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[5] Ticket participants in the unclustered sample were not eligible for in-person interviewing.

[6] Interviewing began approximately eight months after the sample was selected.

[7] Given that the clustered and unclustered samples of the Ticket Participant Sample were independent, it was possible for individuals to be chosen for both samples. It was also possible for a sample member to be chosen for both the Representative Beneficiary Sample and the Ticket Participant Sample. Interviews for duplicate cases were conducted only once but recorded twice (once for each sample). The counts given above include the duplicates as separate cases.

[8] Partial interviews were considered as completed if responses were provided through Section H of the interview (or, if the respondent was not eligible to receive Section H, through Section G).

[9] We statused as ineligible any beneficiaries who died between sample selection and the start of data collection based on information obtained from LexisNexis\Accurint prior to the start of data collection. Additionally, beneficiaries who were found to be deceased, incarcerated, no longer living in the continental United States, or reported that they had not received benefits in the past five years at the time of the interview, were statused as ineligible during the data collection period.

prior rounds, particularly among the TTW participant sample (12 percent compared to 9 percent in the prior round). Second, compared to previous rounds of the NBS, contact information was invalid for significantly more beneficiaries—63 percent of the released sample required locating versus an average of 40 percent in Rounds 1 through 3. Beneficiaries were more difficult to find than in prior rounds, with a higher percentage of unlocated cases remaining at the end of data collection (5.5 percent, compared to 3.6 percent in Round 3). We speculate that the depressed economic conditions experienced nationwide may have led to displacement within this population. Finally, in accord with an increasing trend for household surveys, we placed more calls on average in an attempt to complete an interview than we did in Round 3 (31 versus 25), and significantly more cases resulted in a "noncontact" status (i.e., repeated attempts that end with an answering machine or no answer at all); 9.3 percent in Round 4, compared to 3.4 percent in Round 3.

In response to the lower yield rates, we applied several strategies to increase response, including sending prepaid incentives to the remaining nonrespondents in the last six weeks of the data collection period. We also considered the possibility of extending the data collection period to continue our effort on hard-to-reach cases. However, because several questions in the survey ask respondents to report on behaviors that occurred in 2009, we were concerned that interviewing in 2011 would negatively impact recall and increase measurement error. In addition, extending the data collection period would have increased costs and only marginally increased the number of completes. We thus estimated how a reduction in target completes would impact minimal detectable differences for key variables and revised the targets per strata based on this estimate. Because our analyses suggested that the minimal detectable differences would not differ substantially from what would have been achieved had the original target number of completed been obtained, SSA agreed to accept fewer completes per strata than originally proposed. We added additional samples to ensure these targets would be met. While this further suppressed response rates, it was viewed as a necessary tradeoff to ensure statistical power for analyses.

2. Nonresponse Bias

Because the weighted response rates within strata ranged from 67.3 to 75.2 percent and the overall response rate was less than 80 percent, we conducted a nonresponse bias analysis at the conclusion of data collection using all 8,017 sample cases, to determine if there were systematic differences between respondents and nonrespondents that could result in nonresponse bias. This analysis was not conducted in previous rounds of the NBS, since the response rates were close to or exceeded 80 percent (the assumption was that that the effect of nonresponse bias on final estimates was minimal).

In sum, our analysis indicates that the nonresponse adjustment alleviated nearly all differences observed between respondents and nonrespondents in both the beneficiary and participant samples with two exceptions for the beneficiary sample. First, the nonresponse-adjusted weighted estimate of the beneficiary type differed from the frame for SSI-only cases, even though the original estimate (including all sampled cases) did not differ from the frame. Second, the nonresponse-adjusted weighted proportion of Asians is significantly less than the frame value. The full nonresponse bias analysis can be obtained from SSA (http://www.socialsecurity.gov/disabilityresearch/publicusefiles.html).

D. NBS Data Documentation Reports

The following publically available reports are available from SSA on their website (http://www.socialsecurity.gov/disabilityresearch/publicusefiles.html):

- **User's Guide for Restricted- and Public-Use Data Files** (Wright et al. 2012). This report provides users with information about the restricted- and public-use data files, including construction of the files; weight specification and variance estimation; masking procedures employed in the creation of the Public-Use File; and a detailed overview of the questionnaire design, sampling, and NBS data collection. The report provides information covered in the two reports mentioned above, including procedures for data editing, coding of open-ended responses, and variable construction, and a description of the imputation and weighting procedures and development of standard errors for the survey. In addition, this report contains an appendix addressing Total Survey Error (TSE) and the NBS.

- **NBS Public-Use File Codebook** (Rall et al. 2012). This codebook provides extensive documentation for each variable in the file, including variable name, label, position, variable type and format, question universe, question text, number of cases eligible to receive each item, constructed variable specifications, and user notes for variables on the public-use file. The codebook also includes frequency distributions and means as appropriate.

- **NBS Questionnaire** (Wright et al. 2012). This document contains all items on the Round 4 NBS and includes documentation of skip patterns, question universe specifications, text fills, interviewer directives, and consistency and range checks.

- **Editing, Coding, Imputation, and Weighting Report** (Grau et al. 2012). This report summarizes the editing, coding, imputation, and weighting procedures as well as the development of standard errors for Round 4 of the NBS. It includes an overview of the variable naming, coding, and construction conventions used in the data files and accompanying codebooks; describes how the sampling weights were computed to the final post-stratified analysis weights for both the Representative Beneficiary Sample and Ticket Participant Sample (and describes the procedures for combining the samples); outlines the procedures used to impute missing responses; and discusses procedures that should be used to estimate sampling variances for the NBS.

- **Cleaning and Identification of Data Problems Report** (current report). This report describes the data processing procedures performed for Round 4 of the NBS. It outlines the data coding and cleaning procedures and describes data problems, their origins, and the corrections implemented to create the final data file. The report describes data issues by sections of the interview and concludes with a summary of types of problems encountered and general recommendations.

- **NBS Nonresponse Bias Analysis** (Grau et al. 2012). The purpose of this report is to determine if the nonresponse adjustments applied to the sampling weights of the Round 4 NBS appropriately account for differences between respondents and nonrespondents, or if the potential for nonresponse bias still exists.

The following restricted use reports are available from SSA through a formal agreement:

- **NBS Restricted-Access Codebook** (Rall et al. 2012). This codebook provide extensive documentation for each variable in the file, including variable name, label, position, variable type and format, question universe, question text, number of cases eligible to receive each item, constructed variable specifications, and user notes for variables on the

restricted-access file. The codebook also includes frequency distributions and means as appropriate.

Mathematica conducted an extensive review of the NBS data in order to identify data problems before analysis. In the following discussion, we describe the data processing procedures that we performed for Round 4 of the NBS. We outline the data coding and cleaning procedures and describe data problems, their origins, and the corrections implemented to create the final data file. We begin with an overview of the NBS instrument. We then describe data issues by sections of the interview and conclude with a summary of types of problems encountered and general recommendations.

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II. DESCRIPTION OF THE NBS INSTRUMENT

The NBS collects data on a wide range of topics, including employment, disability, experience with SSA programs, employment services used in the past year, health and functional status, health insurance, income and other assistance, and sociodemographic information. The survey items were developed and initially pre-tested as part of a separate contract held by Westat. Mathematica conducted a CATI pretest in December 2003 to test the programmed instrument prior to fielding the NBS and completed 74 pre-test interviews—32 with participants and 42 with nonparticipants. As a result of the pre-test, Mathematica identified the need for minor instrument changes and corrected programming problems before full-scale CATI interviewing began. Details of the pre-test are in the NBS Round 1 User's Guide (Wright et al. 2009).

Mathematica subsequently made revisions to the survey items to prepare the instrument for CATI/CAPI programming and then added minor wording changes in response to pre-testing results. Minor revisions made in Round 4 accommodated changes to the sample design and captured changes to the TTW program. More information about the questionnaire is available in the Round 4 User's Guide (Wright et al. 2012). The survey instrument is available from SSA (http://www.socialsecurity.gov/disabilityresearch/publicusefiles.html).

To promote responses among Hispanic populations, Mathematica translated the questionnaire into Spanish. If, in some cases, a Spanish speaker was more familiar with a word or term in English than in Spanish, we provided the term in both languages, allowing interviewers to reinforce the question by using the second language as a probe, if necessary.[10] We treated measurements in a similar way. Questions that mentioned a particular weight also mentioned the kilogram equivalent.[11] Interpreters participated as needed to conduct interviews in languages other than Spanish.

A. Summary of Modules

The questionnaire is divided into 13 sections, labeled A through M:

- Section A—Introduction and Screener
- Section B—Disability and Current Work Status
- Section C—Current Employment
- Section D—Jobs/Other Jobs During 2009
- Section E—Awareness of SSA Work Incentive Programs and Ticket to Work
- Section F—Ticket Non-Participants in 2009
- Section G—Employment-Related Services and Supports Used in 2009

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[10] For example, on Item L-5: Did {you/NAME} receive any food stamps last month? Spanish: Recibió {usted/NAME} food stamps o cupones de alimentos el mes pasado?

[11] For example, on Item Jb-10: {Do you/Does NAME} have any difficulty lifting and carrying something as heavy as 10 pounds, such as a full bag of groceries? Spanish: Tiene {usted/NAME} cualquier dificultad en levantar y cargar algo que pesa hasta unas 10 libras {4½ kilos}, tal como una bolsa llena con compras del mercado?

- Section H—Ticket Participants in 2009

- Section I—Health and Functional Status

- Section J—Health Insurance

- Section K—Income and Other Assistance

- Section L—Sociodemographic Information

- Section M—Closing Information and Observations

Descriptions of each section follow.

1.   Section A—Screener

This section confirms that the interviewer has contacted the correct sample person and verifies that the sample person is still eligible for the survey. In addition, the screener allows interviewers to:

- Identify any barriers to participation and, if needed, identify a proxy respondent. The sample member was offered every opportunity to complete the interview himself or herself; a proxy responded only if necessary.

- Identify the need for an interpreter for a respondent speaking a language other than English or Spanish.

- Administer a cognitive assessment to ensure that the respondent was capable of completing a complex survey.

The screener presents three statements: (1) a brief description of what it means that the survey is confidential, (2) what it means that the survey is voluntary, and (3) an overview of the study topics, and then asks the respondent to reiterate the concepts in his or her own words. If the respondent could not restate a concept, the question was read a second time. If the respondent still could not restate a concept, he or she was asked if someone else (such as a friend, parent, caseworker, or payee) could answer questions about his or her health, daily activities, and any jobs he or she might hold. We then pursued an interview with the proxy respondent. To minimize bias in reporting, the screener did not ask the proxy respondent to provide subjective assessments on behalf of the sample person with respect to, for example, satisfaction with jobs or programs. The constructed variable C_Rtype indicates whether the sample person or a proxy completed most of the interview.

2.   Section B—Disability and Current Work Status

This section collects information on the beneficiary's limiting physical or mental condition(s) and current employment status. If the beneficiary is not currently employed, the section explores reasons for not working. It also asks questions to determine the job characteristics that are important to beneficiaries and collects information about work-related goals and expectations.

3.   Section C—Current Employment

This section collects detailed information about the beneficiary's current job(s). Respondents address type of work performed, type of employer, hours worked, benefits offered, and wages

earned. Section C also asks about work-related accommodations—those received as well as those needed but not received. Other questions solicit information about job satisfaction.

4.   Section D—Jobs/Other Jobs During 2009

This section collects information about employment during the 2009 calendar year, including type(s) of employer(s), hours worked, wages earned, and reasons for leaving employment, if applicable. Other questions ask whether beneficiaries worked or earned less than they could have (and, if so, why) and collect information about experiences related to Social Security benefit adjustments due to work.

5.   Section E—Awareness of SSA Work Incentive Programs and Ticket to Work

This section asks questions to assess whether the beneficiary is aware of or is participating in SSA work incentive programs and services. For the TTW program, we collected information on how beneficiaries learned about the program and the names and dates they signed up with their current service providers.

6.   Section F—Ticket Nonparticipants in 2009

This section pertains to beneficiaries who do not participate in the TTW program and collects data on reasons for nonparticipation. It asks whether the beneficiary has attempted to learn about employment opportunities (including TTW), and any problems with Employment Networks or other employment agencies.

7.   Section G—Employment-Related Services and Supports Used in 2009

Questions in this section ask beneficiaries about their use of employment-related services in calendar year 2009, including types of services received, types of providers used, length of service receipt, how the services were paid for, and reasons for and satisfaction with services. Other questions ask about sources of information about services and the nature of any services needed but not received.

8.   Section H—Ticket Participants in 2009

This section asks 2009 Ticket participants about their program experiences, including their decision to participate in the Ticket program, the types of information they used to select their current service providers, development of their individual work plan (IWP), and any problems with services provided by an Employment Network. The section includes a series of questions about how problems with ENs were resolved and overall satisfaction with the TTW program.

9.   Section I—Health and Functional Status

This section asks about the beneficiary's health status and daily functioning, including the need for special equipment or assistive devices. It asks for information about general health status (via the SF-8[TM12]scale), difficulties with Activities of Daily Living (ADLs) and Instrumental Activities of

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[12] SF-8[TM] is a trademark of QualityMetric, Inc.

Daily Living (IADLs), functional limitations, substance abuse/dependence, and treatment for mental health conditions.

10. Section J—Health Insurance

Questions in this section collect information about the beneficiary's sources of health insurance, both at the time of interview and during calendar year 2009.

11. Section K—Income and Other Assistance

Questions in this section ask about sources of income, including income received from earnings, Social Security, workers' compensation, and other government programs and sources.

12. Section L—Sociodemographic Information

This section collects basic demographic information about the beneficiary, such as race, ethnicity, education, parental education, marital status, living arrangements, and household income.

13. Section M—Closing Information and Observations

This section collects address information for the sample person so that the $10 incentive check may be mailed. The interviewer also records the reasons that a proxy or assistance was required, if appropriate, and documents special circumstances.

B. Instrument Pathing and Preloaded Data

Sample members in the Representative Beneficiary Sample and the Ticket Participant Sample received the same version of the NBS questionnaire. We did not base pathing to questions about participation in the TTW program on sample type but rather on answers given to items in previous sections (awareness of the program and use of a Ticket). Similarly, both CATI and CAPI respondents received the same questionnaire. The NBS required, on average, 50 minutes to administer. The interview length ranged from 16 to 180 minutes, excluding TTY, TRS, and instant messaging interviews.

