

HRS 2018 — SECTION M1: DISABILITY
FINAL VERSION -- 06/05/2018

NOTE ABOUT BRANCHPOINTS:

WHERE THERE IS MORE THAN ONE JUMP WITHIN A BRANCHPOINT BOX, THE JUMPS ARE TO BE APPLIED IN ORDER FROM THE TOP.

NOTE: SECTION M IS A COMBINATION OF THE TWO HRS 2000 DISABILITY SECTIONS, GD (REINTERVIEW Rs) AND GJ (NEW INTERVIEW Rs); THEY WERE AMALGAMATED IN THE 2002 WAVE. MANY SEQUENCES ARE REPEATED IN THE TWO SECTIONS. USUALLY SUCH SEQUENCES DIFFER ONLY BY THE OMISSION OF ONE OR A FEW QUESTIONS. QUESTIONS IN SIMILAR SEQUENCES ARE USUALLY IDENTICAL OR HAVE ONLY MINOR DIFFERENCES IN WORDING.

THEREFORE, SEQUENCES THAT DEAL WITH A SIMILAR TOPIC ARE SET INTO A BLOCK WHERE MINOR CHANGES MAY HAVE BEEN MADE TO STANDARDIZE QUESTION TEXT, INTERVIEWER INSTRUCTIONS OR CODEFRAMES. THESE BLOCKS ARE THEN PULLED FOR THE APPROPRIATE SEQUENCE AND ONLY THE APPROPRIATE QUESTIONS FOR THAT TYPE OF DISABILITY ARE INCLUDED.

NOTE ABOUT COLORS:

ALL TEXT IN TEAL IS SPECIFIC TO A WEB INTERVIEW.

THE CORE INTERVIEW IS DOCUMENTED USING BLACK TEXT, BUT BLACK TEXT CAN ALSO APPLY TO THE WEB INTERVIEW WHEN THERE ARE NO DIFFERENCES FROM THE CORE.

NOTE ABOUT NON-RESPONSE FLOW:

ANY QUESTION THAT IS ASKED BUT LEFT WITHOUT A RESPONSE IN CAWI INTERVIEWS WILL FOLLOW THE SAME PATH AS A REFUSAL FOR THAT QUESTION, UNLESS OTHERWISE SPECIFIED.

MAJOR FLOW CONTROL, CONDITION AND FILL VARIABLES

**THIS IS A REINTERVIEW R (Z076=1);
THIS IS A NEW INTERVIEW R (Z076 NOT 1)**

**THIS IS A PROXY INTERVIEW (A009={2 or 3}) or (A009 NOT 1);
THIS IS A SELF INTERVIEW (A009=1)**

**R IS MARRIED (X065=1);
R IS PARTNERED (X065=3);
R IS SINGLE (X065=6 or (X065 {NOT 1 and NOT 3}))**

R HAS NEVER BEEN MARRIED (B061=6)

R's LAST IW MONTH (per Z092), YEAR (per Z093)

R's AGE (per A019)

**R IS WORKING FOR PAY (J020=1);
R IS NOT CURRENTLY WORKING (J020=5 or {J020 NOT 1})**

R WAS WORKING FOR PAY AT R's LAST IW (Z123=1)

**R IS WORKING FOR SOMEONE ELSE (J021=1);
R IS SELF-EMPLOYED (J021=2);
R WAS SELF-EMPLOYED AT LAST JOB (K007=2)**

R NEVER WORKED FOR PAY FOR MORE THAN A FEW MONTHS (K003=5)

**R HAS NOT WORKED SINCE {1998 OR EARLIER} (K006 <1999);
R LAST WORKED MORE THAN A YEAR AGO (K005 >1)**

**R'S CURRENT EMPLOYER [(JW158_1)/(JW158_2)];
R'S LAST-INTERVIEW EMPLOYER (A508) *A508= Job Status is PW JOB (Z503=1) and Employer
Name for that job is not empty (Z141 NOT Empty);
R's LAST EMPLOYER (KW158_3);
R's MOST RECENT EMPLOYER (LW158_4)**

R REPORTED IN A PREVIOUS IW HAVING HEALTH CONDITION THAT LIMITS WORK (Z219=1)

R REPORTED AT R's LAST IW IS DISABLED (Z122=1)

**R RECEIVING BENEFITS AT R's LAST IW ({Z118 or Z099 or Z100 or Z119}=1);
BENEFITS WERE STILL BEING CONSIDERED AT R's LAST IW ({Z118 or Z099 or Z100 or
Z119}=3);
R NOT RECEIVING BENEFITS AT R's LAST IW ({Z118 or Z099 or Z100 or Z119}=5)**

☐

BENEFITS: SSI: Z118
SSI: Z099
VETERANS: Z100
WORKERS' COMPENSATION: Z119

*** A variable fieldname and code reference is shown at its first occurrence in the questionnaire, but in some cases, especially when it is common, is not shown after that.**

M002 BRANCHPOINT: IF THIS IS AN EXIT IW, GO TO SECTION N
IF THIS IS A NEW INTERVIEW R (Z076 NOT 1), GO TO M502 BRANCHPOINT

M002

IF R IS OVER 65 (A019 > 65) and REPORTS THEY ARE COMPLETELY RETIRED (J578=1):
You said you are not working anymore, but we would like to ask how your health might affect paid work activities you could do.

Do you have any impairment or health problem that limits the kind or amount of paid work you could do?

ELSE:

Now I want to ask how your health affects paid work activities.

Do you have any impairment or health problem that limits the kind or amount of paid work you can do?

- 1. YES
- 5. NO.....GO TO M006
- 6. [VOL] TOO OLD TO WORK.....GO TO M006
- 8. DK.....GO TO M006
- 9. RF.....GO TO M006

- 1. YES
- 5. NO.....GO TO M006
- 8. DK.....GO TO M006
- 9. RF.....GO TO M006

M003 BRANCHPOINT: IF R IS AT LEAST 70 YEARS OF AGE (A019 >= 70), GO TO M008 BRANCHPOINT

M003

What health condition causes this impairment or problem?

[INSTR: IF MORE THAN ONE CONDITION, ASK:]

What condition is the main cause of this impairment or problem?

[INSTR: RECORD ALL CONDITIONS AND PLACE AN 'M': BEFORE MAIN CAUSE.]

What health condition causes this impairment or problem?

[INSTR: PLEASE RECORD ALL CONDITIONS AND PLACE AN 'M': BEFORE THE MAIN CAUSE.]

CAUSE_____

DK

RF

M004

Is this a temporary condition that will last for less than three months?

1. YES, TEMPORARY

5. NO, NOT TEMPORARY.....GO TO M008 BRANCHPOINT

8. DK.....GO TO M008 BRANCHPOINT

9. RF.....GO TO M008 BRANCHPOINT

M005

Have you had this condition before?

1. YES

5. NO

8. DK

9. RF

M006 BRANCHPOINT: GO TO M008 BRANCHPOINT

M006

Does any impairment or health problem limit the kind or amount of work you can do around the house?

1. YES.....GO TO M008 BRANCHPOINT

5. NO

6. [VOL] TOO OLD TO WORK.....GO TO M008 BRANCHPOINT

8. DK

9. RF

- 1. YES.....GO TO M008 BRANCHPOINT
- 5. NO
- 8. DK
- 9. RF

M007

Are you limited in any way in activities because of an impairment or problem?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

M008 BRANCHPOINT: IF R DID NOT REPORT AT R's LAST IW THAT WAS DISABLED (Z122 NOT 1) and R DOES NOT REPORT ANY IMPAIRMENT NOW (M002 NOT 1), GO TO M051 BRANCHPOINT

IF R DOES NOT REPORT ANY IMPAIRMENT NOW (M002 NOT 1), GO TO M030 BRANCHPOINT

IF R WAS DISABLED AT LAST IW (Z122=1) and R IS DISABLED NOW (M002=1) and DOES NOT REPORT THAT IMPAIRMENT IS TEMPORARY (M004 NOT 1), GO TO M030 BRANCHPOINT

IF R IS CURRENTLY EMPLOYED (J020=1), GO TO M011 BRANCHPOINT

M008

IF R HAS IMPAIRMENT THAT LIMITS WORK ACTIVITY (M002=1):
Does this limitation keep you from working altogether?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

M011 BRANCHPOINT: IF R IS AT LEAST 70 YEARS OF AGE (A019 >= 70), GO TO M030 BRANCHPOINT

IF R DID NOT REPORT THAT LIMITATION DID NOT KEEP HIM/HER FROM WORKING ALTOGETHER (M008 NOT 5), GO TO M014

M011

Are you able to work full-time or can you work only part-time?

- 1. FULL TIME
- 2. PART TIME
- 8. DK
- 9. RF

M013

Are you now able to do the same kind of work you did before your health limitation began?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

M014 BRANCHPOINT: ASK IF THIS IS A SELF OR EXIT INTERVIEW.
ELSE, IF THIS IS A PROXY INTERVIEW FOR A LIVING PERSON GO TO M018 BP

M014

In what year did the impairment or health problem begin to interfere with your work?

[INSTR: ENTER 9995 IF R'S IMPAIRMENT DOESN'T INTERFERE WITH WORK.]

In what year did the impairment or health problem begin to interfere with your work?

YEAR _____

9995 DOESN'T INTERFERE WITH WORK.....GO TO M018 BRANCHPOINT
DK.....GO TO M018 BRANCHPOINT
RF.....GO TO M018 BRANCHPOINT

M015 BRANCHPOINT: IF R GAVE A YEAR AT M014 THAT WAS MORE THAN TWO YEARS AGO,
GO TO M018 BRANCHPOINT

M015

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

M018 BRANCHPOINT: IF THIS IS A PROXY INTERVIEW (A009={2 or 3}), GO TO M020

IF THIS IS A TEMPORARY CONDITION LASTING LESS THAN 3 MONTHS (M004=1), GO TO M020

IF R REPORTED IN A PREVIOUS IW HAVING HEALTH CONDITION THAT LIMITS WORK (Z219=1), GO TO M020

IF IMPAIRMENT DOES NOT INTERFERE WITH WORK (M014=9995), GO TO M020

M018

Do you expect this condition to improve enough within the next few years so that it will no longer be a problem for your working?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

M020

Was the impairment or health problem you just mentioned the result of an accident or injury?

- 1. YES
- 5. NO.....GO TO M023
- 8. DK.....GO TO M023
- 9. RF.....GO TO M023

M021

Did the accident or injury occur at work, at home, or somewhere else?

- 1. WORK
- 2. HOME
- 3. SOMEWHERE ELSE
- 8. DK
- 9. RF

M023

Was this impairment or health problem in any way caused by the nature of your work?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

M024 BRANCHPOINT: IF R WAS DISABLED AT R's LAST IW (Z122=1), GO TO M029 BRANCHPOINT

IF HEALTH LIMIT BEGAN AT WORK (M021=1), ASSIGN 1 TO M024, AND GO TO M026

M024

Were you employed at the time your health began to limit your ability to work?

- 1. YES
- 5. NO.....GO TO M029 BRANCHPOINT
- 8. DK.....GO TO M029 BRANCHPOINT
- 9. RF.....GO TO M029 BRANCHPOINT

M026

Which company or organization did you work for at that time?

- 1. R'S LAST-IW EMPLOYER (A508)
- 2. R'S CURRENT EMPLOYER [(JW158_1)/(JW158_2)]
- 6. SELF-EMPLOYMENT -- NOT ON LIST
- 7. OTHER (SPECIFY)
- 8. DK
- 9. RF

M027 BRANCHPOINT: IF M026 IS NOT "OTHER (SPECIFY)" (M026 NOT 7), GO TO W200_1 BRANCHPOINT

M027

What was the name of that company or organization?

NAME OF COMPANY _____

W200_1 BRANCHPOINT: IF R's EMPLOYER WHEN HEALTH LIMIT BEGAN WAS NOT "OTHER" (M026 NOT 7), GO TO M028 BRANCHPOINT

****BEGINNING OF (W200_1) OTHER EMPLOYER BLOCK-1: EMPLOYER WHEN IMPAIRMENT BEGAN (W200_1 – W210_1). THIS BLOCK OF QUESTIONS IS ALSO USED IN LOCATIONS IN M2.****

W200_1

Before your health began to limit your ability to work, were you working for someone else, were you self-employed, or what?

[INSTR: IF R SAYS "I RAN MY OWN BUSINESS" SELECT SELF-EMPLOYED.]

Before your health began to limit your ability to work, were you working for someone else, were you self-employed, or what?

[INSTR: IF YOU RAN YOUR OWN BUSINESS SELECT SELF-EMPLOYED.]

- 1. SOMEONE ELSE
- 2. SELF-EMPLOYED
- 8. DK
- 9. RF

W202_1

[BANNER: Employer When Impairment Began]

What kind of business or industry did you work in ? that is, what did they make or do at the place where you worked?

BUSINESS_____

- DK
- RF

W201_1

[BANNER: Employer When Impairment Began]

What sort of work did you do on that job?

[INSTR: PROBE: Tell me a little more about what you did.]

[BANNER: Employer When Impairment Began]

What sort of work did you do on that job? (Please tell us a little more about what you did.)

TYPE OF WORK_____

- DK
- RF

W203_1

[BANNER: Employer When Impairment Began]

About how many employees work for that company or organization at all locations?

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Employer When Impairment Began]

About how many employees work for that company or organization at all locations?

NUMBER _____ GO TO W205_1

DK

RF

W204_1

[BANNER: Employer When Impairment Began]

Is it fewer than 5, 5 to 14, 15 to 24, 25 to 99, 100 to 499, or 500 or more?

1. FEWER THAN 5

2. 5 TO 14

3. 15 TO 24

4. 25 TO 99

5. 100 TO 499

6. 500 OR MORE

8. DK

9. RF

W205_1

[BANNER: Employer When Impairment Began]

What were you earning, before deductions, when you [left that employer/stopped working for that business]?

[INSTR: IF AMOUNT PER HOUR, ENTER BOTH DOLLARS AND CENTS, OTHERWISE ENTER '0' CENTS.]

[BANNER: Employer When Impairment Began]

What were you earning, before deductions, when you [left that employer/stopped working for that business]?

[INSTR: IF AMOUNT PER HOUR, ENTER BOTH DOLLARS AND CENTS.]

