

Evaluation Report Covering Service-Connected Disability

FINAL REPORT

U S C E N S U S B U R E A U
Helping You Make Informed Decisions

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EXECUTIVE SUMMARY

Test Objective

- The objective for including the topic of military service-connected disability rating in the 2006 American Community Survey (ACS) Content Test was to test whether the ACS could provide useful estimates of civilian veterans by the disability-rating categories of the Department of Veterans Affairs (VA).
- The VA uses a priority system to allocate health care services among veterans enrolled in its programs. An enrollee's service-connected disability rating is a key factor in determining the person's eligibility and order of priority for health-care services. To guide them in estimating the demand for their health care services, the VA needs data on the distribution of the veteran population by level of disability rating, and they need to be able to relate this information to information about other characteristics such as income. The desired information on ratings requires a degree of detail expressed by the following six categories: No rating; 0 percent rating (which is different from the category "No rating"); 10 or 20 percent rating; 30 or 40 percent rating; 50 or 60 percent rating; 70 percent or higher rating.

Methodology

- Data on this topic are not collected in the existing ACS. The two versions of the item in the Content Test represent different approaches to collecting the data. We tested whether either or both versions could successfully collect the required information on the topic, and, if so, which could do it better. Each version had two parts: the *rating status* part asked whether the respondent had a service-connected disability rating; the *rating percent* part asked respondents who had a rating to quantify it. These parts are the necessary components of the identification of a respondent's disability-rating level.
- The versions used the same question for rating status. For rating percent, Version 1 used a separate question that asked the respondent to classify their rating into one of five ranges of ratings; Version 2 indirectly asked the respondent to write in the rating in an open-ended format.
- The topic was included in the Content Followup Survey (CFU). The CFU questions were hybrids of the questions for the above versions. The CFU status question was the same as that for Version 1. The CFU ratings question was similar to that for Version 2, but, besides using an open-ended format, it included additional instructions to the respondent.

Research Questions and Results

The research questions and the results drawn from an analysis of the results are listed below (also see information pages in Appendix A).

- **Research Question 1:** Which version produces service-connected disability-rating status and rating-percent estimates that are closer to statistics produced from administrative records and from survey data ? **Conclusion:** Estimates of service-connected disability-rating status from Version 1 are much closer than those of version 2 to administrative data from the VA's Compensation and Pension (C&P) database. The status estimates from Version 2, in fact, are so much higher than the administrative counts that Version 2, on this basis alone, cannot be considered as being capable of producing useable data on either rating status or rating percent, and hence on rating level. Rating-status and rating-percent estimates from Version 1 are reasonably close to corresponding C&P benchmarks; they are also reasonably comparable with estimates from the 2005 Veterans Supplement of the Current Population Survey (CPS).

- **Research Question 2:** Which version results in more reliable measures of service-connected disability status and ratings? **Conclusion:** The adjusted simple response variance for rating status is higher in Version 2 than in Version 1, indicating that Version 1 is more reliable. The adjusted simple response variances associated with the service-connected disability rating-percent categories are not statistically different between versions.

- **Research Question 3:** Which version results in the least amount of item non-response? **Conclusion:** The item nonresponse rate for rating status was lower in Version 1 than in Version 2. The item nonresponse rate for rating percent was not statistically different between versions. (The nonresponse rate for the corresponding ratings data from the Current Population Survey (CPS) in 2005 was comparable to the results for Version 1 from the Content Test.)

- **Conclusion:** Version 1 met the criteria for each of the three research questions for both the rating status and rating percent components. Version 2 failed to meet the criteria for the first research question; the failure was severe enough to remove it from any further consideration for use in the ACS. Version 1's results were reasonably, if not ideally, comparable with benchmark data from VA administrative data and from the CPS. The Content Test results indicate that Version 1 is capable of producing useful data on service-connected disability-rating levels.

1. BACKGROUND

1.1 Motivation for the 2006 ACS Content Test

In January through March of 2006, the American Community Survey (ACS) conducted the first test of new and modified content since the ACS reached full implementation levels of data collection. The results of that testing will determine the content for the 2008 ACS. The year 2008 marks the first year of a three-year aggregated data product that includes data from the same year as the 2010 decennial census (2008 - 2010). Similarly, 2008 is the midpoint year for the first five-year data product that includes data from 2010 (2006-2010). Given the significance of the year 2008, the ACS committed to a research program during 2006 that will result in final content determination in time for the 2008 ACS. This research is the 2006 ACS Content Test.

Through the Office of Management and Budget (OMB) Interagency Committee on the ACS, the Census Bureau included subject matter experts and key data users from other federal agencies in identifying questions for inclusion in the Content Test. In general the Content Test evaluated alternatives for questions which showed some indication of a problem, for example, high missing data rates, estimates which differed systematically from other sources of the same information, or high simple response variance as measured in the Census 2000 Content Reinterview survey. In addition, the Content Test also included testing of three new topics proposed by other federal agencies for inclusion in the ACS.

To meet the primary objective of the 2006 ACS Content Test, analysts evaluated changes to question wording, response categories, instructions, or examples relative to the current version of the questions. Additionally, the Content Test design reflected two secondary objectives. One of the secondary objectives addressed form design alternatives for the basic demographic section of the form. The second addressed the content of the questionnaire mailing package. Results indicated no interaction between either of the two secondary objectives and the first objective addressing changes made to questions. Thus, this report will only address testing specific to the first objective - testing of alternative questions, response categories, etc.. Specifically, this report discusses *military service status*.