Interviewers asked all respondents questions from Sections A, B, E, G, I, J, K, L, and M. Only respondents who reported that they were currently working answered the questions in Section C. Similarly, only respondents who reported working in 2009 answered the questions in Section D. Section F applied only to respondents who reported that they had never tried to obtain a Ticket from SSA, had never tried to use a Ticket to sign up with a provider, or did not sign up with a provider in 2009. Only respondents who reported using their Ticket to sign up with a provider in 2009 answered questions in Section H. In Table II.1, we provide a summary description of the main questionnaire pathing.

Table II.1. NBS Instrument Sections

Section	Title of Section	Respondents Receiving the Section
A	Screener	All respondents
B	Disability and Current Work Status	All respondents
C	Current Employment	Respondents who answer (B24 = YES) Question B24: Are you currently working at a job or business for pay or profit?
D	Jobs/Other Jobs During 2009	Respondents who answer (B30 = YES) Question B30: Did you work at a job or business for pay or profit any time in 2009?
E	Awareness of SSA Work Incentive Programs and Ticket to Work	All respondents
F	Ticket Nonparticipants in 2009	Respondents who have heard of the Ticket to Work program (answer E21, E24, or E25 =YES) AND Respondents who answer (E36 = NO, DON'T KNOW, OR REFUSED) Question E35: Did you ever try to get a Ticket from Social Security or anywhere else? OR Respondents who answer (E36 = NO, DON'T KNOW, OR REFUSED) Question E36: Have you ever used your Ticket to sign up with an Employment Network? OR Respondents who answer (E37 = NO, DON'T KNOW, OR REFUSED) Question E37/E37b: Were you signed up with any Employment Network/State Vocational Rehabilitation Agency at any time in 2009?
G	Employment-Related Services and Supports Used in 2009	All respondents
H	Ticket Participants in 2009	Respondents who have heard of the Ticket to Work program (answer E21, E24, or E25 =YES) AND Respondents who answer (E37 = YES) Question E37/E37b: Were you signed up with any Employment Network/State Vocational Rehabilitation Agency at any time in 2009?
I	Health and Functional Status	All respondents
J	Health Insurance	All respondents
K	Income and Other Assistance	All respondents
L	Sociodemographic Information	All respondents
M	Closing Information and Observations	All respondents

Source: NBS, Round 4.

The NBS instrument, which Mathematica programmed in Blaise, is complex and involves several integrated skips within and across sections. The use of preloaded SSA administrative data and allowances for proxy participation introduce further complexities into the questionnaire pathing. Preloaded data on respondents' disability-benefits status (SSI, SSDI, or both), age at which respondents first received SSI benefits, and TTW participant status determine pathing for certain survey items. Other administrative variables serve as fills for particular items to provide respondents with names of local programs or to prompt recognition of program participation. In Table II.2, we provide a complete list and description of the preloaded variables.

Table II.2. Survey Preloads

Variable	Definition	Purpose
Sampgrp	Ticket participant provider/payment type	Used to determine pathing for awareness of TTW items. Only respondents identified by SSA as having a Ticket assigned to an EN (Sampgrp =1) and who indicated that they had never heard of the TTW program were asked Item E24. In addition, participants with a Ticket assigned to an SVRA (Sampgrp = 2) were asked about services received from an SVRA (Items E36b and E36c).
Bstatus	SSA benefit type (SSI only, SSDI only, or SSI and SSDI) received by sample member	Used to determine pathing for awareness of SSA work incentive items. Only respondents who received SSDI benefits were asked Items E3 through E13. Only respondents who received SSI were asked Items E15 through E18.
DOB	Sample member date of birth	Reported date of birth (or age) matched with administrative data to verify that the correct person was contacted in the screener portion of the survey.
ENsample	Name of the EN to which the sample member's Ticket was assigned at the time the TTW Participant Sample was drawn	Used as a fill at Item E24 to prompt TTW participants who responded that they had never heard of the TTW program. This item reminds respondents that, according to SSA, the sample person's Ticket was assigned to the particular EN (as of the date the sample frame was drawn).
SDate	Date sample frame drawn for TTW participants	Used as fill at Item E24 to prompt TTW participants who responded that they had never heard of the TTW program. This item reminds respondents that, according to SSA, the sample person's Ticket was assigned to an EN (as of the date the sample frame was drawn).
SSIage	Age at which sample member first received SSI benefits	Used to determine pathing at Items E11 and E12. Only respondents who received SSI before age 22 (and were 25-years-old or younger) received these items.
StateMed	State name for Medicaid based on state of residence reported at time of survey	Used at Item J2 to identify, by name, the Medicaid program in the respondent's state.
VRname	State name for State Vocational Rehabilitation Agency based on state of residence reported at time of survey	Used at Items B29, E28, E36b, E36c, F2, F6, F12, F20, F29, F31, H7, H12, and H21 and to identify, by name, the State Vocational Rehabilitation Agency in the respondent's state.

Table II.2 *(continued)*

Variable	Definition	Purpose
VRDate	Date Ticket assigned to State Vocational Rehabilitation Agency	Used at Item E36c to prompt respondents who say they have not received services from a State Vocational Rehabilitation Agency but who had a Ticket assigned to an SVRA based on SSA records.

Source: NBS, Round 4.

Finally, given that proxies are needed when the sample member's disability precludes participation, the instrument was programmed to fill in the proper pronoun or name in the question text after the interviewer indicated that the survey respondent would be either a sample member or a proxy. In addition, the instrument was programmed to skip attitudinal and opinion items for proxy respondents to minimize bias in reporting. (See Table II.3 for a complete list of items not asked of proxy respondents.) As mentioned previously, interviewers completed 998 proxy interviews.

Table II.3. Items Skipped for Proxy Respondents

Survey Item	Question Text
B29_3a	You said that one of the reasons you did not accept a job you were offered was because it did not pay enough. What is the lowest wage or salary you would have accepted for this job?
B29_3b	If you did get a job offer that matched your current needs and abilities, what is the lowest wage or salary you would be willing to accept for such a job?
B29_8a	You said that one of the reasons you are unable to find a job is that the jobs that are available do not pay enough. What is the lowest wage or salary you would accept for a job that matched your current needs and abilities?
B29_8b	If you did get a job offer that matched your needs and abilities, what is the lowest wage or salary you would be willing to accept for such a job?
B29_12a	If you did get a job offer that matched your current needs and abilities, what is the lowest wage or salary you would be willing to accept for such a job?
C18	Taking all things into account, how satisfied are you with your {main/current} job? Would you say very satisfied, somewhat satisfied, not very satisfied, or not at all satisfied?
C39a–C39l	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?
C39a	The pay is good.
C39b	The benefits are good.
C39c	The {job security is good/work is steady}.
C39d	You have a chance for promotion.
C39e	You have a chance to develop abilities.
C39f	You have recognition or respect from others.
C39g	You can work on your own in your job if you want to.
C39h	You can work with others in a group or team if you want to.
C39i	Your work is interesting or enjoyable.
C39j	Your work gives you a feeling of accomplishment or contribution.

Table II.3 *(continued)*

Survey Item	Question Text
C39k	Your supervisor is supportive.
C39l	Your co-workers are friendly and supportive.
H10a–H10f	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:
H10a	Participation in the Ticket to Work program is voluntary, and you do not have to participate to keep your disability benefits.
H10b	You can, during any month, take back your Ticket and give it to another Employment Network or participating provider.
H10c	After the first year, you must work at certain levels to remain in the program.
H10d	While you are working, you can keep your Medicare and/or Medicaid benefits.
H10e	You can get services from your State Vocational Rehabilitation Agency without giving the agency your Ticket.
H10f	You can use your Ticket to get follow-up services somewhere else after you finish getting services from the State Vocational Rehabilitation Agency.
H11	Before you started participating, how much would you say you knew about the Ticket to Work program? Would you say a lot, some, a little, or nothing?
H45	Overall, how satisfied are you with the Ticket to Work program? Would you say very satisfied, somewhat satisfied, not very satisfied, or not at all satisfied?
H45_1a-H45_1g	Why are you not satisfied with the [Ticket to Work program/2009 EN]? Is it because:
H45_1a	The services you received were not a good fit for your needs?
H45_1b	The [Ticket to Work program/State Vocational Rehabilitation Agency] did not offer you enough services?
H45_1c	The services provided were not available at times that fit your schedule?
H45_1d	The services took too long to start?
H45_1e	The services were of poor quality?
H45_1f	Your medical condition or other personal circumstances kept you from fully participating in the services?
H45_1g	Are there other reasons you are not satisfied?
H58	How satisfied are you with how the problem (with the SVRA/EN) was solved? Would you say very satisfied, somewhat satisfied, not very satisfied, or not at all satisfied?

Source: NBS, Round 4.

C.　Changes Made to Survey Instrument in Round 4

As noted below, Mathematica made some modifications to the survey instrument in Round 4 to update it for administration in 2010, including (1) a change in reference periods from 2005 to 2009, (2) revisions to accommodate the change in sample design (3) revisions to items about awareness of work incentive programs to address recent changes in Federal programs, (4) the addition of items to gather in-depth data from respondents who reported that they either did not receive services in 2009 or were dissatisfied with the services they received, and (5) the addition of pre-defined response categories to some open-ended items. In addition, we deleted items no longer relevant.

1.　Changes to Reference Periods

Questions that referred to calendar year 2005 during Round 3 were changed to 2009. The affected items included those asking about jobs held in 2009, Ticket use in 2009, services received in 2009, TTW participation in 2009, and insurance coverage in 2009. In a few cases, response categories were edited to reflect the new data collection period.

2.　Changes Made to Accommodate New Sample Design

Given that we did not re-interview Ticket participants as part of the longitudinal sample[13] in Round 4, we removed all pathing, question text, and references to preloaded data from earlier rounds specific to longitudinal survey participation. To address changes to the TTW program related to Partnership Plus, which allows Ticket participants to assign their Ticket to an EN even if they currently receive services from a SVRA, we added a sample group variable to distinguish traditional SVRA "in-use" providers from ENs or SVRAs acting as ENs and then added items in Section E in order to obtain detail about services received from SVRAs for in-use participants. If participants had heard of TTW and were receiving services from in-use SVRAs, they then answered questions in Section F about why they did not assign their Ticket to an EN (with the exception of Items F11 through F19) and questions in Section H about program experiences (with the exception of Items H1 through H34). Appendix A summarizes the revisions.

3.　Revisions to Items About Awareness of Work Incentive Programs to Address Recent Changes in Federal Programs

Throughout the survey, references to Benefit Planning and Assistance Organizations (BPAO) were changed to Work Incentive Planning and Assistance (WIPA). We also added questions about knowledge and use of Protection and Advocacy for Beneficiaries of Social Security (PABSS). To ensure that beneficiaries with Tickets assigned to an SVRA answered questions about their awareness of TTW, we added an item to remind such participants that SSA records indicated that their Ticket was assigned to an SVRA if they said they had never received services from an SVRA.

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[13] It was theoretically possible for a sample member selected in Round 4 to have been selected in earlier rounds. With the same PSUs used in previous rounds, the likelihood of earlier selection was not negligible. In fact, it occurred for a handful of cases in Round 4.

4. Addition of Items

Follow-up questions were added to Section G for beneficiaries who reported that the services they received in 2009 were not useful. For TTW participants aware of their TTW status and not reporting the receipt of services during 2009, we added a probe to verify that they received no services from a TTW provider. If participants verified that they received no services, we asked why not. To determine why services were not helpful, follow-up questions were also added to Section H for beneficiaries who reported that they were dissatisfied with the services they received, that the services they received did not help them secure or retain a job, or that the services they received did not help them reach their work goals. Appendix A includes a list of items added in Round 4.

5. Changes to Response Categories

During the coding of the Round 3 open-ended items, we identified responses commonly given to questions eliciting a verbatim answer. In some cases, we revised the responses or added them to the survey item as pre-defined response options (Table II.4).

Table II.4. Response Options Added to Survey Items in Round 4

Survey Item	Response Option Added
B39. Who do you discuss your work goals with most?	"Other Non-Relative" was added
B42. Who else do you discuss your work goals with?	"Other Non-Relative" was added
B45. Who else do you discuss your work goals with?	"Other Non-Relative" was added
C23.What kind of special equipment do you use?	"Hearing aid/device," "Special glasses," "Special chair/back support," "Special shoes/stockings" were added
F29. After receiving information about ENs in your area, including the state VR agency, why didn't you contact any of them?	"Got a job or in school" was added
G55. Who pressured you to use these services?	"Health care professional" and "Court/police" added
G56. How did {person from Item G55} pressure you to use these services?	"Threatened Hospitalization or Jail" added
H31. Why didn't any of the other ENs you tried to use your Ticket with accept your Ticket in 2009?	"Trouble Contacting EN" was added
I20. What devices, equipment, or other types of assistance do you use? Anything else?	"Magnifying Glass" was added
J11. Now I'd like you to think back to 2009. In 2009, what health coverage did you have?	"Private Insurance, Not Specified Who Through" was added
M2a_rlsp. How are you related to {NAME}?	"Friend," "Caseworker/Caregiver/Payee," "Girlfriend/Boyfriend/Partner," "Guardian/Foster Parent/Step Parent," and "In-Law" were added
M13. How is the assistant/proxy related to {NAME}?	"Friend," "Caseworker/Caregiver/Payee," "Girlfriend/Boyfriend/Partner," "Guardian/Foster Parent/Step Parent," and "In-Law" were added

III. ROUND 4 DATA PROCESSING

A. Coding of Open-Ended and Verbatim Responses

The NBS questionnaire includes several questions designed to elicit open-ended responses. To make it easier to analyze the data connected with these responses, we grouped the responses and assigned them numeric codes when possible. The methodology used to code each variable depended on the variable's content. Three types of questions (described below) on the NBS did not have designated response categories; rather, responses to the questions were recorded verbatim:

1. **Open-ended questions** have no response options specified (such as Item E43—Why are you no longer receiving services from your Employment Network?). For such items, interviewers recorded the verbatim response. Using common responses, we developed categories and reviewed them with analysts. Coders then attempted to code the verbatim response into an established category. If the response did not fit into one of the categories, coders coded it as "other."

2. **"Other/Specify"** is a response option for questions with a finite number of possible answers that may not necessarily capture *all* possible responses. For example, "Did you do anything else to look for work in the last four weeks that I didn't mention?" For such questions, respondents are asked to specify an answer to the question "anything else?" or "anyone else?"

3. **Field-coded** responses are answers coded by interviewers into a pre-defined response category without reading the categories aloud to the respondent. If none of the response options seems to apply, interviewers select an "other specify" category and type in the response.