\$ _____

DK.....GO TO W208_1

RF.....GO TO W208_1

W206_1

[INSTR: PROBE IF NECESSARY:Was that per hour, week, month, or year?]

Note: instr only shows for DEP

PER:

1. HOUR
2. WEEK
3. EVERY TWO WEEKS/BI-WEEKLY
4. MONTH
6. YEAR
7. OTHER (SPECIFY) W207_1S_____
8. DK
9. RF

W208_1

[BANNER: Employer When Impairment Began]

How many hours a week did you usually work for that [employer/business]?

HOURS _____

DK
RF

W209_1

[BANNER: Employer When Impairment Began]

[INSTR: READ SLOWLY:]

Counting paid vacations as weeks of work, how many weeks per year did you usually work for this [employer/business]?

[INSTR: COUNT PAID SICK TIME AS WORK TIME.]

1-52 WEEKS

[BANNER: Employer When Impairment Began]

Counting paid vacations as weeks of work, how many weeks per year did you usually work for this [employer/business]?

[INSTR: COUNT PAID SICK TIME AS WORK TIME.]

[INSTR: PLEASE ENTER A NUMBER BETWEEN 1-52 WEEKS.]

WEEKS _____

DK
RF

W210_1

[BANNER: Employer When Impairment Began]

Were you covered by a union or employee-association contract?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

END OF OTHER EMPLOYER BLOCK-1: EMPLOYER WHEN IMPAIRMENT BEGAN (W200_1 –W210_1)

M028 BRANCHPOINT: IF R {WAS SELF-EMPLOYED or DID NOT GIVE NAME OF {COMPANY OR ORGANIZATION}} (M026={6 or DK or RF}), GO TO M029 BRANCHPOINT

M028

At the time your health started to limit your ability to work, did your employer do anything special to help you out so that you could stay at work?

- 1. YES
- 4. NO HELP NEEDED.....GO TO M029 BRANCHPOINT
- 5. NO.....GO TO M029 BRANCHPOINT
- 6. LEFT IMMEDIATELY.....GO TO M029 BRANCHPOINT
- 7. R WAS SELF-EMPLOYED.....GO TO M029 BRANCHPOINT
- 8. DK.....GO TO M029 BRANCHPOINT
- 9. RF.....GO TO M029 BRANCHPOINT

- 1. YES
- 4. NO HELP NEEDED.....GO TO M029 BRANCHPOINT
- 5. NO.....GO TO M029 BRANCHPOINT
- 6. LEFT IMMEDIATELY.....GO TO M029 BRANCHPOINT
- 7. I WAS SELF-EMPLOYED.....GO TO M029 BRANCHPOINT
- 8. DK.....GO TO M029 BRANCHPOINT
- 9. RF.....GO TO M029 BRANCHPOINT

BEGINNING OF (W211_1) EMPLOYER ACCOMMODATIONS BLOCK-1: EMPLOYER WHEN IMPAIRMENT BEGAN (W211_1 –W231_1)

W211_1

[BANNER: Employer When Impairment Began: Accommodations]

Did your employer get someone to help you?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W214_1

[BANNER: Employer When Impairment Began: Accommodations]

Did your employer shorten your work days?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W217_1

[BANNER: Employer When Impairment Began: Accommodations]

Did your employer allow you to change the time you came to and left work?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W220_1

[BANNER: Employer When Impairment Began: Accommodations]

(Did your employer) allow you more breaks and rest periods?

[BANNER: Employer When Impairment Began: Accommodations]

Did your employer allow you more breaks and rest periods?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W223_1

[BANNER: Employer When Impairment Began: Accommodations]

(Did your employer) arrange for special transportation?

[BANNER: Employer When Impairment Began: Accommodations]

Did your employer arrange for special transportation?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W226_1

[BANNER: Employer When Impairment Began: Accommodations]

(Did your employer) change(d) the job to something you could do?

[BANNER: Employer When Impairment Began: Accommodations]

Did your employer change(d) the job to something you could do?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W227_1

[BANNER: Employer When Impairment Began: Accommodations]

(Did your employer) help(ed) you learn new job skills?

[BANNER: Employer When Impairment Began: Accommodations]

Did your employer help(ed) you learn new job skills?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W228_1

[BANNER: Employer When Impairment Began: Accommodations]

(Did your employer) get you special equipment for the job?

[BANNER: Employer When Impairment Began: Accommodations]

Did your employer get you special equipment for the job?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W229_1

[BANNER: Employer When Impairment Began: Accommodations]

(Did your employer) assist you in receiving rehabilitative services from an external provider?

[BANNER: Employer When Impairment Began: Accommodations]

Did your employer assist you in receiving rehabilitative services from an external provider?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W230_1

[BANNER: Employer When Impairment Began: Accommodations]

Did your employer do any other things to help you out?

- 1. YES
- 5. NO.....GO TO M029 BRANCHPOINT
- 8. DK.....GO TO M029 BRANCHPOINT
- 9. RF.....GO TO M029 BRANCHPOINT

W231_1

What other things?

DK
RF

*END OF EMPLOYER ACCOMMODATIONS BLOCK-1: EMPLOYER WHEN IMPAIRMENT BEGAN
(W211_1 - W231_1)*

M029 BRANCHPOINT: IF R DID NOT REPORT THAT IS WORKING NOW (J020 NOT 1) or R IS SELF-EMPLOYED (J021=2), GO TO M030 BRANCHPOINT

M029

Does your employer currently do anything special to make it easier for you to stay at work?

- 1. YES
- 4. NO HELP NEEDED.....GO TO M030 BRANCHPOINT
- 5. NO.....GO TO M030 BRANCHPOINT
- 8. DK.....GO TO M030 BRANCHPOINT
- 9. RF.....GO TO M030 BRANCHPOINT

*BEGINNING OF (W211_2) EMPLOYER ACCOMMODATIONS BLOCK-2: CURRENT EMPLOYER
(W211_2 – W231_2)*

W211_2

[BANNER: Current Employer: Accommodations]

Does your employer get someone to help you?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W214_2

[BANNER: Current Employer: Accommodations]

Does your employer shorten your work days?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W217_2

[BANNER: Current Employer: Accommodations]

Does your employer allow you to change the time you come to and leave work?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W220_2

[BANNER: Current Employer: Accommodations]

(Does your employer) allow you more breaks and rest periods?

[BANNER: Current Employer: Accommodations]

Does your employer allow you more breaks and rest periods?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W223_2

[BANNER: Current Employer: Accommodations]

(Does your employer) arrange for special transportation?

[BANNER: Current Employer: Accommodations]

Does your employer arrange for special transportation?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W226_2

[BANNER: Current Employer: Accommodations]

(Has your employer) change(d) the job to something you can do?

[BANNER: Current Employer: Accommodations]

Has your employer changed the job to something you can do?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W227_2

[BANNER: Current Employer: Accommodations]

(Has your employer) help(ed) you learn new job skills?

[BANNER: Current Employer: Accommodations]

Has your employer helped you learn new job skills?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W228_2

[BANNER: Current Employer: Accommodations]

(Does your employer) get you special equipment for the job?

[BANNER: Current Employer: Accommodations]

Does your employer get you special equipment for the job?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W229_2

[BANNER: Current Employer: Accommodations]

(Does your employer) assist you in receiving rehabilitative services from an external provider?

[BANNER: Current Employer: Accommodations]

Does your employer assist you in receiving rehabilitative services from an external provider?

- 1. YES
- 5. NO
- 8. DK
- 9. RF

W230_2

[BANNER: Current Employer: Accommodations]

Does your employer do any other things to help you out?

- 1. YES
- 5. NO.....GO TO M030 BRANCHPOINT
- 8. DK.....GO TO M030 BRANCHPOINT
- 9. RF.....GO TO M030 BRANCHPOINT

W231_2

What other things?

DK
RF

END OF EMPLOYER ACCOMMODATIONS BLOCK-2: CURRENT EMPLOYER (W211_2 – W231_2)

M030 BRANCHPOINT: IF R {DID NOT REPORT AT R's LAST IW THAT S/HE WAS RECEIVING ANY OF THE FOLLOWING BENEFITS and DID NOT SAY THAT ANY OF THESE BENEFITS WERE PENDING}: {SSDI and SSI and VETERANS and WORKERS' COMPENSATION}({Z118 and Z099 and Z100 and Z119} {NOT 1 and NOT 3}), GO TO W238_9 BRANCHPOINT

IF {SSDI or SSI} BENEFITS WERE PENDING AT R's LAST IW ({Z118 or Z099}=3) and R DID NOT SAY THAT WAS RECEIVING {SSDI or SSI} BENEFITS ({Z118 and Z099} NOT 1), GO TO M031

IF R DID NOT REPORT AT R's LAST IW THAT WAS RECEIVING {SSDI or SSI} BENEFITS ({Z118 and Z099} NOT 1), GO TO W238_7 BRANCHPOINT

M030

According to our records, in R's LAST IW MONTH (per Z092), YEAR (per Z093) you were receiving benefits from the Social Security Disability program or the Supplemental Security Income program.

Which program was this: the Social Security Disability or the Supplemental Security Income program, or both?

1. SOCIAL SECURITY DISABILITY INSURANCE (SSDI)
2. SUPPLEMENTAL SECURITY INCOME (SSI).....GO TO W238_2 BRANCHPOINT
3. BOTH
6. [VOL] SSDI HAS CONVERTED TO SOCIAL SECURITY
7. DENIES RECEIVING BENEFITS.....GO TO M031 BRANCHPOINT
8. DK.....GO TO M031 BRANCHPOINT
9. RF.....GO TO M031 BRANCHPOINT

1. SOCIAL SECURITY DISABILITY INSURANCE (SSDI)
2. SUPPLEMENTAL SECURITY INCOME (SSI).....GO TO W238_2 BRANCHPOINT
3. BOTH
6. SSDI HAS NOW BEEN CONVERTED TO SOCIAL SECURITY
7. I DID NOT RECEIVE BENEFITS.....GO TO M031 BRANCHPOINT
8. DK.....GO TO M031 BRANCHPOINT
9. RF.....GO TO M031 BRANCHPOINT

BEGINNING OF (W238_1) APPLICATION ACCEPTED BLOCK-1: RECEIVING SSDI (W238_1 - W244_1)

W238_1

[BANNER: SSDI - RECEIVING: APPLICATION accepted]

Are you still receiving benefits from [Social Security Disability/ Social Security]?

[INSTR: IF R MENTIONS THAT SSDI HAS NOW BEEN CONVERTED TO SOCIAL SECURITY, BACK UP TO M030 AND CHANGE ANSWER TO CODE 6.]

Are you still receiving benefits from [Social Security Disability/ Social Security]?

Note: For both CAPI and CAWI - If R answers 1 or 3 at M030 then fill = [Social Security Disability]. If R answers 6, then fill is [Social Security Disability/Social Security].

1. YES.....GO TO W239_1
5. NO
8. DK.....GO TO W238_2 BRANCHPOINT
9. RF.....GO TO W238_2 BRANCHPOINT

W256_1

[BANNER: SSDI - RECEIVING: APPLICATION accepted]

Why are you no longer receiving those benefits?

Did your household resources increase, did you return to work, are you not working but able to work, or what?

[INSTR: IF R MENTIONS THAT SSDI HAS NOW BEEN CONVERTED TO SOCIAL SECURITY, BACK UP TO M030 AND CHANGE ANSWER TO CODE 6.]

[BANNER: Social Security Disability Insurance/ Social Security]

Why are you no longer receiving those benefits?

- 1. HOUSEHOLD RESOURCES INCREASED
- 2. RETURNED TO WORK
- 3. NOT WORKING BUT ABLE
- 4. [VOL] SSA DETERMINED NO LONGER ELIGIBLE FOR BENEFITS
- 7. OTHER (SPECIFY) W257_1_____
- 8. DK
- 9. RF

- 1. HOUSEHOLD RESOURCES INCREASED
- 2. RETURNED TO WORK
- 3. NOT WORKING BUT ABLE
- 4. SSA DETERMINED I AM NO LONGER ELIGIBLE FOR BENEFITS
- 7. OTHER (SPECIFY) W257_1_____
- 8. DK
- 9. RF

W239_1

[BANNER: SSDI - RECEIVING: APPLICATION accepted]

IF R IS STILL RECEIVING SSDI BENEFITS (W238_1=1):

How much did you receive (from the [Social Security Disability/Social Security] program last month?

OTHERWISE:

How much did you receive from the [Social Security Disability/Social Security] program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Social Security Disability Insurance/ Social Security]

IF R IS STILL RECEIVING SSDI BENEFITS (W238_1=1):

How much did you receive from the [Social Security Disability/Social Security] program last month?

OTHERWISE:

How much did you receive from the [Social Security Disability/Social Security] program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_1 BRANCHPOINT

DK

RF

W240_1 -

W242_1

Question text: (Thinking about the amount you received from the [Social Security Disability/Social Security] program last month:)

Did it amount to a total of less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$400, \$650, \$900, \$1,100

ENTRY POINT: \$650

Question text: Thinking about the amount you received from the [Social Security Disability/Social Security] program last month:

Did it amount to a total of less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$400, \$650, \$900, \$1,100

ENTRY POINT: \$650

W244_1 BRANCHPOINT: IF R IS STILL RECEIVING SSDI BENEFITS (W238_1=1), GO TO W238_2 BRANCHPOINT

W244_1

[BANNER: SSDI - RECEIVING: APPLICATION accepted]

In what year did the benefits stop?

[BANNER: Social Security Disability Insurance/ Social Security]

In what year did the benefits stop?

YEAR _____

DK.....GO TO W238_2 BRANCHPOINT

RF.....GO TO W238_2 BRANCHPOINT

W243_1 BRANCHPOINT: IF YEAR AT W244_1 WAS MORE THAN 2 YEARS AGO, GO TO W238_2 BRANCHPOINT

W243_1

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF APPLICATION ACCEPTED BLOCK-1: RECEIVING SSDI (W238_1 – W243_1)

W238_2 BRANCHPOINT: IF R IS/WAS RECEIVING ONLY SSDI BENEFITS
(M030={1 or 6}), GO TO M031 BRANCHPOINT

*BEGINNING OF (W238_2) APPLICATION ACCEPTED BLOCK-2: RECEIVING SSI
(W238_2 –W244_2)*

W238_2

[BANNER: SSI - RECEIVING: APPLICATION accepted]

Are you still receiving benefits from Supplemental Security Income?

[Are you still receiving benefits from Supplemental Security Income?](#)

1. YES.....GO TO W239_2
5. NO
8. DK.....GO TO M031 BRANCHPOINT
9. RF.....GO TO M031 BRANCHPOINT

W256_2

[BANNER: SSI - RECEIVING: APPLICATION accepted]

Why are you no longer receiving those benefits?

Did your household resources increase, did you return to work, are you not working but able to work, or what?

[\[BANNER: Supplemental Security Income\]](#)

[Why are you no longer receiving those benefits?](#)

1. HOUSEHOLD RESOURCES INCREASED
2. RETURNED TO WORK
3. NOT WORKING BUT ABLE
4. [VOL] SSA DETERMINED NO LONGER ELIGIBLE FOR BENEFITS
7. OTHER (SPECIFY) W257_2_____
8. DK

W257_2S

9. RF

1. HOUSEHOLD RESOURCES INCREASED
2. RETURNED TO WORK
3. NOT WORKING BUT ABLE
4. SSA DETERMINED I AM NO LONGER ELIGIBLE FOR BENEFITS
7. OTHER (SPECIFY) [W257_2]_____
8. DK
9. RF

W239_2

[BANNER: SSI - RECEIVING: APPLICATION accepted]

IF R IS STILL RECEIVING SSI BENEFITS (W238_2=1):

How much did you receive from the Supplemental Security Income program last month?

OTHERWISE:

How much did you receive from the Supplemental Security Income program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Supplemental Security Income]

IF R IS STILL RECEIVING SSI BENEFITS (W238_2=1):

How much did you receive from the Supplemental Security Income program last month?

OTHERWISE:

How much did you receive from the Supplemental Security Income program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN]

\$ _____ .00 GO TO W244_2 BRANCHPOINT

DK

RF

W240_2 -

W242_2

Question text: (Thinking about the amount you received from the Supplemental Security Income program last month:)

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 2Up1Down
BREAKPOINTS: \$150, \$400, \$500, \$600
ENTRY POINT: \$400

Question text: Thinking about the amount you received from the Supplemental Security Income program last month:

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 2Up1Down
BREAKPOINTS: \$150, \$400, \$500, \$600
ENTRY POINT: \$400

W244_2 BRANCHPOINT: IF R IS STILL RECEIVING SSI BENEFITS (W238_2=1), GO TO M031 BRANCHPOINT

W244_2

[BANNER: SSI - RECEIVING: APPLICATION accepted]

In what year did the benefits stop?

[BANNER: Supplemental Security Income]

In what year did the benefits stop?

YEAR_____

DK.....GO TO M031 BRANCHPOINT

RF.....GO TO M031 BRANCHPOINT

W243_2 BRANCHPOINT: IF YEAR AT W244_2 WAS MORE THAN 2 YEARS AGO, GO TO M031 BRANCHPOINT

W243_2

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

*END OF APPLICATION ACCEPTED BLOCK-2: RECEIVING SSI
(W238_2 – W243_2)*

M031 BRANCHPOINT: IF R DID NOT REPORT AT R's LAST IW THAT APPLICATION FOR {SSDI OR SSI} BENEFITS WAS PENDING ({Z118 and Z099} NOT 3), GO TO W238_7 BRANCHPOINT

M031

According to our records, in R's LAST IW MONTH, YEAR you had applied for benefits from the Social Security Disability program or the Supplemental Security Income program.

Which program was this: the Social Security Disability or the Supplemental Security Income program, or both?

1. SOCIAL SECURITY DISABILITY INSURANCE (SSDI)
2. SUPPLEMENTAL SECURITY INCOME (SSI).....GO TO M033 BRANCHPOINT
3. BOTH
7. DENIES APPLIED FOR BENEFITS.....GO TO W238_7 BRANCHPOINT
8. DK.....GO TO W238_7 BRANCHPOINT
9. RF.....GO TO W238_7 BRANCHPOINT
1. SOCIAL SECURITY DISABILITY INSURANCE (SSDI)
2. SUPPLEMENTAL SECURITY INCOME (SSI).....GO TO M033 BRANCHPOINT
3. BOTH
7. I DID NOT APPLY FOR BENEFITS.....GO TO W238_7 BRANCHPOINT
8. DK.....GO TO W238_7 BRANCHPOINT
9. RF.....GO TO W238_7 BRANCHPOINT

M032

Was your SSDI application approved?

- 1. YES
- 3. STILL HAVEN'T HEARD.....GO TO M033 BRANCHPOINT
- 5. NO.....GO TO W245_1
- 8. DK.....GO TO M033 BRANCHPOINT
- 9. RF.....GO TO M033 BRANCHPOINT

BEGINNING OF (W234_3) APPLICATION ACCEPTED BLOCK-3: SSDI PENDING (W234_3 – W244_3)

W234_3

[BANNER: SSDI - PENDING FROM LAST WAVE: APPLICATION accepted]

In what year did you start receiving Social Security Disability benefits?

[INSTR: ENTER '9997' IF NOT YET RECEIVING BENEFITS.]

[In what year did you start receiving Social Security Disability benefits?](#)

YEAR _____

9997 NOT YET RECEIVING BENEFITS.....GO TO M033 BRANCHPOINT

DK.....GO TO W235_3

RF.....GO TO W235_3

W233_3 BRANCHPOINT: IF YEAR AT W234_3 WAS MORE THAN 2 YEARS AGO, GO TO W235_3

W233_3

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W235_3

[BANNER: SSDI - PENDING FROM LAST WAVE: APPLICATION accepted]

Were you offered rehabilitative services?

[BANNER: Social Security Disability Insurance]

Were you offered rehabilitative services?

- 1. YES
- 5. NO.....GO TO W238_3
- 8. DK.....GO TO W238_3
- 9. RF.....GO TO W238_3

W237_3

[BANNER: SSDI - PENDING FROM LAST WAVE: APPLICATION accepted]

In what year were you offered rehabilitative services?

[BANNER: Social Security Disability Insurance]

In what year were you offered rehabilitative services?

YEAR _____

- DK.....GO TO W238_3
- RF.....GO TO W238_3

W236_3 BRANCHPOINT: IF YEAR AT W237_3 WAS MORE THAN 2 YEARS AGO, GO TO W238_3

W236_3

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W238_3

[BANNER: SSDI - PENDING FROM LAST WAVE: APPLICATION accepted]

Are you still receiving benefits from Social Security Disability?

[BANNER: Social Security Disability Insurance]

Are you still receiving benefits from Social Security Disability?

- 1. YES.....GO TO W239_3
- 5. NO
- 8. DK.....GO TO M033 BRANCHPOINT
- 9. RF.....GO TO M033 BRANCHPOINT

W256_3

[BANNER: SSDI - PENDING FROM LAST WAVE: APPLICATION accepted]

Why are you no longer receiving those benefits?

Did your household resources increase, did you return to work, are you not working but able to work, or what?

[BANNER: Social Security Disability Insurance]

Why are you no longer receiving those benefits?

- 1. HOUSEHOLD RESOURCES INCREASED
 - 2. RETURNED TO WORK
 - 3. NOT WORKING BUT ABLE
 - 4. [VOL] SSA DETERMINED NO LONGER ELIGIBLE FOR BENEFITS
 - 7. OTHER (SPECIFY) W257_3_____
 - 8. DK
 - 9. RF
- 1. HOUSEHOLD RESOURCES INCREASED
 - 2. RETURNED TO WORK
 - 3. NOT WORKING BUT ABLE
 - 4. SSA DETERMINED I AM NO LONGER ELIGIBLE FOR BENEFITS
 - 7. OTHER (SPECIFY) W257_3_____
 - 8. DK
 - 9. RF

W239_3

[BANNER: SSDI - PENDING FROM LAST WAVE: APPLICATION accepted]

IF R IS STILL RECEIVING SSDI BENEFITS (W238_3=1):

How much did you receive from the Social Security Disability program last month?

OTHERWISE:

How much did you receive from the Social Security Disability program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Social Security Disability Insurance]

IF R IS STILL RECEIVING SSDI BENEFITS (W238_3=1):

How much did you receive from the Social Security Disability program last month?

OTHERWISE:

How much did you receive from the Social Security Disability program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_3 BRANCHPOINT

DK

RF

W240_3 -

W242_3

Question text: (Thinking about the amount you received from the Social Security Disability program last month:)

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$400, \$650, \$900, \$1,100

ENTRY POINT: \$650

Question text: Thinking about the amount you received from the Social Security Disability program last month:

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$400, \$650, \$900, \$1,100

ENTRY POINT: \$650

W244_3 BRANCHPOINT: IF R IS STILL RECEIVING SSDI BENEFITS (W238_3=1), GO TO M033 BRANCHPOINT

W244_3

[BANNER: SSDI - PENDING FROM LAST WAVE: APPLICATION accepted]

In what year did the benefits stop?

[BANNER: Social Security Disability Insurance]

In what year did the benefits stop?

YEAR_____

DK.....GO TO W245_1 BRANCHPOINT

RF.....GO TO W245_1 BRANCHPOINT

W243_3 BRANCHPOINT: IF YEAR AT W244_3 WAS MORE THAN 2 YEARS AGO, GO TO W245_1 BRANCHPOINT

W243_3

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF APPLICATION ACCEPTED BLOCK-3: SSDI PENDING (W234_3 – W243_3)

W245_1 BRANCHPOINT: IF R WAS APPROVED FOR THE SSDI BENEFITS THAT S/HE HAD APPLIED FOR BY R's LAST IW (M032=1), GO TO M033 BRANCHPOINT

BEGINNING OF (W245_1) APPLICATION REJECTED BLOCK-1: SSDI PENDING (W245_1 –W248_1). THIS BLOCK OF QUESTIONS IS ALSO USED IN OTHER LOCATIONS IN M1.

W245_1

[BANNER: SSDI - PENDING FROM LAST WAVE: APPLICATION Rejected]

Did you appeal or apply again later?

[BANNER: Social Security Disability Insurance]

Did you appeal or apply again later?

- 1. YES
- 5. NO.....GO TO M033 BRANCHPOINT
- 8. DK.....GO TO M033 BRANCHPOINT
- 9. RF.....GO TO M033 BRANCHPOINT

W247_1

[BANNER: SSDI - PENDING FROM LAST WAVE: APPLICATION Rejected]

In what year did you last appeal or apply for benefits?

[BANNER: Social Security Disability Insurance]

In what year did you last appeal or apply for benefits?

YEAR_____

DK.....GO TO W248_1

RF.....GO TO W248_1

W246_1 BRANCHPOINT: IF YEAR AT W247_1 WAS MORE THAN 2 YEARS AGO, GO TO W248_1

W246_1

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W248_1

[BANNER: SSDI - PENDING FROM LAST WAVE: APPLICATION Rejected]

Was your application eventually accepted, rejected, or is it still being considered?

[BANNER: Social Security Disability Insurance]

Was your application eventually accepted, rejected, or is it still being considered?

1. APPLICATION ACCEPTED
3. APPLICATION STILL BEING CONSIDERED.....GO TO M033 BRANCHPOINT
5. APPLICATION REJECTED.....GO TO M033 BRANCHPOINT
8. DK.....GO TO M033 BRANCHPOINT
9. RF.....GO TO M033 BRANCHPOINT

END OF APPLICATION REJECTED BLOCK-1: SSDI PENDING (W245_1 – W248_1)

BEGINNING OF (W234_4) APPLICATION ACCEPTED BLOCK-4: SSDI RE-APPLICATION (W234_4 – W244_4)

W234_4

[BANNER: SSDI - RE-APPLICATION: APPLICATION accepted]

In what year did you start receiving Social Security Disability benefits?

[INSTR: ENTER '9997' IF NOT YET RECEIVING BENEFITS.]

[BANNER: Social Security Disability Insurance]

In what year did you start receiving Social Security Disability benefits?

YEAR_____

9997 NOT YET RECEIVING BENEFITS.....GO TO M033 BRANCHPOINT

DK.....GO TO W235_4

RF.....GO TO W235_4

W233_4 BRANCHPOINT: IF YEAR AT W234_4 WAS MORE THAN 2 YEARS AGO, GO TO W235_4

W233_4

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W235_4

[BANNER: SSDI - RE-APPLICATION: APPLICATION accepted]

Were you offered rehabilitative services?

[BANNER: Social Security Disability Insurance]

Were you offered rehabilitative services?

1. YES
5. NO.....GO TO W238_4
8. DK.....GO TO W238_4
9. RF.....GO TO W238_4

W237_4

[BANNER: SSDI - RE-APPLICATION: APPLICATION accepted]

In what year were you offered rehabilitative services?

[BANNER: Social Security Disability Insurance]

In what year were you offered rehabilitative services?

YEAR _____

DK.....GO TO W238_4

RF.....GO TO W238_4

W236_4 BRANCHPOINT: IF YEAR AT W237_4 WAS MORE THAN 2 YEARS AGO, GO TO W238_4

W236_4

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W238_4

[BANNER: SSDI - RE-APPLICATION: APPLICATION accepted]

Are you still receiving benefits from Social Security Disability?

[\[BANNER: Social Security Disability Insurance\]](#)

[Are you still receiving benefits from Social Security Disability?](#)

1. YES.....GO TO W239_4
5. NO
8. DK.....GO TO M033 BRANCHPOINT
9. RF.....GO TO M033 BRANCHPOINT

W256_4

[BANNER: SSDI RE-APPLICATION: APPLICATION accepted]

Why are you no longer receiving those benefits?

Did your household resources increase, did you return to work, are you not working but able to work, or what?

[BANNER: Social Security Disability Insurance]

Why are you no longer receiving those benefits?

- 1. HOUSEHOLD RESOURCES INCREASED
- 2. RETURNED TO WORK
- 3. NOT WORKING BUT ABLE
- 4. [VOL] SSA DETERMINED NO LONGER ELIGIBLE FOR BENEFITS
- 7. OTHER (SPECIFY) W257_4 _____
- 8. DK
- 9. RF

- 1. HOUSEHOLD RESOURCES INCREASED
- 2. RETURNED TO WORK
- 3. NOT WORKING BUT ABLE
- 4. SSA DETERMINED I AM NO LONGER ELIGIBLE FOR BENEFITS
- 7. OTHER (SPECIFY) W257_4 _____
- 8. DK
- 9. RF

W239_4

[BANNER: SSDI - RE-APPLICATION: APPLICATION accepted]

IF R IS STILL RECEIVING SOCIAL SECURITY DISABILITY BENEFITS (W238_4=1):
How much did you receive from the Social Security Disability program last month?