As part of data processing and based on an initial review, we examined verbatim responses in an attempt to uncover dominant themes for each question, developing a list of categories and decision rules for coding verbatim responses to open-ended items. We also added supplemental response categories to some field-coded or "other/specify" items to facilitate coding if a sufficient number of such responses could not be back-coded into pre-existing categories. In Chapter IV, we indicate which items in each instrument section required coding and list all additional response categories created during coding. Thus, we categorized verbatim responses for quantitative analyses by coding responses that clustered together (for open-ended and "other/specify" responses) or by back-coding responses into existing response options if appropriate (for "field-coded" and "other/specify" items). We applied categories developed during Rounds 1, 2, and 3 to Round 4 and added a new category—"Health insurance unspecified"—to four items in Round 4. In some cases, we added to the questionnaire categories developed in earlier rounds in order to minimize back-coding.

If, during coding, the need for changes to the coding scheme became apparent (for example, the addition of categories or clarification of coding decisions), we discussed and documented new decision rules. We sorted verbatim responses alphabetically by item for coders. The responses then lent themselves to filtering by coding status so that new decision rules could be easily applied to previously coded cases. When it was impossible to code a response, when a response was invalid, or when a response could not be coded into a given category, we assigned a two-digit supplemental code to the response (Table III.1). The data files do not include the verbatim responses, although we note in Chapter IV which items in each instrument section required coding and list any additional response categories created during coding.

Table III.1. Supplemental Codes for "Other/Specify" Coding

Code	Label	Description
94	Invalid Response	Indicates that response should not be counted as an —other" response and should be deleted.
95	Refused	Used only if verbatim response indicates that respondent refused to answer question.
96	Duplicate Response	Indicates that verbatim response has already been selected in a —code all that apply" item.
98	Don't Know	Used only if verbatim response indicates that respondent does not know answer.
99	Not Codeable	Indicates that a code may not be assigned based on verbatim response.

Source: NBS, Round 4.

B. Data Cleaning

Once we incorporated coded data into a preliminary data file, we conducted a systematic review of the frequency counts of the individual questionnaire items. We reviewed the counts by each questionnaire path to identify possible errors in skip patterns. We then reviewed interviewer notes and comments as a means to flag and correct individual cases.

While the CATI instrument set data entry ranges to prevent the entry of improbable responses, the ranges intentionally encompass a wide spectrum of values to account for the diversity expected in the sample population and to permit the interview to continue in most instances. Several consistency edit checks embedded throughout the NBS instrument also flag potential problems during the interview. To minimize respondent burden, however, all consistency edit checks encountered during the interview were suppressible. While the interviewer was instructed to probe such responses, the interview could continue past the item if the respondent could not resolve the problem. A data processing program, created in Round 2, was applied to identify consistency problems as well as cases outside pre-set upper and lower values for all items with fixed field numeric responses (such as number of weeks, number of jobs, dollar amounts, and so on). Flagged cases were reviewed and set to missing (.D) if an error likely occurred. As in earlier rounds, we took the general approach of editing only those cases with an obvious data entry or respondent error. As a result, while substantial time went into meticulously reviewing individual responses, some suspect values remain in the file.

During data processing, we created several constructed variables to combine data across items. For these items, we reviewed the specifications and all data values for the constructed variables based on composite variable responses and frequencies.

For open-ended items assigned numeric codes, we examined frequencies to ensure the assignment of valid values. For health condition coding, we also examined codes to verify that the same codes had not been assigned to both main and secondary conditions. We recoded cases coded incorrectly per the original verbatim response.

C. Identification of Data Problems

The data problems we identified in the course of checking the data file may be characterized as either measurement error or processing error. Measurement error is the difference between the observed value of a variable and the true, but unobserved, value of that variable. Sources of measurement error may include the questionnaire itself (including design, format, and content), data collection mode, the interviewer, and the respondent. As discussed below, the questionnaire, interviewer, and respondent likely all contributed to data problems identified in the NBS. Processing errors discussed in this report consist of incorrect specification or implementation of a complicated skip pattern or edit. We discuss programming errors that resulted in incorrect skip patterns throughout the NBS and focus on measurement errors and processing errors at the individual-item level.

The identification of data problems in the NBS file occurred at several points during the data cleaning and data preparation process. In particular, many errors surfaced during the systematic review of the frequency counts of individual questionnaire items and the identification of cases flagged by the data processing program. Other problems surfaced during development of the constructed variables and implementation of the imputation procedures. In Chapter IV, we describe the results of the review by instrument section.

Processing errors leading to data problems identified in Rounds 2 and 3 of the NBS (noted in Round 2 – 3 Identification of Data Problems Reports) were corrected in Round 4. However, some issues, while somewhat resolved, persisted in Round 4, including interviewer error in identifying and de-duplicating employment-related service providers. While far less data were missing in Round 4 than in earlier rounds as a consequence of an improved Blaise interviewing screen and intensive training, some errors still occurred, as summarized in Table III.2 and described in Chapter IV.

Table III.2. Main Problems Encountered

Item	Description of Problem
E3–E10 (Awareness and use of PASS, Earned Income Exclusion, Property Essential to Self-Support, and Continued Medicaid Eligibility)	All SSI beneficiaries were to be asked Items E3 through E10. Because benefit status was missing for a small portion of sampled cases (14 cases), beneficiaries who received both SSI and SSDI incorrectly skipped the questions, with the cases coded as .M in the data file (6 cases) for the items. Chapter IV, Section E.1 addresses the problem.
E15–E18 (Awareness and use of Trial Work Period and Extended Period of Eligibility for Medicare)	All SSDI beneficiaries were to be asked Items E15 through E18. Because benefit status was missing for a small portion of sampled cases (14 cases), beneficiaries who received both SSI and SSDI incorrectly skipped the questions, with the cases coded as .M in the data file (17 cases) for the items. Chapter IV, Section E.1 addresses the problem.

Table III.2 *(continued)*

Item	Description of Problem
G13–G14 (Type of provider supplying job training)	To aid in the recall of employment-related services received in 2009, respondents were first asked if they had ever received employment services, job training, medical services, or counseling to improve their ability to work or live independently. For each type of service, respondents were to list up to eight providers or places where the service was received (Items G2, G11, G16, and G20). Provider type then was collected for each provider mentioned. To minimize respondent burden by avoiding the need to ask provider type again, interviewers could indicate that a provider already had been mentioned in Item G12, thus skipping the provider type follow-up questions. In some cases, however, interviewers indicated that a provider already had been mentioned, when it had not. The result was missing data on the provider type questions. In these cases, Items G13 and G14 were coded as .M (10 cases). Chapter IV, Section G.1 addresses the problem.
G18 (Type of provider supplying medical services)	As for Items G13 and G14, interviewers incorrectly indicated in some cases in Item G17 that a provider already had been mentioned, when it had not. For this reason, provider type is missing for 20 cases in Item G18, with the cases coded as .M in the data file. Chapter IV, Section G.1 addresses the problem.
G22 (Type of provider supplying mental health services)	As for Items G13, and G14, interviewers incorrectly indicated in Item G21 that a provider already had been mentioned when it had not. For this reason, Item G22 is missing for 22 cases, with the cases coded as .M in the data file. Chapter IV, Section G.1 addresses the problem.
G33 and G34 (When last received services from providers)	Once interviewers obtained a list of providers, they asked respondents when they last received services from each provider. Interviewers then asked follow-up questions about each provider that delivered services in 2009 with respect to specific services received, number of visits, duration of visits, cost of services, and usefulness of services. Before interviewers asked when services were received, they referred to a list providers specified in Items G2, G11, G16, and G20 and then removed any obvious duplicates from the list. The interviewers then verified with respondents that providers on the list were different providers. Providers marked as duplicates were removed from the list, and provider-specific follow-up information was not obtained. In some cases, providers were marked as duplicates but did not appear to be duplicates based on an examination of provider name and type. These cases were coded as .M in Item G33, since the follow-up questions regarding when services were received were not asked about these providers. The cases were coded as .L in Items G36 through G47_year_34. Across all providers, data are missing in 45 instances. Chapter IV, Section G.1 addresses the problem.

IV. SECTION-BY-SECTION DESCRIPTION OF FINDINGS

A. Section A—Screener

The NBS screener was designed to identify and gain the cooperation of the respondent in addition to verifying that the sample person was still eligible for the survey. It also determined if the sample member was capable of completing the interview and if the sample member required special accommodations such as TTY, TRS, or an in-person interview.

1. Date of Birth

Sample member name and date of birth from SSA records verified that the correct person had been contacted. If two of the three date-of-birth elements provided by SSA matched self-reported information (for example, month and year), the interview continued. If one or fewer elements matched, the interview was terminated, and the case was sent to locating. If the respondent could not provide date of birth, the screener requested the age of the sample member. If the age fell within two years (plus or minus) of the age in the SSA records, the interview continued.

Of the successfully screened respondents, date of birth provided by SSA differed from the collected date of birth in 27 cases. In 56 percent of these cases (n = 15), year of birth diverged by one year. In 22 percent of the cases (n = 6), the year diverged by two to nine years. These discrepancies were not edited and remain in the file. For cases that differed by 10 or more years (6 cases), year of birth was set to equal year of birth from SSA records because the birth year appeared to be the result of data entry error. In addition, for cases in which age was provided in lieu of date of birth (12 cases), date of birth from SSA records populated the self-reported date of birth (Items A68, A68a, and A68b).

2. Discrepancies in Respondent Type

Three screener items determined if the sample member was cognitively able to participate in the survey. The items addressed important elements of informed consent—the study topics, the voluntary nature of participation, and confidentiality. If the sample member did not pass any of the three items (within two attempts), the interviewer sought a proxy respondent. For the proxy to complete the survey on the sample member's behalf, the proxy also had to pass the cognitive screener. In addition, interviewers could complete the interview with a proxy if a knowledgeable informant indicated that the sample person would not be able to participate even with an accommodation or if it became clear during the course of the interview that the sample person was not capable of responding. Participation of the beneficiary instead of a proxy whenever possible was highly preferable because sample members generally provide more complete and more accurate information than proxy respondents do.

At the end of Section A, the interviewer had to indicate whether the survey respondent was a sample member or a proxy. The resultant information was used to create the constructed variable, C_Rtype (Respondent Type). At the end of the interview, the interviewer recorded whether the sample member or proxy completed the majority of the survey. In most cases, the two items were congruent, although they were discrepant in 31 cases. That is, a sample member began the interview and a proxy completed a large share of it or vice versa. We were not surprised by a switch in respondents and expected that a small number of sample members would pass the cognitive screener but then be unable to recall or report information for the vast number of survey questions.

Cases with discrepancies underwent review to determine if interviewer error occurred in coding the respondent. In general, we considered the interviewer data collected at the time of survey completion as the most accurate data for purposes of creating the constructed variable. That is, if the sample member began the interview but the interviewer indicated that the proxy completed most of it, we recoded respondent type to proxy.

In terms of the survey questions, the instrument asked perception and attitudinal questions only of sample members. These questions focused on overall job satisfaction and satisfaction with various work characteristics, awareness of and satisfaction with the TTW program, and satisfaction with state vocational rehabilitation services. Items skipped for proxies were Items B29_3a, B29_3b, B29_4a, B29_4b, B29_8a, B29_8b, B29_8c, B29_8d, B29_12a, B29_12b, B29_12c, C18, C39, H10, H11, H45, H58, and H59. In some cases in Round 4, the sample member answered some sample member–only items before a proxy stepped in and completed the rest of the survey. As described, in this case, respondent type was recoded as proxy. To avoid confusion in following the instrument pathing, we re-coded the sample member–only questions for these cases to equal logical skip.

B. Section B—Disability and Work Status

Section B asked about the sample member's limiting physical or mental condition(s) and employment status. It also included questions designed to determine what job characteristics were important to sample members and collected information about work-related goals and expectations.

1. Health Condition Coding

Section B of the questionnaire asked each respondent to cite the primary and secondary physical or mental conditions that limit the type or amount of work or daily activities that he or she performs. Main conditions could be reported in one of four items: Item B2 (primary reason limited), Item B6 (primary reason eligible for benefits), Item B12 (primary reason formerly eligible for benefits if not currently eligible), and Item B15 (primary reason limited when first receiving disability benefits). The majority of respondents (89 percent) reported a primary limiting condition in Item B2. The main purpose of Items B6, B12, and B15 was to collect information on a health condition from people who reported no limiting conditions in Item B2. For example, if respondents reported no limiting conditions, they were asked if they were currently receiving Social Security benefits. If they answered "yes," they were asked about the main reason that made them eligible for benefits (Item B6). If respondents said that they were not currently receiving benefits, they were asked whether they had received disability benefits in the last five years. If they answered "yes," they were asked for the condition that made them eligible for Social Security benefits (Item B12) or the reason that first made them eligible if they no longer had that condition (Item B15). If respondents said that they had not received disability benefits in the last five years, they were screened out of the survey and coded as ineligible. Each response to Items B2, B6, B12, and B15 was assigned a value for the three health condition constructs. Although respondents were asked to cite one "main" condition in Item B2, B6, B12, or B15, many listed more than one. The additional responses were maintained under the primary condition variable and coded in the order in which they were recorded.

For each item on a main condition, respondents were also asked to list any other, or secondary, conditions. For example, respondents reporting a main condition in Item B2 were asked in Item B4 to list other conditions that limited the type or amount of work or daily activities that they could perform. Respondents reporting the main reason for their eligibility for disability benefits (Item B6) were asked in Item B8 to list other conditions that made them eligible. Finally, respondents who reported that they were not currently receiving benefits and reported a main condition in Item B12

(the condition that made them eligible to receive disability benefits in the last five years) were asked in Item B14 for other reasons that made them eligible for benefits. Those who reported that their current main condition was not the condition that made them eligible for benefits and who were asked for the main reason for their initial limitation were also asked if any other conditions limited them when they started receiving benefits (Item B17).

The respondents' verbatim responses were coded by using the International Classification of Diseases, 9th revision, Clinical Modification (ICD-9-CM) five-digit coding scheme. The ICD-9 is a classification of morbidity and mortality information developed in 1950 to index hospital records by disease for data storage and retrieval. The ICD-9 was available in hard copy for each coder. The coders, many of whom had medical coding experience, attended an eight-hour training session before coding and were instructed to code to the highest level of specificity possible. Responses that were not specific enough for a five-digit code were coded to four (subcategory) or three (category codes) digits. More information on coding responses to the health condition items is available in "The National Beneficiary Survey: Round 4 Editing, Coding, Imputing, and Weighting Procedures" report (Grau et al. 2012).

Following ICD-9 coding, a series of constructed variables grouped the health conditions reported in Items B1 and B2 into four classes of broad disease groups. A set of separate constructs summarized responses provided in Items B6, B12, and B15 (C_REASBECELIGICD9, C_REASBECELIGDIAGGRP, C_REASBECELIGCOLDIAGGRP, and C_REASBECELIGBODYGROUP). The constructs clarified the eligibility of sample members who indicated in Items B1 and B2 that they did not have a disabling condition.

a.   Several Primary Conditions

Health condition coding of respondent-provided data is complex. Often, respondents either do not know the name of a condition or describe it in vague terms (for example, "he is slow," or "she has trouble breathing"). Although respondents were asked to provide one "main" condition in Item B2, B6, B12, or B15, many listed more than one. Despite the emphasis in interviewer training on collecting one main condition, 24 percent of respondents reported more than one condition in Item B2. Rather than attempting to discern which condition was the main condition among more than one condition listed, conditions were coded in the order provided by the respondent and named on the file as _1, _2, and so on.

b.   Duplicate Conditions

In 104 cases (approximately one percent), respondents mentioned a condition twice when reporting their main condition or reported a secondary condition already reported as a main condition. During the process of coding such responses, coders identified any duplicate conditions by assigning the code 96. In addition, during data cleaning and editing, ICD-9 codes within and across main and secondary conditions were compared to check for duplicate codes. Duplicates identified during coding or cleaning that followed valid codes were then dropped. In the event that the only condition reported was a duplicate of the main condition, the code was dropped, with the filter item ("Do you have any other physical or mental conditions that limit the kind or amount of work or other daily activities you can do?") recoded to "no."

c. Uncodeable Conditions

We expected that not all verbatim responses would contain enough information to allow coders to assign a specific ICD-9 code. To handle such situations, we provided coders with supplemental two-digit codes that mirrored the chapter-level headings in the ICD-9 index, allowing a general code to be assigned in such instances (Table IV.1). Between one and four percent of the verbatim responses coded at each medical condition item could not be coded to a specific ICD-9 code and were assigned a two-digit supplemental code.

Table IV.1. ICD-9 Category and Supplemental Codes

Code	Label	Description of ICD-9 Codes	Corresponding ICD-9 Codes
00	Other	Other and unspecified infectious and parasitic disease; alcohol dependence syndrome and drug dependence; learning disorders and developmental speech or language disorders; and complications of medical care not elsewhere classified	136.0–136.9, 303.00–304.90, 315.00–315.39, 999.0–999.9
01	Infectious and parasitic diseases	Borne by a bacterium or parasite and viruses that can be passed from one human to another or from animal/insect to a human, including tuberculosis, HIV, other viral diseases, and venereal diseases (excluding other and unspecified infectious and parasitic diseases)	001.0–135, 137.0–139.8
02	Neoplasms	New abnormal growth of tissue, i.e., tumors and cancer, including malignant neoplasms, carcinoma in situ, and neoplasm of uncertain behavior	140.0–239.9
03	Endocrine/nutritional disorders	Thyroid disorders, diabetes, abnormal growth disorders, nutritional disorders, and other metabolic and immune disorders	240.0–279.9
04	Blood/blood-forming	Diseases of blood cells and spleen	280.0–289.9
05	Mental disorders	Psychoses, neurotic and personality disorders, and other non-psychotic mental disorders, including mental retardation (excluding alcohol and drug dependence and learning, developmental, speech, and language disorders)	290.0–302.9, 305.00–314.9, 315.4–319
06	Diseases of nervous system	Disorders of brain, spinal cord, central nervous system, peripheral nervous system, and senses, including paralytic syndromes, and disorders of eye and ear	320.0–389.9
07	Diseases of circulatory system	Heart disease, disorders of circulation, and diseases of arteries, veins, and capillaries	390–459.9
08	Diseases of respiratory system	Disorders of the nasal, sinus, upper respiratory tract, and lungs, including chronic obstructive pulmonary disease	460–519.9
09	Diseases of digestive system	Diseases of the oral cavity, stomach, esophagus, and duodenum	520.0–579.9

Table IV.1 *(continued)*

Code	Label	Description of ICD-9 Codes	Corresponding ICD-9 Codes
10	Diseases of genitourinary system	Diseases of kidneys, urinary system, genital organs, and breasts	580.0–629.9
11	Complications of pregnancy, child birth, and puerperium	Complications related to pregnancy or delivery; complications of puerperium	630–677
12	Diseases of skin/subcutaneous tissue	Infections of skin, inflammatory conditions, and other skin diseases	680.0–709.9
13	Diseases of musculoskeletal system	Muscle, bone, and joint problems, including arthropathies, dorsopathies, rheumatism, osteopathies, and acquired musculoskeletal deformities	710.0–739.9
14	Congenital anomalies	Problems arising from abnormal fetal development, including birth defects and genetic abnormalities	740.0–759.9
15	Conditions in perinatal period	Conditions that have origin in birth period even if disorder emerges later	760.0–779.9
16	Symptoms, signs, and ill-defined conditions	Ill-defined conditions and symptoms; used when no more specific diagnosis can be made	780.01–799.9
17	Injury and poisoning	Problems resulting from accidents and injuries, including fractures, brain injury, and burns (excluding complications of medical care not elsewhere classified)	800.00–998.9
18	Physical problem, Not elsewhere classified (NEC)	Condition is physical, but a more specific code cannot be assigned	No ICD-9 codes
95	Refused	Verbatim response indicates respondent refused to answer question	No ICD-9 codes
96	Duplicate condition reported	Condition already coded for respondent	No ICD-9 codes
97	No condition reported	Verbatim response does not contain symptom to condition to code	No ICD-9 codes
98	Don't know	Respondent reports that he or she does not know condition	No ICD-9 codes
99	Uncodeable	A code cannot be assigned based on verbatim response	No ICD-9 codes

Source: NBS, Round 4.

Approximately two percent of the verbatim responses to each item could not be coded into either an ICD-9 code or a broader two-digit supplemental code. In such cases, responses were coded as "don't know" (code 98), "refused" (code 95), "uncodeable" (code 99), or "no condition reported" (code 97).

2. Back-Coding Responses to "Other/Specify" Items

Item B25 asked respondents if any one of a series of items (Item B25_a through Item B25_o) was a reason that they were not currently working. In addition, Item B26 asked respondents if there were any other reasons not already mentioned as to why they were not working. If they answered "yes," a verbatim response was collected for Item B27. Before coding, verbatim responses for Item B27 were reviewed to determine if they could be back-coded into Items B25_a through B25_o, or, if not, whether they could be clustered into additional categories. In Table IV.2, we provide the response categories added for coding. Responses were back-coded when possible into one of the existing or newly created categories. Responses that could not be coded were retained as "other." If all responses could be coded, Item B26 was recoded to "no." If a verbatim response could not be coded into any of the Item B25 categories, Item B26 remained coded "yes."

Table IV.2. Response Categories Added to Section B During Coding

Item	Question Text	Categories Added
B25	Are you not working because…	p = CAN'T FIND A JOB q = LACK SKILLS
B29_6	What benefits are you most worried about losing?	14 = Health Insurance Unspecified
B29_10	What benefits are you most worried about losing?	14 = Health Insurance Unspecified
B29_11b	What benefits were you most worried about losing?	14 = Health Insurance Unspecified

Items B29_6, B29_10, and B29_11b asked respondents which benefits they were most worried about losing if they took a job. Responses coded as "other" by the interviewer were reviewed by coders and back-coded into existing response options when possible. The category "Health insurance unspecified" was added during coding to capture responses that could not be classified into the more specific insurance categories.

Items B29 (what did you do to look for work), B29_2 (reasons did not accept a job), B29_7 (reasons have not found a job) also included "other/specify" responses and were examined by coders and back-coded when possible.

C. Section C—Current Employment

Section C collected information about the respondent's current job(s) by asking respondents about the type of work performed, type of business, hours worked, benefits offered, and wages earned. Section C also asked about the receipt of work-related accommodations and those needed but not received. Other questions gathered information on job satisfaction.

Job-specific information (Items C2 through C13) was collected separately for each current job held. The items are represented in the data file with an _n indicating the job to which the data refer

(for example, C4mth_1 indicating month started first job, C4mth_2 indicating month started second job, and so on). Respondents reported first on their main job (that is, the job at which they worked the most hours) and then on other jobs currently held. For purposes of the constructed variables based on data collected in Section C, constructs pertaining to the "main" job are all based on responses provided in the first job slots (_1).

1.   Occupation and Industry Coding

Item C2 asked respondents to describe the type of work they performed at each of their current jobs (occupation). To maintain comparability with earlier rounds, we used the Bureau of Labor Statistic's 2000 Standard Occupational Classification (SOC) to code verbatim responses to the occupation items.[14] The SOC classifies all occupations in the economy, including private, public, and military occupations in which work is performed for pay or profit. Occupations are classified on the basis of work performed, skills, education, training, and credentials. The sample member's occupation was assigned an occupation code. The first two digits of the SOC codes classify the occupation to a major group and the third digit to a minor group. For the NBS, we assigned three-digit SOC codes to describe the major group the occupation belonged to and the minor groups within that classification (using the 23 major groups and 96 minor groups).

Item C3 collected information about the type of business employing the sample person (industry). To maintain comparability with earlier rounds, verbatim responses to the industry items were coded according to the 2002 North American Industry Classification System (NAICS).[15] The NAICS is an industry classification system that groups establishments into industrial categories based on the activities in which those establishments are primarily engaged. It uses a hierarchical coding system to classify all economic activity into 20 industry sectors. For the NBS, we coded NAICS industries to three digits, with the first two numbers specifying the industry sector and the third specifying the subsector. Most Federal surveys use both the SOC and NAICS coding schemes, thus providing uniformity and comparability across data sources. While both classification systems allow coding to high levels of specificity, SSA and the analysts decided, based on research needs, to limit coding to three digits. More information on coding responses to the occupation and industry items is available in "The National Beneficiary Survey: Round 4 Editing, Coding, Imputing, and Weighting Procedures" report (Grau et al. 2012).

The verbatim responses to Items C2 and C3 do not appear in either the restricted- or public-use version of the file. Rather, the coded responses to Item C2 for each listed job are in the constructed variables C_MainCurJobSOC, C_CurJob2SOC, and so on; the coded responses to Item C4 are in C_MainCurJobNAICS, C_CurJob2NAICS, and so on.

a.   Uncodeable Occupation and Industry Verbatim Responses

We expected that some verbatim responses would lack sufficient detail to permit coding at the three-digit level. We provided coders with supplemental two-digit codes to allow assignment of a general code in such cases (Table IV.3).

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[14] See Standard Occupational Classification Manual (2000) available at http://www.bls.gov/soc.

[15] See North American Industry Classification System (2002), available at http://www.naics.com/info.htm.

Table IV.3. Two-Digit Supplemental Codes for Occupation and Industry Coding

Code	Label	Description
94	Sheltered workshop	Code used if occupation is in sheltered workshop and the occupation cannot be coded from verbatim.
95	Refused	The respondent refused to give his or her occupation or type of business.
97	No occupation or industry reported	No valid occupation or industry is reported in verbatim.
98	Don't know	Code used if occupation is in sheltered workshop and the occupation cannot be coded from verbatim.
99	Uncodeable	The respondent refused to give his or her occupation or type of business.

If a respondent did not provide a codeable occupation but indicated either in the verbatim response or in Item C7 (job part of sheltered workshop) that the occupation was a sheltered workshop position, we assigned code 94 only if the position could not be assigned an SOC code. If a position in a sheltered workshop was described by an accompanying codeable occupation, we coded the occupation with the SOC classification. When respondents indicated in Item C7 that their current job was a sheltered workshop position, we coded the industry as 624 (social assistance), which encompasses service for people with disabilities. If the occupation was uncodeable with no indication that the position was a sheltered workshop position, we assigned code 99 (uncodeable) to the occupation. In all, one percent or less of the current occupation verbatim responses and industry verbatim responses for each job were uncodeable.

2. Hours Worked

Item C8 asked respondents to provide the number of hours per week usually worked at their current job. A soft edit check incorporated into the Blaise instrument prompted interviewers to verify that the response was correct for any response over 60 hours per week. All responses over 60 hours a week (3 cases for job 1, for example) and under 5 hours a week (71 cases for job 1) underwent review during data cleaning. After a review of other job-related information, including occupation and industry verbatim responses, wage rates, self-employment, and sheltered workshop indicators, we concluded that no recodes were warranted. In general, if the respondent was working in a sheltered employment setting, we determined that low values for hours worked were not unreasonable and should be retained. Similarly, if the respondent's occupation was consistent with a high number of hours worked per week (for example, truck driver), we retained the values. While some other values were suspect, our general approach was to recode only those cases that appeared to be obvious data entry or respondent errors.

3. Weeks per Year

Item C9 asked respondents how many weeks per year they usually worked at their current job. Responses of fewer than 20 weeks underwent examination during data cleaning (67 cases for job 1), along with other job-related information, in order to determine if the values were reasonable. In general, if the occupation verbatim and other job-related information was consistent with the possibility of minimal weeks worked per year, we retained the original values. In some cases, the

respondents apparently interpreted the question as asking how many weeks they had worked if they had just started their job (despite the inclusion of the probe "If you have worked less than a year, please answer for the number of weeks you expect to work."). Since it was not possible based on other information to determine whether such values were errors, we retained them in the data file.

4. Pay

Item C11 or C12amt asked respondents to report, respectively, their pre-tax earnings for each current job if reported as an hourly wage or their pre-tax earnings for each current job if reported in another unit, such as daily, weekly, monthly, or annually; Item C13amt asked for respondents' take-home pay. We created three constructed variables: one designed to combine pre-tax responses into an hourly wage (C_MainCurJobHrPay, C_CurJob2HrPay, and so on), one into a monthly wage (C_MainCurJobMnthPay, C_CurJob2MnthPay, and so on) regardless of where the initial reporting occurred, and one for monthly take-home pay (C_MainCurJobPayTH, C_CurJob2MnthPayTH, and so on). In addition, we constructed a total monthly pay variable to sum across all jobs (C_TotCurMnthPay). Given that the earning constructs are subject to imputation, we were concerned that outliers might become imputation donors and exacerbate the outlier problem. Thus, we performed a detailed review of high and low values for both the source variables and constructs. The donor pool for imputation excluded cases with very high and very low values.