OTHERWISE:
How much did you receive from the Social Security Disability program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]
[BANNER: Social Security Disability Insurance]

IF R IS STILL RECEIVING SOCIAL SECURITY DISABILITY BENEFITS (W238_4=1):
How much did you receive from the Social Security Disability program last month?

OTHERWISE:
How much did you receive from the Social Security Disability program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_4 BRANCHPOINT

- DK
- RF

W240_4 -
W242_4

Question text: (Thinking about the amount you received from the Social Security Disability program last month:)

Did it amount to a total of less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down
BREAKPOINTS: \$400, \$650, \$900, \$1,100
ENTRY POINT: \$650

Question text: Thinking about the amount you received from the Social Security Disability program last month:

Did it amount to a total of less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down
BREAKPOINTS: \$400, \$650, \$900, \$1,100
ENTRY POINT: \$650

W244_4 BRANCHPOINT: IF R IS STILL RECEIVING SSDI BENEFITS (W238_4=1), GO TO M033 BRANCHPOINT

W244_4

[BANNER: SSDI - RE-APPLICATION: APPLICATION accepted]

In what year did the benefits stop?
[BANNER: Social Security Disability Insurance]

In what year did the benefits stop?

YEAR_____

DK.....GO TO M033 BRANCHPOINT
RF.....GO TO M033 BRANCHPOINT

W243_4 BRANCHPOINT: IF YEAR AT W244_4 WAS MORE THAN 2 YEARS AGO, GO TO M033 BRANCHPOINT

W243_4

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF APPLICATION ACCEPTED BLOCK-4: SSDI RE-APPLICATION (W234_4 – W243_4)

M033 BRANCHPOINT: IF R HAD APPLIED FOR ONLY SSDI BENEFITS (M031=1), GO TO W238_7 BRANCHPOINT

M033

Was your SSI application approved?

1. YES
3. STILL HAVEN'T HEARD.....GO TO W238_7 BRANCHPOINT
5. NO.....GO TO W245_2
8. DK.....GO TO W238_7 BRANCHPOINT
9. RF.....GO TO W238_7 BRANCHPOINT

BEGINNING OF (W234_5) APPLICATION ACCEPTED BLOCK-5: SSI PENDING (W234_5 – W244_5)

W234_5

[BANNER: SSI - PENDING FROM LAST WAVE: APPLICATION accepted]

In what year did you start receiving Supplemental Security Income benefits?

[INSTR: ENTER '9997' IF NOT YET RECEIVING BENEFITS.]

[In what year did you start receiving Supplemental Security Income benefits?](#)

YEAR _____

- 9997 NOT YET RECEIVING BENEFITS.....GO TO W238_7 BRANCHPOINT
- DK.....GO TO W238_5
- RF.....GO TO W238_5

W233_5

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W238_5

[BANNER: SSI - PENDING FROM LAST WAVE: APPLICATION accepted]

Are you still receiving benefits from Supplemental Security Income?

[BANNER: Supplemental Security Income]

Are you still receiving benefits from Supplemental Security Income?

1. YES.....GO TO W239_5
5. NO
8. DK.....GO TO W238_7 BRANCHPOINT
9. RF.....GO TO W238_7 BRANCHPOINT

W256_5

[BANNER: SSI - PENDING FROM LAST WAVE: APPLICATION accepted]

Why are you no longer receiving those benefits?

Did your household resources increase, did you return to work, are you not working but able to work, or what?

[BANNER: Supplemental Security Income]

Why are you no longer receiving those benefits?

1. HOUSEHOLD RESOURCES INCREASED
2. RETURNED TO WORK
3. NOT WORKING BUT ABLE
4. [VOL] SSA DETERMINED NO LONGER ELIGIBLE FOR BENEFITS
7. OTHER (SPECIFY) W257_5_____
8. DK
9. RF

1. HOUSEHOLD RESOURCES INCREASED
2. RETURNED TO WORK
3. NOT WORKING BUT ABLE
4. SSA DETERMINED I AM NO LONGER ELIGIBLE FOR BENEFITS
7. OTHER (SPECIFY) W257_5_____
8. DK
9. RF

W239_5

[BANNER: SSI - PENDING FROM LAST WAVE: APPLICATION accepted]

IF R IS STILL RECEIVING SSI BENEFITS (W238_5=1):

How much did you receive from the Supplemental Security Income program last month?

OTHERWISE:

How much did you receive from the Supplemental Security Income program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Supplemental Security Income]

IF R IS STILL RECEIVING SSI BENEFITS (W238_5=1):

How much did you receive from the Supplemental Security Income program last month?

OTHERWISE:

How much did you receive from the Supplemental Security Income program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_5 BRANCHPOINT

DK

RF

W240_5 -
W242_5

Question text: (Thinking about the amount you received from the Supplemental Security Income program last month:)

Did it amount to a total of less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down
BREAKPOINTS: \$150, \$400, \$500, \$600
ENTRY POINT: \$400

Question text: Thinking about the amount you received from the Supplemental Security Income program last month:

Did it amount to a total of less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down
BREAKPOINTS: \$150, \$400, \$500, \$600
ENTRY POINT: \$400

W244_5 BRANCHPOINT: IF R IS STILL RECEIVING SSI BENEFITS (W238_5=1), GO TO W238_7 BRANCHPOINT

W244_5

[BANNER: SSI - PENDING FROM LAST WAVE: APPLICATION accepted]

In what year did the benefits stop?
[BANNER: Supplemental Security Income]

In what year did the benefits stop?

YEAR_____

DK.....GO TO M031 BRANCHPOINT
RF.....GO TO M031 BRANCHPOINT

W243_5 BRANCHPOINT: IF YEAR AT W244_5 WAS MORE THAN 2 YEARS AGO, GO TO W238_7 BRANCHPOINT

W243_5

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF APPLICATION ACCEPTED BLOCK-5: SSI PENDING (W234_5 – W244_5)

W245_2 BRANCHPOINT: GO TO W238_7 BRANCHPOINT

*BEGINNING OF (W245_2) APPLICATION REJECTED BLOCK-2: SSI PENDING
(W245_2 – W248_2)*

W245_2

[BANNER: SSI - PENDING FROM LAST WAVE: APPLICATION Rejected]

Did you appeal or apply again later?

[BANNER: Supplemental Security Income]

Did you appeal or apply again later?

1. YES
5. NO.....GO TO W238_7 BRANCHPOINT
8. DK.....GO TO W238_7 BRANCHPOINT
9. RF.....GO TO W238_7 BRANCHPOINT

W247_2

[BANNER: SSI - PENDING FROM LAST WAVE: APPLICATION Rejected]

In what year did you last appeal or apply for benefits?

[BANNER: Supplemental Security Income]

In what year did you last appeal or apply for benefits?

YEAR _____

- DK.....GO TO W248_2
- RF.....GO TO W248_2

W246_2 BRANCHPOINT: IF YEAR AT W247_2 WAS MORE THAN 2 YEARS AGO, GO TO W248_2

W246_2

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W248_2

[BANNER: SSI - PENDING FROM LAST WAVE: APPLICATION Rejected]

Was your application eventually accepted, rejected, or is it still being considered?

[BANNER: Supplemental Security Income]

Was your application eventually accepted, rejected, or is it still being considered?

1. APPLICATION ACCEPTED
 3. APPLICATION STILL BEING CONSIDERED.....GO TO W238_7 BRANCHPOINT
 5. APPLICATION REJECTED.....GO TO W238_7 BRANCHPOINT
 8. DK.....GO TO W238_7 BRANCHPOINT
 9. RF.....GO TO W238_7 BRANCHPOINT
- END OF APPLICATION REJECTED BLOCK-2: SSI PENDING (W245_2 – W248_2)*

BEGINNING OF (W234_6) APPLICATION ACCEPTED BLOCK-6: SSI RE-APPLICATION (W234_6 – W244_6)

W234_6

[BANNER: SSI - RE-APPLICATION: APPLICATION accepted]

In what year did you start receiving Supplemental Security Income benefits?

[INSTR: ENTER '9997' IF NOT YET RECEIVING BENEFITS.]

[BANNER: Supplemental Security Income]

In what year did you start receiving Supplemental Security Income benefits?

YEAR_____

9997 NOT YET RECEIVING BENEFITS.....GO TO W238_7 BRANCHPOINT

DK.....GO TO W238_6

RF.....GO TO W238_6

W233_6 BRANCHPOINT: IF YEAR AT W234_6 WAS MORE THAN 2 YEARS AGO, GO TO W238_6

W233_6

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W238_6

[BANNER: SSI - RE-APPLICATION: APPLICATION accepted]

Are you still receiving benefits from Supplemental Security Income?

[BANNER:Supplemental Security Income]

Are you still receiving benefits from Supplemental Security Income?

1. YES.....GO TO W239_6
5. NO
8. DK.....GO TO W238_7 BRANCHPOINT
9. RF.....GO TO W238_7 BRANCHPOINT

W256_6

[BANNER: SSI - RE-APPLICATION: APPLICATION accepted]

Why are you no longer receiving those benefits?

Did your household resources increase, did you return to work, are you not working but able to work, or what?

[BANNER: Supplemental Security Income]

Why are you no longer receiving those benefits?

1. HOUSEHOLD RESOURCES INCREASED
2. RETURNED TO WORK
3. NOT WORKING BUT ABLE
4. [VOL] SSA DETERMINED NO LONGER ELIGIBLE FOR BENEFITS
7. OTHER (SPECIFY) W257_6 _____
8. DK
9. RF

1. HOUSEHOLD RESOURCES INCREASED
2. RETURNED TO WORK
3. NOT WORKING BUT ABLE
4. SSA DETERMINED I AM NO LONGER ELIGIBLE FOR BENEFITS
7. OTHER (SPECIFY) W257_6 _____
8. DK
9. RF

W239_6

[BANNER: SSI - RE-APPLICATION: APPLICATION accepted]

IF R IS STILL RECEIVING SSI BENEFITS (W238_6=1):

How much did you receive from the Supplemental Security Income program last month?

OTHERWISE:

How much did you receive from the Supplemental Security Income program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Supplemental Security Income]

IF R IS STILL RECEIVING SSI BENEFITS (W238_6=1):

How much did you receive from the Supplemental Security Income program last month?

OTHERWISE:

How much did you receive from the Supplemental Security Income program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_6 BRANCHPOINT

DK

RF

W240_6 -

W242_6

Question text: (Thinking about the amount you received from the Supplemental Security Income program last month:)

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$150, \$400, \$500, \$600

ENTRY POINT: \$400

Question text: Thinking about the amount you received from the Supplemental Security Income program last month:

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$150, \$400, \$500, \$600

ENTRY POINT: \$400

W244_6 BRANCHPOINT: IF R IS STILL RECEIVING SSI BENEFITS (W238_6=1), GO TO W238_7 BRANCHPOINT

W244_6

[BANNER: SSI - RE-APPLICATION: APPLICATION accepted]

In what year did the benefits stop?

[BANNER: Supplemental Security Income]

In what year did the benefits stop?

YEAR _____

DK.....GO TO W238_7 BRANCHPOINT

RF.....GO TO W238_7 BRANCHPOINT

W243_6 BRANCHPOINT: IF YEAR AT W244_6 WAS MORE THAN 2 YEARS AGO, GO TO W238_7 BRANCHPOINT

W243_6

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF APPLICATION ACCEPTED BLOCK-6: SSI RE-APPLICATION (W234_6 – W244_6)

W238_7 BRANCHPOINT: IF VETERANS BENEFITS WERE PENDING AT R's LAST IW (Z100=3), GO TO M034 BRANCHPOINT

IF R {DID NOT REPORT AT R's LAST IW THAT WAS RECEIVING VETERANS BENEFITS and DID NOT SAY THAT THEY WERE PENDING} (Z100 {NOT 1 and NOT 3}), GO TO W238_9 BRANCHPOINT

BEGINNING OF (W238_7) APPLICATION ACCEPTED BLOCK-7: RECEIVING VA BENEFITS (W238_7 – W244_7)

W238_7

[BANNER: VA - RECEIVING: APPLICATION accepted]

Are you still receiving benefits from the Veterans Administration?

Are you still receiving benefits from the Veterans Administration?

- 1. YES
- 5. NO
- 6. DENIES RECEIVING BENEFITS.....GO TO W238_9 BRANCHPOINT
- 8. DK.....GO TO W238_9 BRANCHPOINT
- 9. RF.....GO TO W238_9 BRANCHPOINT
- 1. YES
- 5. NO
- 6. I DID NOT RECEIVE BENEFITS.....GO TO W238_9 BRANCHPOINT
- 8. DK.....GO TO W238_9 BRANCHPOINT
- 9. RF.....GO TO W238_9 BRANCHPOINT

W239_7

[BANNER: VA - RECEIVING: APPLICATION accepted]

IF R IS STILL RECEIVING VETERANS BENEFITS (W238_7=1):

How much did you receive from the Veterans Administration program last month?

OTHERWISE:

How much did you receive from the Veterans Administration program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Veterans Administration Benefits]

IF R IS STILL RECEIVING VETERANS BENEFITS (W238_7=1):

How much did you receive from the Veterans Administration program last month?

OTHERWISE:

How much did you receive from the Veterans Administration program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_7 BRANCHPOINT

DK

RF

W240_7 -
W242_7

Question text: Thinking about the amount you received from the Veterans Administration program last month:

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 1Up1Down
BREAKPOINTS: \$500, \$1,000, \$1,500
ENTRY POINT: \$1,000

Question text: Thinking about the amount you received from the Veterans Administration program last month:

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 1Up1Down
BREAKPOINTS: \$500, \$1,000, \$1,500
ENTRY POINT: \$1,000

W244_7 BRANCHPOINT: IF R IS STILL RECEIVING VETERANS BENEFITS (W238_7=1), GO TO M034 BRANCHPOINT

W244_7

[BANNER: VA - RECEIVING: APPLICATION accepted]

In what year did the benefits stop?