A soft edit check included in the Blaise instrument prompted interviewers to verify any response over $25 per hour in Item C11. The check could be suppressed, however, leading to 10 cases reporting hourly rates over $25. In one case, hourly pay was reported at $235. Based on the verbatim occupation response and the sheltered status of the job, the value was edited to $2.35 an hour, assuming a data entry error. For the remaining 9 cases, since other job-related information, including the verbatim occupation response, indicated that the entries could be valid, all were retained in the file. Hourly wage values of $3 and below were also examined. In such cases (n = 13), we retained the values, given that the respondents were working in a sheltered employment setting or that the verbatim job descriptions indicated that the low values for hourly wages were not unreasonable.

Soft edit checks built into the instrument also flagged high entries for each of the various reporting units in Items C12amt and C13amt. Values that were suppressed or that were at the high and low ends of the range underwent examination. In most cases, the verbatim occupation and industry descriptions indicated that the values could be valid; thus, we retained them in the file. Generally, if the respondents were working in a sheltered employment setting or the verbatim job descriptions indicated that the low values for wages were not unreasonable, we retained the values. In four cases in which interviewer or respondent error was highly likely, we set Items C12amt and C13amt to missing (.D) for later imputation.

During post-processing, take-home and pre-tax values were also compared; 37 had a difference of 30 percent or more and were flagged for verification. However, only those with the most extreme differentials whose other job-related information did not support the difference were recoded or set to missing (.D).

While questionable values remain in the file, two flag variables were created for inclusion in the file to identify cases reporting total monthly pay over $10,000 and cases reporting pay less than $20 per month or $1.50 per hour. Users of the data file may choose to eliminate these cases from analyses.

5. Back-Coding Responses to "Other/Specify" Items

Items C33_a through C33_e asked whether the sample member's employer made a series of accommodations. If the respondent indicated that other accommodations were made (C33_f = 1), a verbatim response was collected. The responses were reviewed and back-coded into Items C33_a through C33_e when possible.

Items C39b (reasons work fewer hours or earn less money) and C39_3 (supports needed to work or earn more) also included "other/specify" options. One category was added during coding for Item C39b (Table IV.4).

6. Back-Coding Field-Coded Responses

Item C23 (what type of special equipment was used at work), Item C24 (who paid for equipment used at work), Item C28 (what type of personal assistance services are used at work), Item C29 (who paid for personal assistance services), and Item C39_2 (benefits reduced or ended as a result of job) were all open-ended items that interviewers attempted to code into one of several pre-defined response categories during the interview. Responses coded as "other" by the interviewer underwent review by coders and were then back-coded into existing response options when possible. The category "Health insurance unspecified" was added during coding to Item C39_2 to capture responses that could not be classified into the more specific insurance categories. Verbatim responses that could not be recoded into one of these categories were left coded as "other."

7. Coding Open-Ended Responses

Respondents were asked whether any changes were needed but not made to the sample member's workplace (Item C34). If yes, Item C35 collected a verbatim response on the specific changes needed. The verbatim responses were reviewed before coding, and five categories, created in earlier rounds, were used to summarize them (Table IV.4). Responses that could not be coded into one of the five categories were retained as "other."

Table IV.4. Response Categories Added to Section C Items During Coding

Item	Question Text	Categories Added
C35	Are there any changes in {your/NAME's} {main/current} job or workplace related to {your/his/her} mental or physical condition that {you need/(he/she needs} but that have <u>not</u> been made? (IF YES) What are those changes?	a = NEED SPECIAL EQUIPMENT b = NEED CHANGES IN SCHEDULE c = NEED CHANGES TO TASKS d = NEED CHANGES TO ENVIRONMENT e = NEED CO-WORKERS TO ASSIST f = NEED OTHER CHANGES
C39b	{Do you/Does NAME} work fewer hours or earn less money than {you/he/she} could because {you/he/she}…	g = POOR HEALTH/HEALTH CONCERNS
C39_2	What benefits have been reduced or ended as a result of your main/current job?	14 = HEALTH INSURANCE UNSPECIFIED

D. Section D—Job/Other Jobs During 2009

Section D collected information about employment during the 2009 calendar year, including type(s) of employer(s), hours worked, wages earned, and reasons for leaving employment, if applicable. Other questions asked if respondents worked or earned less than they could have (and, if so, why) and collected information about experiences related to Social Security benefit adjustments due to work.

As in Section C, job-specific information (Items D2 through D23) was collected for each job held in 2009. Data for each job are represented in the data file with an _n indicating the job to which the data refer (for example, D6mth_1 indicating month started first job, D6mth_2 indicating month started second job, and so on). Respondents reported first on their main job, that is, the job at which they worked the most hours, and then reported on other jobs held. To reduce respondent burden, respondents did not have to report on any jobs held during 2009 that were mentioned in Section C as current employment. Rather, employment data from Section C were copied into Section D during data processing for all current jobs also held during 2009. In Table IV.5, we list all job-specific items that were filled in with Section C data. Items in Section D that had no equivalent in Section C (D8mnth, D8yr, D23, D23_oth) were coded as .L (indicating logical skip).

Table IV.5. Job Variables in Sections C and D

Variable in Section C	Variable in Section D	Variable Description
C2	D4	Occupation
C3	D5	Industry
C4mth, C4yr	D6mth, D6yr	Start month and year of job
No equivalent item	D8mth, D8yr	Stop month and year of job
C6	D14	Self-employed status
C7	D15	Sheltered workshop status
C8	D16	Hours usually worked per week
C9	D17	Weeks usually worked per year
C10	D18	Paid by the hour
C11	D19	Hourly pay
C12amt, C12hop	D20amt, D20hop	Amount of pre-tax pay
C13amt, C13hop	D21amt, D21hop	Amount of post-tax pay
No equivalent item	D23_1 through D23_22	Reasons for stopping work

1. Including Current Jobs Held in 2009 in Section D

Jobs mentioned in Section C were defined as held in 2009 if Item C4yr (year started current job) was earlier than or equal to 2009. Each applicable job from Section C was copied into the first blank job slot in Section D (for example into D6mth_2 if D6mth_1 already contained data and into D6mth_3 if both D6mth_1 and D6mth_2 already contained data). The variables C_job_from_SecC_1 through C_job_from_SecC_4 are included in the data file to indicate which jobs from Section C (by job number) were copied into specific Section D job slots.

2. Determining Main Job Held in 2009

In addition to copying job data from Section C into the Section D items, we had to determine which job held in 2009 was the main job. Before including the jobs from Section C, we stored the main jobs held in 2009 as job 1. Given that it was possible that a job reported in Section C was the respondent's main job in 2009, we compared hours worked in 2009 on each job with the first job mentioned in Section D after incorporating the jobs from Section C. The job with the greatest number of hours per year (number of hours per week multiplied by the number of weeks per year) was deemed the main 2009 job.[16] We used the variable Main_Job_grid_num, which identifies the job number of the main job held in 2009 based on number of hours worked, to create a series of variables ending with _m representing each job-specific item listed in Table IV.5 for the main job held in 2009 (for example D6mth_m and D6yr_m). It is important to note that information related to the main job was not deleted from the job_1-job_5 variables. For example, for a case with three jobs listed in Section D (after copying relevant jobs from Section C) and the second job deemed the main job, information related to hours worked on this second job is available in both Items C8_m and C8_2. Therefore, _m jobs should not be counted as additional jobs. The public-use version of the file provides only the main job variables (_m) for jobs held in 2009.

For purposes of the constructed variables created in Section D, we created separate constructs for each job mentioned (job 1, job 2, and so on) as well as additional constructs for the "main" job (C_MainJob2009SOC, C_MainJob2009NAICS, C_MainJobHrPay2009, C_MainJobMnthPay2009, C_MainJobMnthPayTH2009, and C_MnthsMain2009Job) as identified by the variable Main_Job_grid_num. As stated, information in the main job constructs is replicated in one of the other job slots in the restricted-use file and does not represent an additional job.

During data processing, we found 31 cases in which the respondent reported in Item B30 that he or she did not work in 2009 (B30 = 0) but whose reported current job start dates indicated that the individual held a job in 2009. Such cases were recoded to B30 = 1 (indicating that the respondent did work in 2009). It is important to note that Item D3 ("Other than the current jobs you just told me about, how many other jobs did you hold for at least one month in 2009?") was not recoded to reflect the number of jobs held in 2009 after including jobs from Section C. To determine the total number of jobs held in 2009, the data user should sum Item D3 and C_Totjobcopied, a construct that indicates the number of jobs copied from Section C to Section D.

3. Occupation and Industry Coding

Item D4 asked respondents to describe the type of work they performed on each job held in 2009 (occupation); Item D5 asked respondents to describe the corresponding type of business (industry). As for equivalent items in Section C, the verbatim responses to the items were coded by

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[16] If hours per year could not be calculated because of missing data on either number of hours per week or number of weeks per year, we coded the hours as missing. If hours per year were missing for all 2009 Section C jobs, job 1 in Section D was counted as the main job in 2009. If no jobs were listed in Section D and hours per year were missing for all 2009 jobs in Section C, the first job listed in Section C that was a 2009 job was counted as the main job in 2009. If hours per year were missing for job 1 in Section D, the Section C job with most hours per year was counted as the main 2009 job. If there was no 2009 job from Section C or hours per year were missing for all Section C 2009 jobs, job 1 in Section D was counted as the main 2009 job. If hours per year were missing for all 2009 Section C jobs and for job 1 in Section D, job 1 in Section D was counted as the main job in 2009.

using the SOC and NAICS classification systems described above. The verbatim responses to Items D4 and D5 are not included in the restricted- or public-use version of the data file. Rather, the coded responses to Item D4 are in the construct C_MainJob2009SOC, C_Job12009SOC, and so on. The coded responses to Item D5 are in C_MainJob2009NAICS, C_Job12009NAICS, and so on.

4.　Uncodeable Occupation and Industry Verbatim

Coders used the same supplemental two-digit codes described above to assign general-level codes when full SOC and NAICS codes could not be assigned. In all, between one and four percent of the 2009 occupation verbatim responses and industry verbatim responses for each job in Section D were uncodeable for any given item.

5.　Dates Worked at 2009 Job

Items D6mth, D6yr, D8mth, and D8yr collected start and stop dates for each job held in 2009. Soft edit checks built into the Blaise instrument verified that stop dates were later than start dates and that each job was held for at least one month in 2009. If the interviewer verified that the job ended before 2009 or was held for less than one month in 2009, items collecting job-specific information in Items D14 through D21hop were skipped. Occupation and industry data as well as start and stop dates for these jobs were retained in the data file because respondents answered other items in Section D (why they stopped working at the job in Item D23 and general items about working in 2009 in Items D25 through D30).

6.　Hours Worked

Item D16 asked respondents for the number of hours per week usually worked in their 2009 job. As in Section C, a soft edit check incorporated into the Blaise instrument prompted interviewers to verify that the response was correct for any response greater than 60 hours per week. Responses over 60 hours a week (8 cases for job 1, for example) and under 5 hours a week (58 cases on job 1) underwent examination during data cleaning. After a review of other job-related information, we retained all data. In general, if the respondent was working in a sheltered employment setting, we determined that low values for hours worked were not unreasonable and should be retained. Similarly, if the respondent's occupation was consistent with a high number of hours worked per week, we retained the values.

7.　Weeks per Year

Item D17 asked respondents how many weeks per year they usually worked in their 2009 job. Responses indicating fewer than 20 weeks underwent examination during data cleaning (274 cases for job 1). In general, if the occupation verbatim response and other job-related information were consistent with the possibility of few weeks worked per year, we retained the original values. It was not possible, based on other information, to determine whether the values were errors; therefore, we retained them in the file.

8.　Pay

Respondents reported their pre-tax earnings for each 2009 job in Item D19 (if reported as an hourly wage) or in Item D20amt (if reported in another unit, such as daily, weekly, monthly, or annually) and their take-home pay in Item D21amt. Three constructed variables combined pre-tax responses into an hourly wage (C_MainJobHrPay2009, C_Job1HrPay2009, and so on), a monthly

wage (C_MainJobMnthPay2009, C_Job1MnthPay2009, and so on) regardless of where the initial reporting occurred, and monthly take-home pay (C_MainJobMnth PayTH2009, C_Job1Mnth PayTH2009, and so on). In addition, a constructed total monthly pay variable summed pay across all jobs (C_Tot2009Pay). Source variables and constructed variables underwent examination for extremely high and low values.

A soft edit check incorporated into the Blaise instrument prompted interviewers to verify any response over $25 an hour in Item D19. Responses over $25 an hour (nine cases for job 1) underwent close examination. Given that other job-related information, including the verbatim occupation response, indicated that the entries could be valid, we retained all entries in the file. Hourly wage values of $3 and below also underwent examination (n = 4). In all cases, respondents were working in a sheltered employment setting or the verbatim job description indicated that the low values for hourly wages were not unreasonable; thus, we retained the values.

Soft edit checks built into the instrument also flagged high entries for each of the various reporting units in Items D20amt and D21amt. As for hourly wages, values that were suppressed or that were at the high and low ends of the range underwent examination. Cases for each reporting unit were examined by looking at other job-related information. In most cases, the verbatim occupation and industry descriptions indicated that the values could be valid; thus, we retained the values in the file. Generally, if the respondent was working in a sheltered employment setting or the verbatim job description indicated that the low values for wages were not unreasonable, we retained the values. Recoding of data occurred only in cases of an obvious data entry error or when the respondent's job characteristics were inconsistent with reported earnings or pay.

In addition to examining high and low values, we compared take-home and pre-tax values and, during data processing, found that many cases exhibited a difference of 30 percent or more. However, only those cases with the most extreme differentials and those whose other job-related information did not support the difference were recoded or set to missing. In all, we set two cases to missing (.D) on either Item D20amt or Item D21amt.

9. Back-Coding Responses to "Other/Specify" Items

Items D25_a through D25_f asked if several issues were the reasons that the sample person had worked fewer hours than he or she might have worked. Items D26a through D26h asked if several issues were the reasons that the sample member did not work or earn more. Responses coded as "other" underwent review during data processing. For both Items D25 and D26, we added categories during coding to allow further categorization of responses (Table IV.6).

10. Back-Coding Field-Coded Responses

Where possible, interviewers attempted to code verbatim responses to Items D23 (why the sample person quit working at the job held in 2009) and D25_2 (benefits reduced or ended as a result of 2009 job) into a series of pre-determined categories. Cases coded as "other reason" by interviewers underwent review to determine if they could be back-coded into an existing category. Four additional categories, created in earlier rounds, facilitated the coding for Item D23 (Table IV.6). Responses that could not be coded into one of these four categories were retained as "other."

Table IV.6. Response Categories Added to Section D During Coding

Item	Question Text	Categories Added
D23	Why did {you/NAME} stop working at this job?	19 = MOVED TO ANOTHER AREA
		20 = FOUND ANOTHER JOB
		21 = LOSS OF BENEFITS
		22 = WORK SCHEDULE
D25a	Did you work fewer hours or earn less money than you could have because you…	g = HAD MEDICAL PROBLEMS
D26	In 2009, do you think {you/NAME} could have worked or earned more if {you/he/she} had…	i = BETTER HEALTH/TREATMENT
		j = MORE SUPPORTIVE/HELPFUL EMPLOYER AND/OR CO-WORKER

E. Section E—Awareness of SSA Work Incentive Programs and Ticket to Work

Section E assessed whether the beneficiary was aware of or participating in specific SSA work incentive programs and services. For the TTW program, Section E collected information on how beneficiaries learned about the program, the names of their current service providers, and dates they signed up with them.

1.   Awareness Items

In an early review of data frequencies, we identified 14 cases with missing data for C_Orgsampinfo_bstatus, which classifies the sample member as a recipient of SSI, SSDI, or both and determines the awareness items to be asked in Section E. For example, sample members receiving SSI and SSI/SSDI are eligible for Items E3 through E10. As a result, 6 cases that should have received Items E3 through E10 did not. Sample members receiving SSDI and SSI/SSDI are eligible for Items E15 through E18; 17 cases that should have received these items did not. We set the values for these cases to missing (.M) for the relevant items.

2.   Dates Receiving Services from ENs

Section E exhibited minimal problems with the collection of stop and start dates for Employment Networks. Respondents were first asked if they had signed up with any EN in 2009. If they had but were no longer signed up with that EN, Items E42mth and E42yr collected the month and year the sample member stopped receiving services. Fourteen respondents reported that they stopped receiving services from the first EN mentioned before 2009, two gave dates before 2009 for the second EN, and one each gave dates before 2009 for the third, fourth, and fifth ENs. In all of these cases, we set Item E42yr to missing (.D).

Item E45 asked respondents who reported that they were not currently signed up with the EN that they signed up with in 2009 (Item E41) if they were currently signed up with any EN. Items E47mth and E47yr collected the month and year the sample member started receiving services from the current EN. Although some respondents reported first receiving services in 2009 or earlier (55 cases), responses to Item E37 ("Were you signed up with any Employment Network at any time in 2009?") were not recoded to "yes" for such cases; recoding would have affected the skip logic in Section H. In addition, for respondents who had not reported ever using a Ticket with any other

ENs, Items E50mth and E50yr asked for the month and year that they began receiving services. Although 27 cases reported first signing up in 2009, Item E37 was not recoded during data processing. The inconsistencies remain in the file.

3. Several Current ENs

Item E41 revealed that 40 respondents reported that they were currently signed up with two ENs, 4 respondents reported that they were currently signed up with three ENs, 2 respondents reported that they were currently signed up with four ENs, and one respondent reported that he or she was currently signed up with five ENs. Even though reports of sign-up with several ENs were relatively rare, they prevented a determination of which EN should be considered current. We did not recode the inconsistencies and retained them in the file.

4. Back-Coding Field-Coded Responses

Item E27asks the sample member from whom he or she received information about the Ticket to Work program, and Item E28 asks who sent the information. Interviewers attempted to code the respondents' verbatim responses for the two items into one of the existing response categories. Responses coded as "other" underwent examination and were back-coded when possible. Responses that could not be back-coded were retained as "other."

5. Coding Open-Ended Responses

Item E43 was an open-ended question that asked respondents why they no longer received services from their 2009 EN. Before coding, the verbatim responses underwent review, and five categories were used to cluster responses (Table IV.7). Responses that could not be coded into one of the categories were retained as "other."

Table IV.7. Response Categories Added to Section E During Coding

Item	Question Text	Response Categories Added
E43	Why {are you/is NAME} no longer receiving services from {EN IN 2009 FROM E39}?	1 = NEVER RECEIVED ANY INFORMATION 2 = FOUND A JOB 3 = CANNOT WORK FOR HEALTH REASONS 4 = OTHER REASON RELATED TO PERSONAL CIRCUMSTANCES 5 = OTHER REASON RELATED TO EN 6 = OTHER

F. Section F—Ticket Nonparticipants in 2009

Section F collected information about reasons for nonparticipation in the TTW program. It asked whether the respondent had attempted to learn about employment opportunities (including TTW), problems he or she may have had with ENs or other employment agencies, and how those problems were handled or resolved.

1. Back-Coding of "Other/Specify" Responses

Item F2 asked if the sample member contacted any of a series of agencies or individuals for information about TTW. Two "specify" response options (Employment Network and Other

Agency or Organization) prompted a verbatim response. During data processing, the verbatim responses underwent review and were back-coded into Items F2_a through F2_g when possible.

2. Back-Coding Field-Coded Responses

Items F5 (how first learned about Ticket), F6 (who sent information about ENs), F16 (why the SVRA did not accept the Ticket), F25 (why the EN did not accept the Ticket), F29 (why did not contact SVRA after receiving information), and F31 (main reasons did not try to participate in Ticket) were all open-ended items that required interviewers to attempt to code the respondent's verbatim response into a pre-determined category. Responses coded as "other" by the interviewer underwent review by coders and were back-coded into existing response options when possible. Responses that could not be back-coded were retained as "other."

G. Section G—Employment-Related Services and Supports Used in 2009

Section G collected information from respondents about their use of employment-related services in 2009, including types of services received, types of providers used, how long services were received, how services were paid for, and reasons for and satisfaction with service utilization. Other questions asked about sources of information about services and the nature of any services needed but not received.

1. Missing Provider Names

To aid in the recall of employment-related services received in 2009, respondents were first asked if they had ever received employment services, job training, medical services, or counseling to improve their ability to work or live independently. For each type of service, Items G2, G11, G16, and G20 asked respondents to list up to eight providers or places where they received services. Provider type was then collected for each provider mentioned. In several cases, respondents did not know the name of the provider and thus were not asked follow-up questions about provider type. In total, less than one percent of provider names were missing for Item G2, six percent for Item G11, one percent for Item G16, and three percent for Item G20.

To minimize respondent burden by avoiding the need to ask provider type again if a provider was listed under two or more services, interviewers could indicate that a provider had already been mentioned and then skip the provider-type follow-up questions. In some cases, however, interviewers indicated that a provider had already been mentioned, when in fact it had not been mentioned, resulting in missing data for the provider-type questions. A careful examination of Section G data revealed cases where providers were inappropriately deleted. For example, we examined cases in which Item G1 = 0 (no employment services received) and Item G10 = 1 (received job training) but Item G13_1=.L. In these cases, the interviewer had indicated in Item G12 that the first provider given in Item G11 had already been mentioned (causing the provider-type followups to be skipped), which was not possible. In such cases, the provider-type items (Items G13 and G14) were set to .M, indicating that an error caused the item to be skipped. Similar strategies were employed to examine providers marked as already mentioned in Items G17 and G20. In all, there were 10 cases in which provider-type Items G13 and G14 were set to missing (.M) for a provider listed in Item G11, 26 cases in which provider-type Item G18 was set to missing (.M) for a provider listed in Item G16, and 30 cases in which provider-type Item G22 was set to missing (.M) for a provider listed in Item G20.

Once we obtained a list of providers ever used, we asked respondents when they last received services from each provider. For each provider from whom services were received in 2009, we then asked follow-up questions about specific services received, number of visits, duration of visits, cost of services, and usefulness of services. Before asking when services were received, we compiled for the interviewer the list of providers listed in Items G2, G11, G16, and G20. The interviewer then had to determine if any of the providers on the list were duplicates and confirm with the respondent if any of the providers on the list were the same. Providers marked as duplicates were removed from the list, and the provider-specific follow-up information was not obtained. While the process worked relatively well, some cases marked as duplicates did not appear to be duplicates upon an examination of provider name and type. Such cases were coded as .M (indicating missing due to error) on Item G33 since the follow-up questions regarding when services were received were not asked about the relevant providers. Across providers, data were missing in 198 instances. For any single provider, the first provider listed under mental health services in Item G19 had the highest proportion of missing data, with one percent (59 cases) of cases coded as .M. The restricted-access file includes a flag variable for each provider indicating whether the provider was marked for removal from the list (e.g., G_Del_1-G_DEL_34). Cases in which the provider name was coded as missing in Items G2, G11, G16, and G20 were not asked Item G33 or subsequent follow-up questions regarding 2009 services (coded as .L = logical skip).

2. Back-Coding Responses to "Other/Specify" Items

Each of the provider type questions in Section G (Items G7 and G9, G13 and G14, G18, and G22) included an "other" option that prompted a verbatim response. During data processing, the verbatim responses underwent review to determine whether they could be clustered into additional categories. In Table IV.8, we provide the response categories added during coding. Responses were then back-coded when possible into one of the existing or newly created categories. Responses that could not be coded were retained as "other." Cases back-coded as "state agency" in Item G7 were also recoded in Item G9 to indicate the type of state agency. Cases back-coded as "state agency" in Item G13 were also recoded in Item G14. "Other" responses in Item G29c (reasons did not receive services), Item G36_a-G36_m (services received), and Item G40_1 (reasons services provided were not useful) underwent review. Responses were reviewed and back-coded into existing response options when possible.

Table IV.8. Response Categories Added to Section G During Coding

Item	Question Text	Response Categories Added
G7	Thinking about {PROVIDER FROM ITEM G2}, was this place:	4 = SCHOOL
G18	Thinking about {NEW PROVIDER FROM ITEM G16}, was this place:	5 = A SCHOOL 6 = A NURSING HOME/GROUP HOME 7 = A GOVERNMENT AGENCY 8 = IN-HOME CARE 9 = A MEDICAL EQUIPMENT STORE 10 = A REHABILITATION CENTER 11 = A PHYSICAL THERAPY CENTER

Table IV.8 *(continued)*

Item	Question Text	Response Categories Added
G22	Thinking about {NEW PROVIDER FROM ITEM G20}, was this place:	6 = A RESIDENTIAL TREATMENT PROGRAM/FACILITY 7 = A REHABILITATION CENTER/COUNSELING CENTER/DAY PROGRAM 8 = A CHURCH OR RELIGIOUS INSTITUTION
G36	In 2009, please tell me if {you/NAME} received any of the following services from {PROVIDER FROM ITEM G32 DE-DUPLICATED LIST IF USED IN 2009}. Did {you/he/she} receive:	N = SCHOLARSHIPS/GRANTS/LOANS
G61	Why {were you/was NAME} unable to get these services?	1 = NOT ELIGIBLE/REQUEST REFUSED 2 = LACK INFORMATION 3 = COULD NOT AFFORD 4 = DID NOT TRY 5 = TOO DIFFICULT/TOO CONFUSING 6 = PROBLEMS WITH THE SERVICE 7 = OTHER

3. Back-Coding Field-Coded Responses

Items G28 (type of degree working toward), G53 (reasons for service use), G55 (who pressured to use services), and G56 (how pressured to use services) were all open-ended items that required interviewers to attempt to code the respondent's verbatim response into a pre-determined category. Responses coded as "other" by the interviewer underwent review by coders and were back-coded into existing response options when possible. In some cases, other categories were added during coding to cluster "other" responses that did not fit into a pre-determined category (Table IV.8).

4. Coding Open-Ended Items

Item G61 (reasons unable to get needed services) was an open-ended question with no response options. A review of the responses led to the development of seven categories based on common responses (Table IV.8). Coders then attempted to code the verbatim response into an established category. If the response did not fit into one of the categories, it remained "other."

H. Section H—Ticket Participants in 2009

Section H asked 2009 TTW participants about their experiences with the program, including information related to how they decided to participate in the Ticket program, the types of information they used to select their current service providers, development of their IWP, and any problems with services provided by an EN. Section H also included a series of questions about how problems with ENs were resolved and overall satisfaction with the TTW program.

1. Back-Coding Responses to "Other/Specify" Items

Item H7 asked respondents if they contacted any of a series of agencies or individuals to obtain information about the TTW program. Two "other" response options ("other agency" and "anyone else") prompted a verbatim response. During data processing, the verbatim responses underwent review and were back-coded into Items H7_a through H7_h when possible. Item H40_1 (why

services received did not help get or keep 2009 job), Item H43_1 (why not successful in reaching work goals), and Item H45_1 (why not satisfied with TTW) also included "other/specify" options. Responses underwent review and were back-coded into existing response categories if possible.

2. Back-Coding Field-Coded Responses

Items H13 (method of receiving information about ENs), H14 (who provide information about ENs), H25 (reasons SVRA did not accept Ticket), H31 (reasons EN did not accept Ticket), and H35 (reasons respondent chose EN) were all open-ended items that required interviewers to attempt to code the respondent's verbatim response into a pre-determined category. Responses coded as "other" by the interviewer underwent review by coders and were back-coded into existing response options when possible. In some cases, additional categories were added during coding to cluster "other" responses that did not fit into a pre-determined category (Table IV.9).

Table IV.9. Response Categories Added to Section H as a Result of Coding

Item	Question Text	Response Categories Added
H3	Why did {you/NAME} decide to participate in the Ticket to Work program?	1 = WANTED TO GET A JOB/MORE MONEY 2 = WANTED TO FEEL MORE INDEPENDENT 3 = OTHER 4 = RECOMMENDED/TOLD TO USE IT/THOUGHT USING IT WAS REQUIRED
H33	What information did {you/NAME} need but didn't get?	1 = HOW/WHERE TO USE TICKET 2 = SERVICES PROVIDED 3 = OTHER
H38	What problems did {you/NAME} have during 2009 (with the services you received from EN)?	1 = PROBLEMS MAKING CONTACT 2 = PROBLEMS NOT RECEIVING SERVICES 3 = PROBLEMS WITH COUNSELOR 4 = OTHER 5 = TRANSPORTATION/LOCATION PROBLEMS
H48	What was the problem about?	1 = PROBLEMS MAKING CONTACT 2 = PROBLEMS RECEIVING SERVICES 3 = OTHER

3. Coding Open-Ended Items

Items H3 (reasons for deciding to participate in TTW), H33 (what information was needed but not received), H38 (problems with EN), and H48 (nature of problems with EN) were open-ended questions with no response options. A review of the responses determined the development of categories for each item based on common responses (Table IV.9). Coders then attempted to code the verbatim response into an established category. If the response did not fit into one of the categories, it remained "other."