[BANNER: Veterans Administration Benefits]

In what year did the benefits stop?

YEAR_____

DK.....GO TO M034 BRANCHPOINT

RF.....GO TO M034 BRANCHPOINT

W243_7 BRANCHPOINT: IF YEAR AT W244_7 WAS MORE THAN 2 YEARS AGO, GO TO M034 BRANCHPOINT

W243_7

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF APPLICATION ACCEPTED BLOCK-7: RECEIVING VA BENEFITS (W238_7 – W244_7)

M034 BRANCHPOINT: IF R DID NOT REPORT AT R's LAST IW THAT VETERANS BENEFITS WERE PENDING (Z100 NOT 3), GO TO W238_9 BRANCHPOINT

M034

[BANNER: Veterans Administration Benefits]

According to our records, in R's LAST IW MONTH, YEAR you had applied for benefits from the Veterans Administration.

Was your application approved?

1. YES
3. STILL HAVEN'T HEARD.....GO TO W238_9 BRANCHPOINT
5. NO.....GO TO W238_9 BRANCHPOINT
7. DENIES APPLIED FOR BENEFITS.....GO TO W238_9 BRANCHPOINT
8. DK.....GO TO W238_9 BRANCHPOINT
9. RF.....GO TO W238_9 BRANCHPOINT
1. YES
3. STILL HAVEN'T HEARD.....GO TO W238_9 BRANCHPOINT
5. NO.....GO TO W238_9 BRANCHPOINT
7. I DID NOT APPLY FOR BENEFITS.....GO TO W238_9 BRANCHPOINT
8. DK.....GO TO W238_9 BRANCHPOINT
9. RF.....GO TO W238_9 BRANCHPOINT

BEGINNING OF (W232_8) APPLICATION ACCEPTED BLOCK-8: VA PENDING (W232_8 & W238_8 –W243_8)

W232_8

[BANNER: Veterans Administration Benefits]

What disability rating did you receive?

100 FULL DISABILITY

[BANNER: Veterans Administration Benefits]

What disability rating did you receive?

[INSTR: 100% MEANS FULL DISABILITY.]

_____ %

DK

RF

W234_8

[BANNER: VA - PENDING FROM LAST WAVE: APPLICATION accepted]

In what year did you start receiving Veterans Administration benefits?

[INSTR: ENTER '9997' IF NOT YET RECEIVING BENEFITS.]

[BANNER: Veterans Administration Benefits]

In what year did you start receiving Veterans Administration benefits?

YEAR _____

9997 NOT YET RECEIVING BENEFITS.....GO TO W238_9 BRANCHPOINT

DK.....GO TO W238_8

RF.....GO TO W238_8

W233_8 BRANCHPOINT: IF YEAR AT W234_8 WAS MORE THAN 2 YEARS AGO, GO TO W238_8

W233_8

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W238_8

[BANNER: VA - PENDING FROM LAST WAVE: APPLICATION accepted]

Are you still receiving benefits from the Veterans Administration?

[BANNER: Veterans Administration Benefits]

Are you still receiving benefits from the Veterans Administration?

- 1. YES
- 5. NO
- 6. DENIES RECEIVING BENEFITS.....GO TO W238_9 BRANCHPOINT
- 8. DK.....GO TO W238_9 BRANCHPOINT
- 9. RF.....GO TO W238_9 BRANCHPOINT

- 1. YES
- 5. NO
- 6. I DID NOT RECEIVE BENEFITS.....GO TO W238_9 BRANCHPOINT
- 8. DK.....GO TO W238_9 BRANCHPOINT
- 9. RF.....GO TO W238_9 BRANCHPOINT

W239_8

[BANNER: VA - PENDING FROM LAST WAVE: APPLICATION accepted]

IF R IS STILL RECEIVING VETERANS BENEFITS (W238_8=1):

How much did you receive from the Veterans Administration program last month?

OTHERWISE:

How much did you receive from the Veterans Administration program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Veterans Administration Benefits]

IF R IS STILL RECEIVING VETERANS BENEFITS (W238_8=1):

How much did you receive from the Veterans Administration program last month?

OTHERWISE:

How much did you receive from the Veterans Administration program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_8 BRANCHPOINT

DK

RF

W240_8 -

W242_8

Question text: (Thinking about the amount you received from the Veterans Administration program last month:)

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 1Up1Down

BREAKPOINTS: \$500, \$1,000, \$1,500

ENTRY POINT: \$1,000

Question text: Thinking about the amount you received from the Veterans Administration program last month:

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 1Up1Down

BREAKPOINTS: \$500, \$1,000, \$1,500

ENTRY POINT: \$1,000

W244_8 BRANCHPOINT: IF R IS STILL RECEIVING VETERANS BENEFITS (W238_8=1), GO TO W238_9 BRANCHPOINT

W244_8

[BANNER: VA - PENDING FROM LAST WAVE: APPLICATION accepted]

In what year did the benefits stop?

[BANNER: Veterans Administration Benefits]

In what year did the benefits stop?

YEAR_____

DK.....GO TO W238_9 BRANCHPOINT

RF.....GO TO W238_9 BRANCHPOINT

W243_8 BRANCHPOINT: IF YEAR AT W244_8 WAS MORE THAN 2 YEARS AGO, GO TO W238_9 BRANCHPOINT

W243_8

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF APPLICATION ACCEPTED BLOCK-8: VA PENDING (W232_8 & W238_8 – W243_8)

W238_9 BRANCHPOINT: IF WORKERS' COMPENSATION BENEFITS WERE PENDING AT R's LAST IW (Z119=3), GO TO M035 BRANCHPOINT

IF R {DID NOT REPORT AT R's LAST IW THAT WAS RECEIVING WORKERS' COMPENSATION BENEFITS and DID NOT SAY THAT THEY WERE PENDING} (Z119 {NOT 1 and NOT 3}), GO TO M036

BEGINNING OF (W238_9) APPLICATION ACCEPTED BLOCK-9: RECEIVING WORKERS' COMPENSATION BENEFITS (W238_9 – W244_9)

W238_9

[BANNER: WC - RECEIVING: APPLICATION accepted]

Are you still receiving benefits from Workers' Compensation?

Are you still receiving benefits from Workers' Compensation?

- 1. YES
- 5. NO
- 6. DENIES RECEIVING BENEFITS.....GO TO M036
- 8. DK.....GO TO M036
- 9. RF.....GO TO M036
- 1. YES
- 5. NO
- 6. I DID NOT RECEIVE BENEFITS.....GO TO M036
- 8. DK.....GO TO M036
- 9. RF.....GO TO M036

W239_9

[BANNER: WC - RECEIVING: APPLICATION accepted]

IF R IS STILL RECEIVING WORKERS' COMPENSATION BENEFITS (W238_9=1):
How much did you receive from the Workers' Compensation program last month?

OTHERWISE:
How much did you receive from the Workers' Compensation program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Workers' Compensation]

IF R IS STILL RECEIVING WORKERS' COMPENSATION BENEFITS (W238_9=1):

How much did you receive from the Workers' Compensation program last month?

OTHERWISE:

How much did you receive from the Workers' Compensation program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_9 BRANCHPOINT

DK

RF

W240_9 -

W242_9

Question text: (Thinking about the amount you received from the Workers' Compensation program last month:)

Did it amount to less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$500, \$1,000, \$1,500, \$2,200

ENTRY POINT: \$1,000

Question text: Thinking about the amount you received from the Workers' Compensation program last month:

Did it amount to less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$500, \$1,000, \$1,500, \$2,200

ENTRY POINT: \$1,000

W244_9 BRANCHPOINT: IF R IS STILL RECEIVING WORKERS' COMPENSATION BENEFITS (W238_9=1), GO TO M036

W244_9

[BANNER: WC - RECEIVING: APPLICATION accepted]

In what year did the benefits stop?

[BANNER: Workers' Compensation]

In what year did the benefits stop?

YEAR _____

DK.....GO TO M035 BRANCHPOINT

RF.....GO TO M035 BRANCHPOINT

W243_9 BRANCHPOINT: IF YEAR AT W244_9 WAS MORE THAN 2 YEARS AGO, GO TO M035 BRANCHPOINT

W243_9

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF APPLICATION ACCEPTED BLOCK-9: RECEIVING WORKERS' COMPENSATION BENEFITS (W238_9 – W244_9)

M035 BRANCHPOINT: IF R WAS RECEIVING WORKERS' COMPENSATION BENEFITS AT R's LAST IW (W238_9 WAS ASKED), GO TO M036

M035

[BANNER: Workers' Compensation]

According to our records, in R's LAST IW MONTH, YEAR you had applied for benefits from Workers' Compensation.

Was your application approved?

1. YES
3. STILL HAVEN'T HEARD.....GO TO M036
5. NO.....GO TO M036
7. DENIES APPLIED FOR BENEFITS.....GO TO M036
8. DK.....GO TO M036
9. RF.....GO TO M036

- 1. YES
- 3. STILL HAVEN'T HEARD.....GO TO M036
- 5. NO.....GO TO M036
- 7. I DID NOT APPLY FOR BENEFITS.....GO TO M036
- 8. DK.....GO TO M036
- 9. RF.....GO TO M036

BEGINNING OF (W234_10) APPLICATION ACCEPTED BLOCK-10: WORKERS' COMPENSATION PENDING (W234_10 & W238_10 – W244_10)

W234_10

[BANNER: WC - PENDING FROM LAST WAVE: APPLICATION accepted]

In what year did you start receiving Workers' Compensation benefits?

[INSTR: ENTER '9997' IF NOT YET RECEIVING BENEFITS.]

[BANNER: Workers' Compensation]

In what year did you start receiving Workers' Compensation benefits?

YEAR _____

9997 NOT YET RECEIVING BENEFITS.....GO TO M036 BRANCHPOINT

DK.....GO TO W238_10

RF.....GO TO W238_10

W233_10 BRANCHPOINT: IF YEAR AT W234_10 WAS MORE THAN 2 YEARS AGO, GO TO W238_10

W233_10

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W238_10

[BANNER: WC - PENDING FROM LAST WAVE: APPLICATION accepted]

Are you still receiving benefits from Workers' Compensation?

[BANNER: Workers' Compensation]

Are you still receiving benefits from Workers' Compensation?

- 1. YES
- 5. NO
- 6. DENIES RECEIVING BENEFITS.....GO TO M036
- 8. DK.....GO TO M036
- 9. RF.....GO TO M036

- 1. YES
- 5. NO
- 6. I DID NOT RECEIVE BENEFITS.....GO TO M036
- 8. DK.....GO TO M036
- 9. RF.....GO TO M036

W239_10

[BANNER: WC - PENDING FROM LAST WAVE: APPLICATION accepted]

IF R IS STILL RECEIVING WORKERS' COMPENSATION BENEFITS

(W238_10=1):

How much did you receive from the Workers' Compensation program last month?

OTHERWISE:

How much did you receive from the Workers' Compensation program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Workers' Compensation]

IF R IS STILL RECEIVING WORKERS' COMPENSATION BENEFITS

(W238_10=1):

How much did you receive from the Workers' Compensation program last month?

OTHERWISE:

How much did you receive from the Workers' Compensation program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_10 BRANCHPOINT

DK

RF

W240_10 -

W242_10

Question text: (Thinking about the amount you received from the Workers' Compensation program last month:)

Did it amount to less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$500, \$1,000, \$1,500, \$2,200

ENTRY POINT: \$1,000

Question text: Thinking about the amount you received from the Workers' Compensation program last month:

Did it amount to less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$500, \$1,000, \$1,500, \$2,200

ENTRY POINT: \$1,000

W244_10 BRANCHPOINT: IF R IS STILL RECEIVING WORKERS' COMPENSATION BENEFITS (W238_10=1), GO TO M036

W244_10

[BANNER: WC - PENDING FROM LAST WAVE: APPLICATION accepted]

In what year did the benefits stop?

[BANNER: Workers' Compensation]

In what year did the benefits stop?

YEAR _____

DK.....GO TO M036 BRANCHPOINT

RF.....GO TO M036 BRANCHPOINT

W243_10 BRANCHPOINT: IF YEAR AT W244_10 WAS MORE THAN 2 YEARS AGO, GO TO M036

W243_10

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

*END OF APPLICATION ACCEPTED BLOCK-10: WORKERS' COMPENSATION PENDING
(W234_10 – W244_10)*

M036

Since R's LAST IW MONTH, YEAR, have you applied for disability benefits from any (other) government program?

1. YES
5. NO.....GO TO M051 BRANCHPOINT
8. DK.....GO TO M051 BRANCHPOINT
9. RF.....GO TO M051 BRANCHPOINT

M037

Which programs did you apply to?

[INSTR: SELECT ALL THAT APPLY.]

1. SOCIAL SECURITY DISABILITY PROGRAM (SSDI) OR SUPPLEMENTAL SECURITY INCOME PROGRAM (SSI)
2. VETERANS ADMINISTRATION PROGRAM
3. WORKERS' COMPENSATION PROGRAM
4. PUBLIC WELFARE DISABILITY PROGRAM
7. OTHER (SPECIFY) M038 _____
8. DK
9. RF

M058 BRANCHPOINT: IF R DID NOT REPORT APPLYING FOR {SSDI or SSI} (M037 NOT 1), GO TO W250_3 BRANCHPOINT

M058
(Tag#=M0
37.5)

Did you apply to Social Security Disability or the Supplemental Security Income program, or both?

- 1. SOCIAL SECURITY DISABILITY (SSDI)
- 2. SUPPLEMENTAL SECURITY INCOME (SSI).....GO TO W250_2 BRANCHPOINT
- 3. BOTH
- 8. DK.....GO TO W250_3 BRANCHPOINT
- 9. RF.....GO TO W250_3 BRANCHPOINT

*BEGINNING OF (W250_1) WHEN APPLY BLOCK-1: SSDI NEW APPLICATION
(W249_1 –W252_1)
THIS BLOCK OF QUESTIONS IS ALSO USED IN OTHER LOCATIONS IN M1 & M2.*

W250_1

[BANNER: SSDI - When apply]

In what year did you first apply for disability benefits from the Social Security disability program?

[BANNER: Social Security Disability Insurance]

In what year did you first apply for disability benefits from the Social Security disability program?