I.   Section I—Health and Functional Status

Section I collects information about the respondent's general health status and daily functioning, including the need for special equipment or assistive devices. Section I also collects information on difficulties with ADLs and IADLs, functional limitations, substance abuse/dependence, and treatment for mental health conditions.

1.   **Back-Coding Responses to "Other/Specify" Items**

Items I20 (equipment used for seeing), I24 (equipment used for hearing), I28 (equipment used for speaking), and I32 (equipment used for walking) were all open-ended items that required interviewers to attempt to code the respondent's verbatim response into a pre-determined category. Responses coded as "other" by the interviewer underwent review by coders and were back-coded into existing response options when possible. In some cases, other categories were added during coding to cluster "other" responses that did not fit into a pre-determined category.

J.   Section J—Health Insurance

Section J collected information about the sources of the beneficiary's health insurance coverage both at the time of the interview and during calendar year 2009.

1.   **Back-Coding Responses to "Other/Specify" Items**

Items J6 (type of private insurance), J9 (type of health coverage), and J11 (type of health coverage in 2009) were all open-ended items that required interviewers to attempt to code the respondent's verbatim response into a pre-determined category. Responses coded as "other" by the interviewer underwent review by coders and were back-coded into existing response options when possible.

K.   Section K—Income and Other Assistance

Section K asked about sources of income, including income received from earnings, Social Security, Workers' Compensation, and other government programs and sources.

1.   **Earnings Last Month**

Item K3 asked respondents how much they earned last month before taxes and deductions; Item K3a then asked how much remained after taxes and deductions. Soft edit checks built into the instrument flagged high and low values for both items, although the checks were set to accept a wide range of responses. According to the distribution of responses, we examined extremely low (less than $50 per month) and high (over $5,000 per month) values for both pre-tax and take-home pay. In most cases, we were able to evaluate the values in the context of the job-specific information in Section C by reviewing the number of jobs currently held by the sample person, the number of hours worked, the sample person's occupation, and whether the sample person was in a supported employment setting. Three-quarters of the sample members reporting less than $50 a month worked in a sheltered workshop or were involved in a self-employment activity that could explain low monthly wages. In most cases with $0 income reported, sample persons were employed in seasonal work or sporadic work such as dog breeding and photography. Thus, only three cases with extremely high or low values for pre-tax and take-home pay were edited during data processing.

We also examined differences between amounts of pre-tax (Item K3) and post-tax (Item K3a) pay. Some respondents reported differences in pre-tax (Item K3) and post-tax (Item K3a) pay that were greater than would typically be expected. For 16 of the 24 cases with differentials greater than 100 percent, we edited the pre-tax or post-tax monthly income. We retained the values for 4 cases and edited the pre-tax or post-tax value of another 4 cases based on a presumed data entry error. Cases with differentials between 30 and 99 percent were examined individually and edited only if an obvious source of error could be identified. In 6 cases, Item K3a (post-tax) was greater than Item

K3 (pre-tax). Item K3a was set to missing (.D) for 5 of the 6 cases. The value for the sixth case was edited as it was clear that a data entry error occurred.

Finally, we compared the total monthly income calculated for all jobs currently held (based on Section C data) with the monthly income reported in Section K. We expected to see differences in some cases as when, for example, sample persons had changed or just started a job, work was seasonal, or the sample person was self-employed. In 223 cases, the difference in monthly income reported in Sections C and K was at least 30 percent. In many cases, we could not determine either the reason for the discrepancy, or which monthly income value was more correct. In view of the uncertainty, we did not edit most values (n = 218) on the basis of the comparison; thus, some suspect values remain in the file. Accordingly, we did not impute values for the constructed variable C_LstMnthPay (Last Month Pay), which is based on Item K3.

2. Income from Other Sources

Soft edit checks built into the instrument flagged high and low values for income received from each source specified (Items K7a through K7_h). We examined values for cases in which the edit check had been suppressed (over $1,000 per month) and cases at the high and low ends of the distribution. In six cases, income reported was "1," which was assumed to be a data entry error; we subsequently set such income to missing. High values were reviewed with analysts. In general, while some values exceeded the maximum benefit amounts for 2009, we decided to retain the values on the original items—although for purposes of creating the imputed variable, we did not use values above the limits when calculating the median from which the imputed values were derived. In addition, we did not use values over $8,000 per month for Item K7_g (other regular sources) when calculating the median for the imputed variables. Similarly, values associated with Items K7_h (other non-regular sources) and K14 (other government assistance) underwent review, but none were edited because none could be clearly identified as data entry errors. In general, we did not recode values of "0" for amounts received from other sources.

3. Food Stamp Dollar Value

Item K12 asked respondents who had reported receiving food stamps last month to report the dollar value of the food stamps. Respondents were instructed to include food stamps received only by the sample person, not by other family members. Despite reports of some high values (84 values of $500 or greater), we retained the values in the file.

4. Irregular SSI Income

Per SSA's and the analysts' request, Item K7_h (amount of income received from other sources not on a regular basis) inquired about irregular SSI payments as non-regular income. For respondents who had not indicated the receipt of income from other non-regular sources but who, according to SSA administrative records, had received irregular payments from SSA, Item K6_h was recoded as "yes," with the overages in benefit payments (as determined from administrative data) entered at Item K7_h. For cases that had already reported the receipt of income from other sources on an irregular basis, verbatim responses at Item K6_h regarding the source of the income underwent review to determine if any included SSA or SSI benefits. None of the responses suggested that SSA or SSI benefits were the source. Therefore, for such cases, administrative data representing overages in benefit payments were added to the amount already reported in Item K7_h, accounting for a total of 48 cases.

5. Back-Coding Responses to "Other/Specify" Items

If respondents indicated receipt of income from other sources on either a regular (Item K6_g) or non-regular (Item K6_h) basis, they were asked to specify the source. While we could have created additional categories during coding to cluster responses to the query about income sources, such categories would have necessitated the development of additional amount variables in Item K7 for appropriate coding of the amount of income received from each source. Cases reporting more than one source would not lend themselves to disaggregation of amounts. Therefore, "other" responses were not back-coded for these items.

6. Coding Open-Ended Items

Item K14 (type of assistance received from other government program) was an open-ended question with no response options. Following a review of the responses, we developed categories based on common responses (Table IV.10). Coders then attempted to code each verbatim response into an established category. If the response did not fit into one of the categories, it remained "other."

Table IV.10. Response Categories Added to Section K as a Result of Coding

Item	Question Text	Response Categories Added
K14	What other assistance did {you/NAME} receive <u>last month</u>?	1 = HOUSING ASSISTANCE 2 = ENERGY ASSISTANCE 3 = FOOD ASSISTANCE 4 = OTHER

L. Section L—Sociodemographic Information

Section L collected basic demographic information about the beneficiary, such as race, ethnicity, education, parental education, marital status, living arrangements, and household income.

1. Living Situation

Item L11 asked respondents to indicate whether they lived alone; lived with parents, guardians, spouse/partner, or other relative; lived with friends or roommates; lived in a group setting; or lived in some other arrangement. Item L12 then asked respondents to describe the place they lived. A soft edit check built into the instrument prompted interviewers to clarify answers in which the respondent indicated that he or she lived alone at Item L11 but also lived in a group setting at Item L12, such as a supervised apartment, group home, halfway house, personal care or board-and-care home, assisted living facility, nursing or convalescent home, center for independent living, or some other type of supervised group residence or facility. In some cases, the edit check was suppressed (59 cases), and the inconsistency remained. For these cases, Item L11 was recoded to 4 (live in another group setting).

2. Number of Children

Item L17 asked how many children under age 18 lived in the sample person's household. Respondents reporting children were then asked how many of the children were their own (Item L19). In 39 cases, the number of own children living in the household (Item L19) was greater than

the number of children living in the household (Item L17). For these cases, Item L19 was set to missing (.D).

3. Reporting of Household Income

Item L23Aamt asked respondents to provide their total income in 2009, or the total combined income of their household, before taxes and other deductions. Respondents who experienced difficulty in calculating an annual amount could report their income in monthly, twice-a-month, weekly, biweekly, or daily units (recorded in Item L23Ahop). The level of item nonresponse was higher for Item L23Aamt than for other items in the survey (32 percent). Those answering "don't know" or "refused" were asked to indicate which of a series of ranges described their income (Item L24). Of the 1,628 respondents who did not respond to Item L23Aamt, 56 percent (917 cases) provided income data in Item L24.

We created the construct C_HhInc2009 to combine the responses expressed in various units into an annual income amount. We first examined high and low values of Item L23Aamt by unit reported (Item L23Ahop) and then examined high and low values on C_HhInc2009 to determine if any appeared to be invalid. Twenty-two cases reported an annual income of less than $100. After reviewing work status, household size, and other sources of income, we noticed that 8 of the 22 cases set Item L23Aamt to "don't know"; we retained the values of the remaining 14 cases in the file. While the 22 cases prevented the imputation of household income, we created and imputed a more general construct C_FEDPOVERTYLEVEL_ CAT1 (Household Poverty Level) based on reported income and household size. Other cases were examined on a case-by-case basis by reviewing household size and work-related variables in 2009. Generally, we coded most cases reporting household income of $200,000 or more as .D. In some cases, it appeared that an extra "0" had been entered or that a "1" had been entered at the value rather than at the next item to indicate unit. We corrected such cases. In other cases, we concluded that an error occurred in the unit entered and corrected it. In all, we edited 15 cases.

4. Back-Coding Responses to "Other/Specify" Items

As mentioned, Item L11 asked respondents to indicate which of a series of items best described their living situation. Responses coded as "some other living situation" underwent review and were back-coded when possible. "Other" responses to Item L23ahop (how often paid) also underwent review, although most could not be back-coded into an existing category.

5. Back-Coding Field-Coded Responses

Item L12 (type of place respondent lives) was an open-ended item that required interviewers to attempt to code the respondent's verbatim response into a pre-determined category. Responses coded as "other" by the interviewer underwent review by coders and were back-coded into existing response options when possible. Responses were not coded from "other" to a non-group living situation (Item L12 = 1 through 3), however, as such coding would have affected instrument pathing.

M. Section M—Closing Information and Observations

Section M updated the sample member's contact information so that the incentive check could be mailed. The interviewer recorded the reasons that a proxy or assistance was required, if appropriate, and documented special circumstances.

1.   **Back-Coding Field-Coded Responses**

Items M2a_rlshp and M13 asked interviewers to indicate the relationship of the proxy respondent to the sample person. Responses coded as "other relative" or "other not related" underwent review and were back-coded when possible. Item M14 (why assistant/proxy needed) required interviewers to attempt to code the respondent's verbatim response into a pre-determined category. Responses coded as "other" by the interviewer underwent review by coders and were back-coded into existing response options when possible.

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V. CONCLUSIONS

This report has highlighted data quality issues identified during the NBS Round 4 data editing and cleaning process. In sum, both programming errors and interviewer errors led to the loss of some survey data; however, given that the large share of errors occurred in earlier rounds, the amount of missing data is relatively small.

In general, while survey data processing could have been made more efficient by introducing stricter range checks for unusually high or low values, we were hesitant to apply checks that could have overwhelmed and frustrated respondents by rejecting survey responses during the interview. Any addition of checks must balance the complications associated with survey instrument programming that account for known data complexities against the need to address data complexities after survey completion.

We continued to strengthen interviewer training to emphasize areas of the questionnaire where data problems surfaced during Round 4. Such areas include the use of screens to mark providers as already mentioned in Section G, the importance of correct data entry for job-specific items, probing for sufficient information on open-ended items, and avoiding the suppression of edit checks without entering comments. The improved training aimed to sensitize interviewers to areas of the questionnaire that are particularly error-prone or to survey concepts that are particularly difficult.

In conclusion, the NBS data file provides a rich array of data. The data cleaning, editing, and processing tasks identified several instances in the data file where micro-level errors were obvious.

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APPENDIX A

CHANGES IN QUESTIONNAIRE CONTENT BETWEEN ROUNDS 3 AND 4

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Appendix A. Changes in Questionnaire Content Between Rounds 3 and 4

Item	Change	Reason
Section B		
B23_2. How often do you {now} use a computer to access the Internet or World Wide Web?	Item added	Added to address question raised by the SSA commissioner about whether SSA could use the internet more effectively to communicate "news" to beneficiaries, such as the availability of ticket program.
B23_3. Have you ever used a computer to access information about your disability, services, or work-related information via the Internet?	Item added	Added to address question raised by the SSA commissioner about whether SSA could use the internet more effectively to communicate "news" to beneficiaries, such as the availability of ticket program.
B30_b. {Have you/Has NAME} worked for pay since {you/NAME} started receiving disability benefits?	Item added	Added to fill gap in knowledge of employment status before 2009.
Section E		
E20c. {Have you/Has NAME} ever heard of benefit specialists or BPAOs?	Item revised	Revised to address changes in program names and functions. Asking about Work Incentive and Planning Assistance Programs rather than benefit specialists/BPAOs.
E20d. {Have you/Has NAME} ever used a benefit specialists or BPAOs?	Item revised	Revised to address changes in program names and functions. Asking about Work Incentive and Planning Assistance Programs rather than benefit specialists/BPAOs.
E20e_1. {Have you/Has NAME} ever heard of Work Incentive Seminar Events or WISE? These are community events held by local organizations for beneficiaries to learn more about available work incentives, including the Ticket to Work program.	Item added	Added to address new program.
E02f_1. {Have you/Has NAME} ever attended a Work Incentive Seminar Event?	Item added	Added to address new program.
E20e. {Have you/Has NAME} ever heard of Protection and Advocacy for Beneficiaries of Social Security or PABSS? This program is focused on protecting beneficiaries' rights to obtain services.	Item added	Added to address changes in program names and functions.
E20f. {Have you/has NAME} ever used Protection and Advocacy for Beneficiaries of Social Security or PABSS?	Item added	Added to address changes in program names and functions.

Item		Change	Reason
E22.	{Have you/Has NAME} ever 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?	Item revised	Word "new" deleted to account for fact that the Ticket program is no longer new.
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?	Item revised	Revised to eliminate follow-up questions asking details about how information was obtained about the Ticket to Work program.
E28.	Who sent {you/NAME or his/her representative} the information?	Item revised	Revised to eliminate follow-up questions asking details about how information was obtained about the Ticket to Work program.
E29.	Did someone call {you/NAME or his/her representative}? (Ticket to Work)	Item deleted	Follow-up questions asking for detail about how obtained information about Ticket simplified by only asking how information was received and source of information.
E30.	Who called {you/NAME or his/her representative}? (Ticket to Work)	Item deleted	Follow-up questions asking for detail about how obtained information about Ticket simplified by only asking how information was received and source of information.
E31.	Did somebody talk to {you/NAME or his/her representative} about the program in person? (Ticket to Work)	Item deleted	Follow-up questions asking for detail about how obtained information about Ticket simplified by only asking how information was received and source of information.
E32.	Who talked to {you/NAME or his/her representative} about the program?	Item deleted	Follow-up questions asking for detail about how obtained information about Ticket simplified by only asking how information was received and source of information.
E33.	Did {you/NAME or his/her representative} learn about the program on a web site? (Ticket to Work)	Item deleted	Follow-up questions asking for detail about how obtained information about Ticket simplified by only asking how information was received and source of information.
E36b.	{Have you/Has NAME} ever received any services from a State Vocational Rehabilitation agency? In your state, this agency is known as {VRNAME}.	Item added	Questions about State Vocational Rehabilitation Agencies (SVRA)s added to address service utilization for beneficiaries whose Tickets are "in-use" with an SVRA under the new regulations.
E36c.	{Are you/Is NAME} aware that, according to Social Security, {you are/(he/she) is} signed up with the State Vocational Rehabilitation Agency {ENSAMPLE} and have been since {SDATE}?	Item added	Question added to prompt Ticket participants with tickets assigned to an SVRA who report that they have not received services.

Item		Change	Reason
E37a.	Now I am going to ask about {your/NAME's} Ticket use in 2005. When we interviewed you last year, you said {you were/NAME was} signed up with {EN}. {Are you/Is NAME} currently signed up with {EN}?	Item deleted	Question no longer relevant because no longitudinal component.
E37amth.	In what month and year did {you/NAME} stop receiving services from {EN}?	Item deleted	Question no longer relevant because no longitudinal component.
E37a1.	Why {are you/is NAME} no longer receiving services from {EN}?	Item deleted	Question no longer relevant because no longitudinal component.
E37b.	{Were you/Was NAME} signed up with any other Employment Networks or a State Vocational Rehabilitation Agency in 2009?	Item revised	Revised to ask about SVAs only. ENs asked about in E37.
E39.	What was the name of the Employment Network {you were/NAME was} signed up with in 2009?	Item revised	Added optional text to collect name of SVRA from participants who received services from a Vocational Rehabilitation Agency rather than an Employment Network in 2009.
Section F			
F2.	Thinking only about 2009, who did {you/NAME or his/her representative} contact to get information about the Ticket to Work program? Did you contact a Benefits Planning and Assistance Organization (BPAO)?	Item revised	Revised to address changes in program names and functions. Asking about Work Incentive and Planning Assistance Programs rather than benefit specialists/BPAOs.
F5.	How did {you/NAME} receive this information about Employment Networks?	Item revised	Revised to eliminate follow-up questions asking details about how information was obtained Employment Networks.
F6.	Who sent {you/NAME or his/her representative} the information about Employment Networks?	Item revised	Revised to eliminate follow-up questions asking details about how information was obtained about the Ticket to Work program.
F7.	Did someone call {you/NAME or his/her representative} to talk about Employment Networks?	Item deleted	Follow-up questions asking for detail about how obtained information about Employment Networks simplified by only asking how information was received and source of information.
F8.	Who called {you/NAME or his/her representative}?	Item deleted	Follow-up questions asking for detail about how obtained information about Employment Networks simplified by only asking how information was received and source of information.

Item		Change	Reason
F9.	Did someone talk to {you/NAME or his/her representative} about Employment Networks in person?	Item deleted	Follow-up questions asking for detail about how obtained information about Employment Networks simplified by only asking how information was received and source of information.
F10.	Who talked to {you/NAME or his/her representative} about Employment Networks?	Item deleted	Follow-up questions asking for detail about how obtained information about Employment Networks simplified by only asking how information was received and source of information.
F11.	Did {you/NAME or his/her representative} learn about Employment Networks on a web site?	Item deleted	Follow-up questions asking for detail about how obtained information about Employment Networks simplified by only asking how information was received and source of information.
F14.	Why didn't {you/NAME or his/her representative} try to use {your/NAME's} Ticket with the State VR agency in 2005?	Item deleted	Insufficient codeable responses in prior rounds to warrant collecting this level of detail.
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?	Item deleted	Insufficient codeable responses in prior rounds to warrant collecting this level of detail.
F31.	What are the main reasons {you did/NAME did} not try to participate in the Ticket to Work program in 2009?	Response added	Added response option "Decided to go to SVRA.
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.	Item added	Added two sub-questions: (e) "{You/NAME} can get services from your State Vocational Rehabilitation Agency without giving them your ticket" and (f) "{You/NAME} can use your Ticket to get follow-up services somewhere else after you finish getting services from the State Vocational Rehabilitation Agency." to account for changes in the Ticket to Work program.

Item		Change	Reason
		Section G	
G29b.	Earlier you said you {used a Ticket to sign up with an Employment Network}/{were signed up with a State Vocational Rehabilitation Center} in 2009, but you just reported that in 2009 you did not receive any employment services to help improve your ability to work or live independently. Is this correct?	Item added	Item added to address questions raised in analysis of data from prior rounds regarding why beneficiaries who reported using their tickets did not receive employment services in 2009.
G29c.	Did you not receive services in 2009 because…	Item added	Item added to address questions raised in analysis of data from prior rounds regarding why beneficiaries who reported using their tickets did not receive employment services in 2009.
G40.	1. Were the services provided to you by {PROVIDER} not useful because…	Item added	Added to help answer questions raised in prior analyses about why beneficiaries did not find services useful.
G43.	Did {you/NAME} receive any of these services from {PROVIDER} during the time {you/his/her} Ticket was assigned to any Employment Networks in 2005?/Did {you/NAME} receive any of these services from {PROVIDER} during the time {you/his/her} Ticket was assigned to {EN}?	Item deleted	Items not used in prior analyses.
G44.	Employment Networks often arrange services with other providers. In 2005, did any of {your/NAME's} Employment Networks arrange for any of the services {you/he/she} received from {PROVIDER}?/Employment Networks often arrange services with other providers. In 2005, did {EMPLOYMENT NETWORK IN 2005} arrange for any of the services {you/NAME} received from {PROVIDER}?	Item deleted	Items not used in prior analyses.
G45.	In 2005, who paid for the services {you/NAME} received from {PROVIDER}?	Item deleted	Items not used in prior analyses. Few respondents said they had to pay for anything and beneficiaries may have a hard time answering this accurately.
G46.	In 2005, did {you or your/NAME or (his/her)} family have to pay for any part of the cost of the services {you/he/she} received from {PROVIDER}?	Item deleted	Items not used in prior analyses. Few respondents said they had to pay for anything and beneficiaries may have a hard time answering this accurately.
G47.	About how much did {you or your/NAME or (his/her)} family have to pay in 2005? Your best estimate is fine.	Item deleted	Items not used in prior analyses. Few respondents said they had to pay for anything and beneficiaries may have a hard time answering this accurately.

Item		Change	Reason
G55.	Who pressured {you/NAME} to use these services?	Item revised	Revised to address changes in program names and functions. Asking about Work Incentive and Planning Assistance Programs rather than benefit specialists/BPAOs.
Section H			
H4.	How soon after receiving {your/his/her} Ticket did {you/NAME} try to use it? Was it within four weeks of receiving it or after four weeks?	Item deleted	Items not as relevant now that TTW is fully implemented.
H5.	Before {you/NAME} received {your/his/her} Ticket, did {you/he/she} put off <u>getting any employment services</u> because {you were/(he/she) was} waiting to use {your/his/her} Ticket to get employment services?	Item deleted	Items not as relevant now that TTW is fully implemented.
H6.	Before {you/NAME} received {your/his/her} Ticket, did {you/he/she} put off <u>working</u> because {you were/(he/she) was} waiting to use {your/his/her} Ticket to help {you/him/her} get a job?	Item deleted	Items not as relevant now that TTW is fully implemented.
H7.	Thinking about 2009, who did {you/NAME or his/her representative} contact to get information about the Ticket to Work program?	Item revised	Revised to address changes in program names and functions. Asking about Work Incentive and Planning Assistance Programs rather than benefit specialists/BPAOs.
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.	Item revised	Item H10c revised to ask "After the first year, you must work at certain levels to remain in the program." to address changes in the Ticket to Work program.
(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 alter years of your participation.		Also added two sub-questions: (e) "{You/NAME} cam get services from you State Vocational Rehabilitation Agency without giving them your Ticket" and (f) "{You/NAME} can use your Ticket to get follow-up services somewhere else after you finish getting services from the State Vocational Rehabilitation Agency."
H13.	How did {you/NAME} receive information about Employment Networks?	Item revised	Revised to eliminate follow-up questions asking details about how information was obtained Employment Networks.
H14.	Who sent {you/NAME or his/her representative} information about Employment Networks?	Item revised	Revised to address changes in program names and functions. Asking about Work Incentive and Planning Assistance Programs rather than benefit specialists/BPAOs.

Item		Change	Reason
H15.	Did somebody call {you/NAME or his/her representative} to talk about Employment Networks?	Item deleted	Follow-up questions asking for detail about how obtained information about Employment Networks simplified by only asking how information was received and source of information.
H16.	Who called {you/NAME or his/her representative}?	Item deleted	Follow-up questions asking for detail about how obtained information about Employment Networks simplified by only asking how information was received and source of information.
H17.	Did somebody talk to {you/NAME or his/her representative} about Employment Networks in person?	Item deleted	Follow-up questions asking for detail about how obtained information about Employment Networks simplified by only asking how information was received and source of information.
H18.	Who talked to {you/NAME or his/her representative} about Employment Networks?	Item deleted	Follow-up questions asking for detail about how obtained information about Employment Networks simplified by only asking how information was received and source of information.
H19.	Did {you/NAME or his/her representative} learn about Employment Networks on a web site?	Item deleted	Follow-up questions asking for detail about how obtained information about Employment Networks simplified by only asking how information was received and source of information.
H23.	Why didn't (you/NAME or his/her representative} try to use {your/NAME's}Ticket with the State VR agency in 2005?	Item deleted	Insufficient codeable responses in prior rounds to warrant collecting this level of detail.
H29.	Why didn't {you/NAME or his/her representative}try to use {your/NAME's}Ticket with (any of) the other Employment Network(s) {you/NAME or his/her representative} contacted in 2005?	Item deleted	Insufficient codeable responses in prior rounds to warrant collecting this level of detail.
H36a-h.	Now I'm going to focus on the services {you/NAME} received in 2005. For each of the following statements, please tell me if you strongly agree, agree, disagree, or strongly disagree.	Item revised	Series revised to refer to SVRA rather than EN if beneficiary reported receiving services from a SVRA in section E.
H40_1.	Why did the services received from {LONGEST EN IN 2009} not help you get or keep the job or jobs you had in 2009? Was it because…	Item added	Added to help answer questions raised in prior analyses about why beneficiaries did not find services useful.

Item		Change	Reason
H43_1.	Why did you think you have not been successful in reaching your work goals? Is it because…	Item added	Added to help answer questions raised in prior analyses about why beneficiaries did not find services useful.
H45_1.	Why are you not satisfied with the {Ticket to Work program}? Is it because…	Item added	Added to help answer questions raised in prior analyses about why beneficiaries did not find services useful.
H49.	Did {you/NAME} or anyone else do anything to try to solve the problem?	Item added	Insufficient data in prior rounds to warrant asking details about resolving problems.
H50.	What did {you/NAME} or someone else do to try to solve the problem?	Item deleted	Insufficient data in prior rounds to warrant asking details about resolving problems.
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?	Item deleted	Insufficient data in prior rounds to warrant asking details about resolving problems.
H52.	From whom did {you/NAME} get this information?	Item deleted	Insufficient data in prior rounds to warrant asking details about resolving problems.
H53.	Did {you/NAME} ever contact the local protection and advocacy agency in {your/NAME's} area, called {LOCALPAA} for help?	Item deleted	Initially envisioned questions would be used for EN dispute resolution, only a very few participants used them. PABSS questions were added to section H.
H54.	When {you/NAME or his/her representative} tried to get help from {LOCALPAA}, how easy was it to get in touch with someone? Was it…	Item deleted	Initially envisioned questions would be used for EN dispute resolution, only a very few participants used them. PABSS questions were added to section H.
H55.	How helpful was {LOCALPAA} in helping {you/NAME or his/her representative} solve the problem with the {State VR Agency/Employment Network/State VR Agency and the Employment Network}? Were they…	Item deleted	Insufficient data in prior rounds to warrant asking details about resolving problems.
H59.	Overall, how satisfied are you with the helpfulness of the {State VR Agency/Employment Network/State VR Agency and Employment Network} in trying to solve this problem? Are you…	Item deleted	Insufficient data in prior rounds to warrant asking details about resolving problems.
H60.	Why didn't {you/NAME or his/her representative} do anything to try to solve the problem?	Item deleted	Insufficient data in prior rounds to warrant asking details about resolving problems.

Item		Change	Reason
H61.	Did {you/NAME or his/her representative} ever receive any information about how to get help solving problems with the {State VR Agency/Employment Network/State VR Agency and Employment Network}?	Item deleted	Insufficient data in prior rounds to warrant asking details about resolving problems.
	Section L		
L25.	These next two questions are about the impact that Hurricanes Katrina and Rita have had {you/NAME}. In 2005, as a result of either Hurricane Katrina or Rita {were you/was NAME} forced to leave the place {you were/he was/she was} living for a period of 1 month or longer?	Item deleted	Items not as relevant for 2009.
L26.	In 2005, did you lose your job as a result of Hurricane Katrina or Hurricane Rita?	Item deleted	Items not as relevant for 2009.
	Section M		
M7.	Finally, in about one year the Social Security Administration may wish to contact {you/NAME} to follow up on {your/his/her} health and other circumstances. In case we have trouble reaching {you/him/her}, what is the name, address, and phone number of a close relative or friend who is not living with {you/NAME} and is likely to know {your/his/her} location in the future? For example, a mother, father, brother, sister, aunt, uncle, or close friend.	Item deleted	No need to collect since there will be no follow-up interview.
M8.	How is that person related to{you/NAME}, if at all?	Item deleted	No need to collect since there will be no follow-up interview.
M9.	Can you give me the name, address, and phone number of another person?	Item deleted	No need to collect since there will be no follow-up interview.
M10.	How is that person related to {you/NAME}, if at all?	Item deleted	No need to collect since there will be no follow-up interview.

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