YEAR_____

DK.....GO TO W252_1 BRANCHPOINT

RF.....GO TO W252_1 BRANCHPOINT

W249_1 BRANCHPOINT: IF YEAR AT W250_1 WAS MORE THAN 2 YEARS AGO, GO TO W252_1 BRANCHPOINT

W249_1

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W252_1 BRANCHPOINT: IF {MONTH and YEAR} R FIRST APPLIED FOR SSDI (per {W249_1/W250_1}) IS {ON OR AFTER} R's LAST IW DATE (per {Z092/Z093}), GO TO M040

W252_1

[BANNER: SSDI - When Apply]

We are interested in your first application since R's LAST IW MONTH, YEAR.

In what year did you first apply for benefits from the Social Security disability program since that time?

[INSTR: ENTER '9997' IF R HAS NOT APPLIED SINCE LAST IW]

We are interested in your first application since R's LAST IW MONTH, YEAR.

In what year did you first apply for benefits from the Social Security disability program since that time?

YEAR _____

9997 HAVE NOT APPLIED SINCE R's LAST IW MONTH, YEAR.....GO TO W250_2

BRANCHPOINT

DK.....GO TO M040

RF.....GO TO M040

YEAR _____

9997 I HAVE NOT APPLIED SINCE THE DATE OF MY LAST HRS INTERVIEWGO TO

W250_2 BRANCHPOINT

DK.....GO TO M040

RF.....GO TO M040

W251_1 BRANCHPOINT: IF YEAR AT W252_1 WAS MORE THAN 2 YEARS AGO, GO TO M040

W251_1

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF WHEN APPLY BLOCK-1: SSDI NEW APPLICATION (W249_1 – W252_1)

M040

[BANNER: Social Security Disability Insurance]

Was your application accepted, rejected, or is it still being considered?

1. APPLICATION ACCEPTED.....GO TO W234_11
3. APPLICATION STILL BEING CONSIDERED.....GO TO W250_2 BRANCHPOINT
5. APPLICATION REJECTED
8. DK.....GO TO W250_2 BRANCHPOINT
9. RF.....GO TO W250_2 BRANCHPOINT

BEGINNING OF (W245_3) APPLICATION REJECTED BLOCK-3: SSDI NEW APPLICATION (W245_3 - W248_3)

W245_3

[BANNER: SSDI - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

Did you appeal or apply again later?

[BANNER: Social Security Disability Insurance]

Did you appeal or apply again later?

- 1. YES
- 5. NO.....GO TO W250_2 BRANCHPOINT
- 8. DK.....GO TO W250_2 BRANCHPOINT
- 9. RF.....GO TO W250_2 BRANCHPOINT

W247_3

[BANNER: SSDI - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

In what year did you last appeal or apply for benefits?

[BANNER: Social Security Disability Insurance]

In what year did you last appeal or apply for benefits?

YEAR _____

DK.....GO TO W248_3

RF.....GO TO W248_3

W246_3 BRANCHPOINT: IF YEAR AT W247_3 WAS MORE THAN 2 YEARS AGO, GO TO W248_3

W246_3

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W248_3

[BANNER: SSDI - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

Was your application eventually accepted, rejected, or is it still being considered?

[BANNER: Social Security Disability Insurance]

Was your application eventually accepted, rejected, or is it still being considered?

- 1. APPLICATION ACCEPTED
- 3. APPLICATION STILL BEING CONSIDERED.....GO TO W250_2 BRANCHPOINT
- 5. APPLICATION REJECTED.....GO TO W250_2 BRANCHPOINT
- 8. DK.....GO TO W250_2 BRANCHPOINT
- 9. RF.....GO TO W250_2 BRANCHPOINT

END OF APPLICATION REJECTED BLOCK-3: SSDI NEW APPLICATION (W245_3 ? W248_3)

BEGINNING OF (W234_11) APPLICATION ACCEPTED BLOCK-11: SSDI NEW APPLICATION (W234_11 – W244_11)

W234_11

[BANNER: SSDI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

In what year did you start receiving Social Security Disability benefits?

[INSTR: ENTER '9997' IF NOT YET RECEIVING BENEFITS.]

[BANNER: Social Security Disability Insurance]

In what year did you start receiving Social Security Disability benefits?

YEAR _____

- 9997 NOT YET RECEIVING BENEFITS.....GO TO W250_2 BRANCHPOINT
- DK.....GO TO W235_11
- RF.....GO TO W235_11

W233_11 BRANCHPOINT: IF YEAR AT W234_11 WAS MORE THAN 2 YEARS AGO, GO TO W235_11

W233_11

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W235_11

[BANNER: SSDI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

Were you offered rehabilitative services?

[BANNER: Social Security Disability Insurance]

Were you offered rehabilitative services?

- 1. YES
- 5. NO.....GO TO W238_11 BRANCHPOINT
- 8. DK.....GO TO W238_11 BRANCHPOINT
- 9. RF.....GO TO W238_11 BRANCHPOINT

W237_11

[BANNER: SSDI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

In what year were you offered rehabilitative services?

[BANNER: Social Security Disability Insurance]

In what year were you offered rehabilitative services?

YEAR _____

DK.....GO TO W238_11

RF.....GO TO W238_11

W236_11 BRANCHPOINT: IF YEAR AT W237_11 WAS MORE THAN 2 YEARS AGO, GO TO W238_11

W236_11

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W238_11

[BANNER: SSDI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

Are you still receiving benefits from Social Security Disability?

[BANNER: Social Security Disability Insurance]

Are you still receiving benefits from Social Security Disability?

- 1. YES.....GO TO W239_11
- 5. NO
- 8. DK.....GO TO W250_2 BRANCHPOINT
- 9. RF.....GO TO W250_2 BRANCHPOINT

W256_11

[BANNER: SSDI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

Why are you no longer receiving those benefits?

Did your household resources increase, did you return to work, are you not working but able to work, or what?

[BANNER: Social Security Disability Insurance]

Why are you no longer receiving those benefits?

- 1. HOUSEHOLD RESOURCES INCREASED
- 2. RETURNED TO WORK
- 3. NOT WORKING BUT ABLE
- 4. [VOL] SSA DETERMINED NO LONGER ELIGIBLE FOR BENEFITS
- 7. OTHER (SPECIFY) W257_11_____
- 8. DK
- 9. RF

- 1. HOUSEHOLD RESOURCES INCREASED
- 2. RETURNED TO WORK
- 3. NOT WORKING BUT ABLE
- 4. SSA DETERMINED I AM NO LONGER ELIGIBLE FOR BENEFITS
- 7. OTHER (SPECIFY) W257_11_____
- 8. DK
- 9. RF

W239_11

[BANNER: SSDI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

IF R IS STILL RECEIVING SSDI BENEFITS (W238_11=1):

How much did you receive from the Social Security Disability program last month?

OTHERWISE:

How much did you receive from the Social Security Disability program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Social Security Disability Insurance]

IF R IS STILL RECEIVING SSDI BENEFITS (W238_11=1):

How much did you receive from the Social Security Disability program last month?

OTHERWISE:

How much did you receive from the Social Security Disability program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_11 BRANCHPOINT

DK

RF

W240_11 -

W242_11

Question text: (Thinking about the amount you received from the Social Security Disability program last month:)

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$400, \$650, \$900, \$1,100

ENTRY POINT: \$650

Question text: Thinking about the amount you received from the Social Security Disability program last month:

Did it amount to a total of less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$400, \$650, \$900, \$1,100

ENTRY POINT: \$650

W244_11 BRANCHPOINT: IF R IS STILL RECEIVING SSDI BENEFITS (W238_11=1), GO TO W250_2 BRANCHPOINT

W244_11

[BANNER: SSDI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

In what year did the benefits stop?

[BANNER: Social Security Disability Insurance]

In what year did the benefits stop?

YEAR_____

DK.....GO TO W250_2 BRANCHPOINT

RF.....GO TO W250_2 BRANCHPOINT

W243_11 BRANCHPOINT: IF YEAR AT W244_11 WAS MORE THAN 2 YEARS AGO, GO TO W250_2 BRANCHPOINT

W243_11

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF APPLICATION ACCEPTED BLOCK-11: SSDI NEW APPLICATION
(W234_11 - W244_11)

W250_2 BRANCHPOINT: IF R DID NOT REPORT APPLYING TO SSI PROGRAM (M058 {NOT 2 and NOT 3}), GO TO W250_3 BRANCHPOINT

BEGINNING OF (W249_2) WHEN APPLY BLOCK-2: SSI NEW APPLICATION
(W249_2 - W252_2)

W250_2

[BANNER: SSI - When apply]

(Not including those disability benefits we have already discussed,) In what year did you first apply for disability benefits from the Supplemental Security Income disability program?

[BANNER: Supplemental Security Income]

Not including those disability benefits we have already discussed, In what year did you first apply for disability benefits from the Supplemental Security Income disability program?

YEAR _____

DK.....GO TO W252_2 BRANCHPOINT

RF.....GO TO W252_2 BRANCHPOINT

W249_2 BRANCHPOINT: IF YEAR AT W250_2 WAS MORE THAN 2 YEARS AGO, GO TO W252_2 BRANCHPOINT

W249_2

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W252_2 BRANCHPOINT: IF {MONTH and YEAR} R FIRST APPLIED FOR SSI (per {W249_2/W250_2}) IS {ON OR AFTER} R's LAST IW DATE (per {Z092/Z093}), GO TO M041

W252_2

[BANNER: SSI - When apply]

We are interested in your first application since R's LAST IW MONTH, YEAR.

In what year did you first apply for benefits from the Supplemental Security Income disability program since that time?

[INSTR: ENTER '9997' IF R HAS NOT APPLIED SINCE LAST IW]

We are interested in your first application since R's LAST IW MONTH, YEAR.

In what year did you first apply for benefits from the Supplemental Security Income disability program since that time?

YEAR_____

9997 HAVE NOT APPLIED SINCE R's LAST IW MONTH, YEAR.....GO TO W250_3

BRANCHPOINT

DK.....GO TO M041

RF.....GO TO M041

W251_2 BRANCHPOINT: IF YEAR AT W252_2 WAS MORE THAN 2 YEARS AGO, GO TO M041

W251_2

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF WHEN APPLY BLOCK-2: SSI NEW APPLICATION (W249_2 – W252_2)

M041

[BANNER: Supplemental Security Income]

Was your application accepted, rejected, or is it still being considered?

- 1. APPLICATION ACCEPTED.....GO TO W234_12
- 3. APPLICATION STILL BEING CONSIDERED.....GO TO W250_3 BRANCHPOINT
- 5. APPLICATION REJECTED
- 8. DK.....GO TO W250_3 BRANCHPOINT
- 9. RF.....GO TO W250_3 BRANCHPOINT

BEGINNING OF (W245_4) APPLICATION REJECTED BLOCK-4: SSI NEW APPLICATION (W245_4 – W248_4)

W245_4

[BANNER: SSI - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

Did you appeal or apply again later?

[BANNER: Supplemental Security Income]

Did you appeal or apply again later?

- 1. YES
- 5. NO.....GO TO W250_3 BRANCHPOINT
- 8. DK.....GO TO W250_3 BRANCHPOINT
- 9. RF.....GO TO W250_3 BRANCHPOINT

W247_4

[BANNER: SSI - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

In what year did you last appeal or apply for benefits?

[BANNER: Supplemental Security Income]

In what year did you last appeal or apply for benefits?

YEAR_____

DK.....GO TO W248_4

RF.....GO TO W248_4

W246_4 BRANCHPOINT: IF YEAR AT W247_4 WAS MORE THAN 2 YEARS AGO, GO TO W248_4

W246_4

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W248_4

[BANNER: SSI - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

Was your application eventually accepted, rejected, or is it still being considered?

[BANNER:Supplemental Security Income]

Was your application eventually accepted, rejected, or is it still being considered?

1. APPLICATION ACCEPTED
3. APPLICATION STILL BEING CONSIDERED.....GO TO W250_3 BRANCHPOINT
5. APPLICATION REJECTED.....GO TO W250_3 BRANCHPOINT
8. DK.....GO TO W250_3 BRANCHPOINT
9. RF.....GO TO W250_3 BRANCHPOINT

END OF APPLICATION REJECTED BLOCK-4: SSI NEW APPLICATION (W245_4 – W248_4)

BEGINNING OF (W234_12) APPLICATION ACCEPTED BLOCK-12: SSI NEW APPLICATION (W234_12 – W244_12)

W234_12

[BANNER: SSI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

In what year did you start receiving Supplemental Security Income benefits?

[INSTR: ENTER '9997' IF NOT YET RECEIVING BENEFITS.]

[BANNER:Supplemental Security Income]

In what year did you start receiving Supplemental Security Income benefits?

YEAR_____

9997 NOT YET RECEIVING BENEFITS.....GO TO W250_3 BRANCHPOINT

DK.....GO TO W238_12

RF.....GO TO W238_12

W233_12 BRANCHPOINT: IF YEAR AT W234_12 WAS MORE THAN 2 YEARS AGO, GO TO W238_12

W233_12

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W238_12

[BANNER: SSI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

Are you still receiving benefits from Supplemental Security Income?

[BANNER: Supplemental Security Income]

Are you still receiving benefits from Supplemental Security Income?

1. YES.....GO TO W239_12
5. NO
8. DK.....GO TO W250_3 BRANCHPOINT
9. RF.....GO TO W250_3 BRANCHPOINT

W256_12

[BANNER: SSI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

Why are you no longer receiving those benefits?

Did your household resources increase, did you return to work, are you not working but able to work, or what?

[BANNER: Supplemental Security Income]

Why are you no longer receiving those benefits?

1. HOUSEHOLD RESOURCES INCREASED
2. RETURNED TO WORK
3. NOT WORKING BUT ABLE
4. [VOL] SSA DETERMINED NO LONGER ELIGIBLE FOR BENEFITS
7. OTHER (SPECIFY) W257_12_____
8. DK
9. RF

1. HOUSEHOLD RESOURCES INCREASED
2. RETURNED TO WORK
3. NOT WORKING BUT ABLE
4. SSA DETERMINED I AM NO LONGER ELIGIBLE FOR BENEFITS
7. OTHER (SPECIFY) W257_12_____
8. DK
9. RF

W239_12

[BANNER: SSI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

IF R IS STILL RECEIVING SSI BENEFITS (W238_12=1):

How much did you receive from the Supplemental Security Income program last month?

OTHERWISE:

How much did you receive from the Supplemental Security Income program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Supplemental Security Income]

IF R IS STILL RECEIVING SSI BENEFITS (W238_12=1):

How much did you receive from the Supplemental Security Income program last month?

OTHERWISE:

How much did you receive from the Supplemental Security Income program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_12 BRANCHPOINT

DK

RF

W240_12 -

W242_12

Question text: (Thinking about the amount you received from the Supplemental Security Income program last month:)

Did it amount to a total of less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$150, \$400, \$500, \$600

ENTRY POINT: \$400

Question text: Thinking about the amount you received from the Supplemental Security Income program last month:

Did it amount to a total of less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$150, \$400, \$500, \$600

ENTRY POINT: \$400

W244_12 BRANCHPOINT: IF R IS STILL RECEIVING SSI BENEFITS (W238_12=1), GO TO W250_3 BRANCHPOINT

W244_12

[BANNER: SSI - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

In what year did the benefits stop?

[BANNER: Supplemental Security Income]

In what year did the benefits stop?

YEAR _____

DK.....GO TO W250_3 BRANCHPOINT

RF.....GO TO W250_3 BRANCHPOINT

W243_12 BRANCHPOINT: IF YEAR AT W244_12 WAS MORE THAN 2 YEARS AGO, GO TO W250_3 BRANCHPOINT

W243_12

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

END OF APPLICATION ACCEPTED BLOCK-12: SSI NEW APPLICATION (W234_12 – W244_12)

W250_3 BRANCHPOINT: IF R DID NOT REPORT APPLYING TO VETERANS ADMINISTRATION (M037 NOT 2), GO TO W250_4 BRANCHPOINT

BEGINNING OF (W249_3) WHEN APPLY BLOCK-3: VA NEW APPLICATION (W249_3 – W252_3)

W250_3

[BANNER: VA - When apply]

(Not including those disability benefits we have already discussed,) In what year did you first apply for disability benefits from the Veterans Administration disability program?

[BANNER: Veterans Administration]

Not including those disability benefits we have already discussed, In what year did you first apply for disability benefits from the Veterans Administration disability program?

YEAR _____

DK.....GO TO W252_3 BRANCHPOINT

RF.....GO TO W252_3 BRANCHPOINT

W249_3 BRANCHPOINT: IF YEAR AT W250_3 WAS MORE THAN 2 YEARS AGO, GO TO W252_3 BRANCHPOINT

W249_3

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W252_3 BRANCHPOINT: IF {MONTH and YEAR} R FIRST APPLIED FOR VA BENEFITS (per {W249_3/W250_3}) IS {ON OR AFTER} R's LAST IW DATE (per {Z092/Z093}), GO TO M042

W252_3

[BANNER: VA - When apply]

We are interested in your first application since R's LAST IW MONTH, YEAR.

In what year did you first apply for benefits from the Veterans Administration disability program since that time?

[INSTR: ENTER '9997' IF R HAS NOT APPLIED SINCE LAST IW.]

We are interested in your first application since R's LAST IW MONTH, YEAR.

In what year did you first apply for benefits from the Veterans Administration disability program since that time?

YEAR _____

9997 HAVE NOT APPLIED SINCE R's LAST IW MONTH, YEAR.....GO TO W250_4

BRANCHPOINT

DK.....GO TO M042

RF.....GO TO M042

W251_3 BRANCHPOINT: IF YEAR AT W252_3 WAS MORE THAN 2 YEARS AGO, GO TO M042

W251_3

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF WHEN APPLY BLOCK-3: VA NEW APPLICATION (W249_3 – W252_3)

M042

[BANNER: Veterans Administration Benefits]

Was your application accepted, rejected, or is it still being considered?

1. APPLICATION ACCEPTED.....GO TO W232_13
3. APPLICATION STILL BEING CONSIDERED.....GO TO W250_4 BRANCHPOINT
5. APPLICATION REJECTED
8. DK.....GO TO W250_4 BRANCHPOINT
9. RF.....GO TO W250_4 BRANCHPOINT

BEGINNING OF (W245_5) APPLICATION REJECTED BLOCK-5: VA NEW APPLICATION (W245_5 – W248_5)

W245_5

[BANNER: VA - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

Did you appeal or apply again later?

[BANNER:Veterans Administration Benefits]

Did you appeal or apply again later?

1. YES
5. NO.....GO TO W250_4 BRANCHPOINT
8. DK.....GO TO W250_4 BRANCHPOINT
9. RF.....GO TO W250_4 BRANCHPOINT

W247_5

[BANNER: VA - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

In what year did you last appeal or apply for benefits?

[BANNER: Veterans Administration Benefits]

In what year did you last appeal or apply for benefits?

YEAR _____

DK.....GO TO W248_5

RF.....GO TO W248_5

W246_5 BRANCHPOINT: IF YEAR AT W247_5 WAS MORE THAN 2 YEARS AGO, GO TO W248_5

W246_5

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W248_5

[BANNER: VA - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

Was your application eventually accepted, rejected, or is it still being considered?

[BANNER: Veterans Administration Benefits]

Was your application eventually accepted, rejected, or is it still being considered?

- 1. APPLICATION ACCEPTED
- 3. APPLICATION STILL BEING CONSIDERED.....GO TO W250_4 BRANCHPOINT
- 5. APPLICATION REJECTED.....GO TO W250_4 BRANCHPOINT
- 8. DK.....GO TO W250_4 BRANCHPOINT
- 9. RF.....GO TO W250_4 BRANCHPOINT

END OF APPLICATION REJECTED BLOCK-5: VA NEW APPLICATION (W245_5 – W248_5)

BEGINNING OF (W232_13) APPLICATION ACCEPTED BLOCK-13: VA NEW APPLICATION
(W232_13 & W238_13 – W244_13)

W232_13

[BANNER: Veterans Administration Benefits]

What disability rating did you receive?

100 FULL DISABILITY

[BANNER: Veterans Administration Benefits]

What disability rating did you receive?

[INSTR: 100% MEANS FULL DISABILITY]

_____ %

DK

RF

W234_13

[BANNER: VA - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

In what year did you start receiving Veterans Administration benefits?

[INSTR: ENTER '9997' IF NOT YET RECEIVING BENEFITS.]

[BANNER: Veterans Administration Benefits]

In what year did you start receiving Veterans Administration benefits?

YEAR _____

9997 NOT YET RECEIVING BENEFITS.....GO TO W250_4 BRANCHPOINT

DK.....GO TO W238_13

RF.....GO TO W238_13

W233_13 BRANCHPOINT: IF YEAR AT W234_13 WAS MORE THAN 2 YEARS AGO, GO TO
W238_13

W233_13

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W238_13

[BANNER: VA - NEW APPLICATION (BY RE-IW R): APPLICATION accepted

Are you still receiving benefits from the Veterans Administration?

[BANNER: Veterans Administration Benefits]

Are you still receiving benefits from the Veterans Administration?

1. YES
5. NO
6. DENIES RECEIVING BENEFITS.....GO TO W249_4 BRANCHPOINT
8. DK.....GO TO W249_4 BRANCHPOINT
9. RF.....GO TO W249_4 BRANCHPOINT
1. YES
5. NO
6. I DID NOT RECEIVE BENEFITS.....GO TO W249_4 BRANCHPOINT
8. DK.....GO TO W249_4 BRANCHPOINT
9. RF.....GO TO W249_4 BRANCHPOINT

W239_13

[BANNER: VA - NEW APPLICATION (BY RE-IW R): APPLICATION accepted

IF R IS STILL RECEIVING VETERANS BENEFITS (W238_13=1):

How much did you receive from the Veterans Administration program last month?

OTHERWISE:

How much did you receive from the Veterans Administration program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Veterans Administration Benefits]

IF R IS STILL RECEIVING VETERANS BENEFITS (W238_13=1):

How much did you receive from the Veterans Administration program last month?

OTHERWISE:

How much did you receive from the Veterans Administration program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_13 BRANCHPOINT

DK

RF

W240_13 -

W242_13

Question text: (Thinking about the amount you received from the Veterans Administration program last month:)

Did it amount to a total of less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 1Up1Down

BREAKPOINTS: \$500, \$1,000, \$1,500

ENTRY POINT: \$1,000

Question text: Thinking about the amount you received from the Veterans Administration program last month:

Did it amount to a total of less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 1Up1Down

BREAKPOINTS: \$500, \$1,000, \$1,500

ENTRY POINT: \$1,000

W244_13 BRANCHPOINT: IF R IS STILL RECEIVING VETERANS BENEFITS (W238_13=1), GO TO W250_4 BRANCHPOINT

W244_13

[BANNER: VA - NEW APPLICATION (BY RE-IW R): APPLICATION accepted

In what year did the benefits stop?

[BANNER: Veterans Administration Benefits]

In what year did the benefits stop?

YEAR_____

DK.....GO TO W250_4 BRANCHPOINT

RF.....GO TO W250_4 BRANCHPOINT

W243_13 BRANCHPOINT: IF YEAR AT W244_13 WAS MORE THAN 2 YEARS AGO, GO TO W250_4 BRANCHPOINT

W243_13

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

*END OF APPLICATION ACCEPTED BLOCK-13: VA NEW APPLICATION
(W232_13 & W233_13 – W244_13)*

W250_4 BRANCHPOINT: IF R DID NOT REPORT APPLYING TO WORKERS' COMPENSATION PROGRAM (M037 NOT 3), GO TO W250_5 BRANCHPOINT

BEGINNING OF (W250_4) WHEN APPLY BLOCK-4: WORKERS' COMPENSATION NEW APPLICATION (W249_4 – W252_4)

W250_4

[BANNER: WC - When apply]

(Not including those disability benefits we have already discussed,) In what year did you first apply for disability benefits from the Workers' Compensation disability program?

[BANNER: WORKERS' COMPENSATION]

Not including those disability benefits we have already discussed, In what year did you first apply for disability benefits from the Workers' Compensation disability program?

YEAR_____

DK.....GO TO W252_4 BRANCHPOINT

RF.....GO TO W252_4 BRANCHPOINT

W249_4 BRANCHPOINT: IF YEAR AT W250_4 WAS MORE THAN 2 YEARS AGO, GO TO W252_4 BRANCHPOINT

W249_4

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W252_4 BRANCHPOINT: IF {MONTH and YEAR} R FIRST APPLIED FOR WORKERS' COMP BENEFITS (per {W249_4/W250_4}) IS {ON OR AFTER} R's LAST IW DATE (per {Z092/Z093}), GO TO M043

W252_4

[BANNER: WC - When apply]

We are interested in your first application since R's LAST IW MONTH, YEAR.

In what year did you first apply for benefits from the Workers' Compensation disability program since that time?

[INSTR: ENTER '9997' IF R HAS NOT APPLIED SINCE LAST IW.]

We are interested in your first application since R's LAST IW MONTH, YEAR.

In what year did you first apply for benefits from the Workers' Compensation disability program since that time?

YEAR _____

9997 HAVE NOT APPLIED SINCE R's LAST IW MONTH, YEAR.....GO TO W250_5

BRANCHPOINT

DK.....GO TO M043

RF.....GO TO M043

W251_4 BRANCHPOINT: IF YEAR AT W252_4 WAS MORE THAN 2 YEARS AGO, GO TO M043

W251_4

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

*END OF WHEN APPLY BLOCK-4: WORKERS' COMPENSATION NEW APPLICATION
(W249_4 – W252_4)*

M043

[BANNER: Workers' Compensation]

Was your application accepted, rejected, or is it still being considered?

1. APPLICATION ACCEPTED.....GO TO M044
3. APPLICATION STILL BEING CONSIDERED.....GO TO W250_5 BRANCHPOINT
5. APPLICATION REJECTED
8. DK.....GO TO W250_5 BRANCHPOINT
9. RF.....GO TO W250_5 BRANCHPOINT

*BEGINNING OF (W245_6) APPLICATION REJECTED BLOCK-6: WORKERS' COMPENSATION NEW
APPLICATION (W245_6 – W248_6)*

W245_6

[BANNER: WC - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

Did you appeal or apply again later?

[BANNER: Workers' Compensation]

Did you appeal or apply again later?

- 1. YES
- 5. NO.....GO TO W250_5 BRANCHPOINT
- 8. DK.....GO TO W250_5 BRANCHPOINT
- 9. RF.....GO TO W250_5 BRANCHPOINT

W247_6

[BANNER: WC - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

In what year did you last appeal or apply for benefits?

[BANNER: Workers' Compensation]

In what year did you last appeal or apply for benefits?

YEAR _____

- DK.....GO TO W248_6
- RF.....GO TO W248_6

W246_6 BRANCHPOINT: IF YEAR AT W247_6 WAS MORE THAN 2 YEARS AGO, GO TO W248_6

W246_6

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W248_6

[BANNER: WC - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

Was your application eventually accepted, rejected, or is it still being considered?

[BANNER: Workers' Compensation]

Was your application eventually accepted, rejected, or is it still being considered?

- 1. APPLICATION ACCEPTED
- 3. APPLICATION STILL BEING CONSIDERED.....GO TO W250_5 BRANCHPOINT
- 5. APPLICATION REJECTED.....GO TO W250_5 BRANCHPOINT
- 8. DK.....GO TO W250_5 BRANCHPOINT
- 9. RF.....GO TO W250_5 BRANCHPOINT

END OF APPLICATION REJECTED BLOCK-6: WORKERS' COMPENSATION NEW APPLICATION (W245_6 – W248_6)

M044

[BANNER: Workers' Compensation]

What disability rating did you receive?

- 1. 100% PERMANENT.....GO TO W234_14
- 2. PARTIAL PERMANENT
- 3. 100% TEMPORARY.....GO TO M047
- 4. PARTIAL TEMPORARY.....GO TO M048
- 7. OTHER (SPECIFY) M045S _____ GO TO W234_14
- 8. DK.....GO TO W234_14
- 9. RF.....GO TO W234_14

M045S

M046

[INSTR: PROBE IF NECESSARY REFERRING TO WORKERS' COMPENSATION:What percentage did you receive?]

[BANNER: Workers' Compensation]

What percentage did you receive?

[INSTR: ENTER WHOLE NUMBERS ONLY, 1-100.]

_____ %

DK
RF

M047 BRANCHPOINT: GO TO W234_14

M047

[INSTR: PROBE IF NECESSARY REFERRING TO WORKERS' COMPENSATION:For how many years?]

0-50 YEARS

[BANNER: Workers' Compensation]

For how many years?

[INSTR: ENTER WHOLE NUMBERS ONLY, 0-50 YEARS.]

YEARS_____

DK

RF

M048 BRANCHPOINT: GO TO W234_14

M048

[BANNER: Workers' Compensation]

[INSTR: PROBE IF NECESSARY REFERRING TO WORKERS' COMPENSATION:What percentage did you receive?]

[BANNER: Workers' Compensation]

What percentage did you receive?

[INSTR: ENTER WHOLE NUMBERS ONLY, 1-100.]

_____%

DK

RF

M049

[BANNER: Workers' Compensation]

[INSTR: PROBE IF NECESSARY REFERRING TO WORKERS' COMPENSATION:For how many years?]

0-50 YEARS

[BANNER: Workers' Compensation]

For how many years?

[INSTR: ENTER WHOLE NUMBERS ONLY, 0-50 YEARS.]

YEARS _____

DK

RF

*BEGINNING OF (W234_14) APPLICATION ACCEPTED BLOCK-14: WORKERS' COMPENSATION
NEW APPLICATION (W234_14 – W244_14)*

W234_14

[BANNER: WC - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

In what year did you start receiving Workers' Compensation benefits?

[INSTR: ENTER '9997' IF NOT YET RECEIVING BENEFITS.]

[BANNER: Workers' Compensation]

In what year did you start receiving Workers' Compensation benefits?

YEAR _____

9997 NOT YET RECEIVING BENEFITS.....GO TO W250_5 BRANCHPOINT

DK.....GO TO W238_14

RF.....GO TO W238_14

W233_14 BRANCHPOINT: IF YEAR AT W234_14 WAS MORE THAN 2 YEARS AGO, GO TO
W238_14

W233_14

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W238_14

[BANNER: WC - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

Are you still receiving benefits from Workers' Compensation?

[BANNER: Workers' Compensation]

Are you still receiving benefits from Workers' Compensation?

1. YES
5. NO
6. DENIES RECEIVING BENEFITS.....GO TO W249_5 BRANCHPOINT
8. DK.....GO TO W249_5 BRANCHPOINT
9. RF.....GO TO W249_5 BRANCHPOINT
1. YES
5. NO
6. I DID NOT RECEIVE BENEFITS.....GO TO W249_5 BRANCHPOINT
8. DK.....GO TO W249_5 BRANCHPOINT
9. RF.....GO TO W249_5 BRANCHPOINT

W239_14

[BANNER: WC - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

IF R IS STILL RECEIVING WORKERS' COMPENSATION BENEFITS (W238_14=1):

How much did you receive from the Workers' Compensation program last month?

OTHERWISE:

How much did you receive from the Workers' Compensation program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Workers' Compensation]

IF R IS STILL RECEIVING WORKERS' COMPENSATION BENEFITS (W238_14=1):
How much did you receive from the Workers' Compensation program last month?

OTHERWISE:
How much did you receive from the Workers' Compensation program the last month you received this benefit?

[DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_14 BRANCHPOINT

DK
RF

W240_14 -
W242_14

Question text: (Thinking about the amount you received from the Workers' Compensation program last month:)

Did it amount to less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 2Up1Down
BREAKPOINTS: \$500, \$1,000, \$1,500, \$2,200
ENTRY POINT: \$1,000

Question text: Thinking about the amount you received from the Workers' Compensation program last month:

Did it amount to less than \$____ per month, more than \$____ per month, or what?

PROCEDURE: 2Up1Down
BREAKPOINTS: \$500, \$1,000, \$1,500, \$2,200
ENTRY POINT: \$1,000

W244_14 BRANCHPOINT: IF R IS STILL RECEIVING WORKERS' COMPENSATION BENEFITS (W238_14=1), GO TO W250_5 BRANCHPOINT

W244_14

[BANNER: WC - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

In what year did the benefits stop?
[BANNER: Workers' Compensation]

In what year did the benefits stop?

YEAR_____

DK.....GO TO W250_5 BRANCHPOINT

RF.....GO TO W250_5 BRANCHPOINT

W243_14 BRANCHPOINT: IF YEAR AT W244_14 WAS MORE THAN 2 YEARS AGO, GO TO W250_5 BRANCHPOINT

W243_14

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

*END OF APPLICATION ACCEPTED BLOCK-14: WORKERS' COMPENSATION NEW APPLICATION
(W234_14 – W244_14)*

W250_5 BRANCHPOINT: IF R DID NOT REPORT APPLYING TO {A PUBLIC WELFARE DISABILITY PROGRAM or ANOTHER PROGRAM NOT LISTED} (M037 {NOT 4 and NOT 7}), GO TO M051 BRANCHPOINT

*BEGINNING OF (W250_5) WHEN APPLY BLOCK-5: OTHER PROGRAM NEW APPLICATION
(W249_5 – W252_5)*

W250_5

[BANNER: OTHER PROGRAM - When apply]

(Not including those disability benefits we have already discussed,) In what year did you first apply for disability benefits from the public welfare or other government disability program?

[BANNER: Other Government Disability Program]

Not including those disability benefits we have already discussed, In what year did you first apply for disability benefits from the public welfare or other government disability program?

YEAR_____

DK.....GO TO W252_5 BRANCHPOINT

RF.....GO TO W252_5 BRANCHPOINT

W249_5 BRANCHPOINT: IF YEAR AT W250_5 WAS MORE THAN 2 YEARS AGO, GO TO W252_5 BRANCHPOINT

W249_5

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

W252_5 BRANCHPOINT: IF {MONTH and YEAR} R FIRST APPLIED FOR OTHER GOVERNMENT PROGRAM DISABILITY BENEFITS (per {W249_5/W250_5}) IS {ON OR AFTER} R's LAST IW DATE (per {Z092/Z093}), GO TO M050

W252_5

[BANNER: OTHER PROGRAM - When apply]

We are interested in your first application since R's LAST IW MONTH, YEAR.

In what year did you first apply for benefits from the public welfare or other government disability program since that time?

[INSTR: ENTER '9997' IF R HAS NOT APPLIED SINCE LAST IW.]

We are interested in your first application since R's LAST IW MONTH, YEAR.

In what year did you first apply for benefits from the public welfare or other government disability program since that time?

YEAR_____

9997 HAVE NOT APPLIED SINCE R's LAST IW MONTH, YEAR.....GO TO M051

BRANCHPOINT

DK.....GO TO M050

RF.....GO TO M050

W251_5 BRANCHPOINT: IF YEAR AT W252_5 WAS MORE THAN 2 YEARS AGO, GO TO M050

W251_5

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

END OF WHEN APPLY BLOCK-5: OTHER PROGRAM NEW APPLICATION (W249_5 – W252_5)

M050

[BANNER: Other Government Disability Program]

Was your application accepted, rejected, or is it still being considered?

1. APPLICATION ACCEPTED.....GO TO W234_15
3. APPLICATION STILL BEING CONSIDERED.....GO TO M051 BRANCHPOINT
5. APPLICATION REJECTED
8. DK.....GO TO M051 BRANCHPOINT
9. RF.....GO TO M051 BRANCHPOINT

BEGINNING OF (W245_7) APPLICATION REJECTED BLOCK-7: OTHER PROGRAM NEW APPLICATION (W245_7 – W248_7)

W245_7

[BANNER: OTHER PROGRAM - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

Did you appeal or apply again later?

[BANNER: Other Government Disability Program]

Did you appeal or apply again later?

- 1. YES
- 5. NO.....GO TO M051 BRANCHPOINT
- 8. DK.....GO TO M051 BRANCHPOINT
- 9. RF.....GO TO M051 BRANCHPOINT

W247_7

[BANNER: OTHER PROGRAM - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

In what year did you last appeal or apply for benefits?

[BANNER:Other Government Disability Program]

In what year did you last appeal or apply for benefits?

YEAR _____

- DK.....GO TO W248_7
- RF.....GO TO W248_7

W246_7 BRANCHPOINT: IF YEAR AT W247_7 WAS MORE THAN 2 YEARS AGO, GO TO W248_7

W246_7

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W248_7

[BANNER: OTHER PROGRAM - NEW APPLICATION (BY RE-IW R): APPLICATION Rejected]

Was your application eventually accepted, rejected, or is it still being considered?

[BANNER: Other Government Disability Program]

Was your application eventually accepted, rejected, or is it still being considered?

- 1. APPLICATION ACCEPTED
- 3. APPLICATION STILL BEING CONSIDERED.....GO TO M051 BRANCHPOINT
- 5. APPLICATION REJECTED.....GO TO M051 BRANCHPOINT
- 8. DK.....GO TO M051 BRANCHPOINT
- 9. RF.....GO TO M051 BRANCHPOINT

END OF APPLICATION REJECTED BLOCK-7: OTHER PROGRAM NEW APPLICATION (W245_7 – W248_7)

BEGINNING OF (W234_15) APPLICATION ACCEPTED BLOCK-15: OTHER PROGRAM NEW APPLICATION (W234_15 – W244_15)

W234_15

[BANNER: OTHER PROGRAM - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

In what year did you start receiving benefits from this public welfare or other government program?

[INSTR: ENTER '9997' IF NOT YET RECEIVING BENEFITS.]

[BANNER: Other Government Disability Program]

In what year did you start receiving benefits from this public welfare or other government program?

YEAR _____

- 9997 NOT YET RECEIVING BENEFITS.....GO TO M051 BRANCHPOINT
- DK.....GO TO W238_15
- RF.....GO TO W238_15

W233_15 BRANCHPOINT: IF YEAR AT W234_15 WAS MORE THAN 2 YEARS AGO, GO TO W238_15

W233_15

What month was that?

- 1. JAN
- 2. FEB
- 3. MAR
- 4. APR
- 5. MAY
- 6. JUN
- 7. JUL
- 8. AUG
- 9. SEP
- 10. OCT
- 11. NOV
- 12. DEC
- 98. DK
- 99. RF

W238_15

[BANNER: OTHER PROGRAM - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

Are you still receiving benefits from the public welfare or other government program?

[BANNER: Other Government Disability Program Benefits]

Are you still receiving benefits from the public welfare or other government program?

- 1. YES
- 5. NO
- 8. DK.....GO TO M051 BRANCHPOINT
- 9. RF.....GO TO M051 BRANCHPOINT

W239_15

[BANNER: OTHER PROGRAM - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

IF R IS STILL RECEIVING ANY OTHER PROGRAM BENEFITS (W238_15=1):

How much did you receive from the public welfare or other government program last month?

OTHERWISE:

How much did you receive from the public welfare or other government program the last month you received this benefit?

(Do not count benefits paid to your spouse or children.)

[INSTR: DO NOT PROBE DK/RF.]

[BANNER: Other Government Disability Program Benefits]

IF R IS STILL RECEIVING ANY OTHER PROGRAM BENEFITS (W238_15=1):

How much did you receive from the public welfare or other government program last month?

OTHERWISE:

How much did you receive from the public welfare or other government program the last month you received this benefit?

[INSTR: DO NOT COUNT BENEFITS PAID TO YOUR SPOUSE OR CHILDREN.]

\$ _____ .00 GO TO W244_15 BRANCHPOINT

DK

RF

W240_15 -

W242_15

Question text: (Thinking about the amount you received from the public welfare or other government program last month:)

Did it amount to less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$150, \$400, \$500, \$600

ENTRY POINT: \$400

Question text: Thinking about the amount you received from the public welfare or other government program last month:

Did it amount to less than \$_____ per month, more than \$_____ per month, or what?

PROCEDURE: 2Up1Down

BREAKPOINTS: \$150, \$400, \$500, \$600

ENTRY POINT: \$400

W244_15 BRANCHPOINT: IF R IS STILL RECEIVING ANY OTHER DISABILITY BENEFITS (W238_15=1), GO TO M051 BRANCHPOINT

W244_15

[BANNER: OTHER PROGRAM - NEW APPLICATION (BY RE-IW R): APPLICATION accepted]

In what year did the benefits stop?

[BANNER: Other Government Disability Program Benefits]

In what year did the benefits stop?

YEAR_____

DK.....GO TO M051 BRANCHPOINT

RF.....GO TO M051 BRANCHPOINT

W243_15 BRANCHPOINT: IF YEAR AT W244_15 WAS MORE THAN 2 YEARS AGO, GO TO M051 BRANCHPOINT

W243_15

What month was that?

1. JAN
2. FEB
3. MAR
4. APR
5. MAY
6. JUN
7. JUL
8. AUG
9. SEP
10. OCT
11. NOV
12. DEC
98. DK
99. RF

*END OF APPLICATION ACCEPTED BLOCK-15: OTHER PROGRAM NEW APPLICATION
(W234_15 – W244_15)*

M051 BRANCHPOINT: IF R DID NOT REPORT AT R's LAST IW THAT WAS WORKING (Z123 NOT 1) and DID NOT REPORT THAT IS WORKING NOW (J020 NOT 1), GO TO M056 (M1 ASSIST)

M051

Since R's LAST IW MONTH, YEAR, have you had any injuries at work that required special medical attention or treatment or interfered with your work activities?

1. YES
5. NO.....GO TO M056 (M1 ASSIST)
7. NO JOB.....GO TO M056 (M1 ASSIST)
8. DK.....GO TO M056 (M1 ASSIST)
9. RF.....GO TO M056 (M1 ASSIST)

M052

How many times have you been injured on the job since R's LAST IW MONTH, YEAR?

NUMBER OF TIMES_____

DK

RF

M053

On what date did your (most recent) injury happen?

MONTH:

1. JAN

2. FEB

3. MAR

4. APR

5. MAY

6. JUN

7. JUL

8. AUG

9. SEP

10. OCT

11. NOV

12. DEC

98. DK

99. RF

M054

DAY_____

DK

RF

M055

YEAR_____

M056

M1 ASSIST

INSTR: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION M1 -- RE-IW
DISABILITY?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL OF THE TIME

4. THE SECTION WAS DONE BY A PROXY REPORTER

GO TO SECTION N