1.2 Previous Testing or Analysis for Service-Connected Disability

The Department of Veterans Affairs (VA) is the major stakeholder for veterans data from the American Community Survey (ACS). The objective of the military service-connected disability topic in the 2006 American Community Survey (ACS) Content Test was to test new questions about VA service-connected disability-rating *status* and disability-rating *percent*. These questions are necessary to classify veterans by VA disability-rating level. This classification has six categories: No rating; 0 percent rating (which is different from the category “No rating”); 10 or 20 percent rating; 30 or 40 percent rating; 50 or 60 percent rating; 70 percent or higher rating. The VA needs information on this topic at this level of detail, cross-classified by demographic information such as income, to guide them in estimating the demand for their health care services. The VA currently has administrative data classifying veterans by ratings in its Compensation and Pension (C&P) database, but these data do not provide the necessary cross-classifications. The ACS would provide these cross-classifications.

For this reason, the VA requested that disability-rating questions be tested in the 2006 ACS Content Test. For more information about the VA's request, see the following:

- Issue Brief for Service-Connected Disability Status of Veterans of Active-Duty Military, in Appendix B.
- Document from the Department of Veteran Affairs recommending changes to the 2008 American Community Survey, in Appendix C.
- Document from the Department of Veteran Affairs presenting the legal basis for proposing a question on service-connected disability status, in Appendix D.

With the assistance of the Census Bureau, the VA developed questions that prospectively met their goals for the Content Test. The questions were then subjected to a cognitive testing process. The process and its results are described in Appendix E.

The cognitive testing produced two versions of the questions for the Content Test. These are displayed in the boxes below. Version 1 (included on the control questionnaire) consisted of two direct inquiries: the first asked whether the respondent had a service-connected disability rating; the second asked the respondent to classify their rating in one of five ranges of rating levels. Version 2 (included on the test questionnaire) consisted of one direct inquiry and one indirect inquiry: the former asked whether the respondent had a service-connected disability rating; the latter asked the respondent to write in the level of the rating.

Version 1

27 a. Does this person have a VA service-connected disability rating?

☐ Yes (such as 0%, 10%, 20%, ... , 100%)

☐ No → *SKIP* to question 28

b. What is this person's service-connected disability rating?

☐ 0 percent

☐ 10 to 20 percent

☐ 30 to 40 percent

☐ 50 to 60 percent

☐ 70 percent or higher

Version 2

27 Does this person have a VA service-connected disability rating?

☐ Yes → _____ %
RATING (0%, 10%, 20%, ... , 100%)

☐ No

2. RESEARCH QUESTIONS AND SELECTION CRITERIA

2.1 Research Question 1: Which version produces estimates that are closer to statistics produced from other sources, such as VA administrative records and CPS survey data? **Selection Criteria:** The version that produces estimates that are closest to estimates from administrative records and other sources.

2.2 Research Question 2: Which version results in more reliable measures of service-connected disability status and ratings? **Selection Criteria:** The version with the lowest adjusted simple response variances.

2.3 Research Question 3: Which version results in the least amount of item non-response?
Selection Criteria: The version with the lowest item nonresponse rates.

3. METHODOLOGY

3.1 Data Collection Methods

3.1.1 The 2006 ACS Content Test data collection

The 2006 ACS Content Test consisted of a national sample of approximately 62,900 residential addresses in the contiguous United States. (The sample universe did not include Puerto Rico, Alaska and Hawaii.) To meet the primary test objective of evaluating question wording changes, approximately half of the sample addresses were assigned to a test group (31,450) and the other half to a control group (31,450). For the topics already covered in the ACS, the test group included the proposed alternative versions of the questions, and the control group included the current version of the questions as asked on the ACS. Both the test and control questionnaires included three new topics not currently on the ACS. Both test and control included the three new topics to keep context and questionnaire length consistent between the two versions.

The ACS Content Test used a similar data collection methodology as the current ACS, though cost and time constraints resulted in some deviations. Initially, the ACS collects data by mail from sampled households, following a mailing strategy geared at maximizing mail response (i.e., a pre-notice letter, an initial questionnaire packet, a reminder postcard, and a replacement questionnaire packet). The Content Test implemented the same methodology, mailing each piece on the same dates as the corresponding panel in the ACS. However, the Content Test did not provide a toll-free number on the printed questionnaires for respondents to call if they had questions, as the ACS does. The decision to exclude this service in the Content Test primarily reflects resource issues in developing the materials needed to train and implement the operation for a one-time test. However, excluding this telephone assistance allows us to collect data that reflect the respondent's interpretation and response without the aid of a trained Census Bureau interviewer.

The ACS follows-up with mail nonrespondents first by Computer Assisted Telephone Interviewing (CATI) if a phone number is available, or by Computer Assisted Personal-visit Interviewing (CAPI) if the unit cannot be reached by mail or phone. For cost purposes, the ACS subsamples the mail and telephone nonrespondents for CAPI interviewing. In comparison, the Content Test went directly to CAPI data collection for mail nonrespondents, dropping the CATI data collection phase in an effort to address competing time and resource constraints for the field data collection staff. While skipping the CATI phase changes the data collection methods as compared to the ACS, eliminating CATI allowed us to meet the field data collection constraints while also maintaining the entire mail nonrespondent universe for possible CAPI follow-up. Using CATI alone for follow-up would have excluded households for whom we do not have a phone number.

The ACS also implements an edit procedure on returned mail questionnaires, identifying units for follow-up who provided incomplete information on the form, or who reported more than five people living at the address. (The ACS questionnaire only has space to collect data for five people.) This is called the Failed Edit Follow-Up operation (FEFU). The ACS calls all households identified as part of the FEFU edit to collect the remaining information via a CATI operation. The Content Test excluded this follow-up operation in favor of a content reinterview, called the Content Follow-Up (CFU). The CFU also contacts households via CATI but the CFU serves as a method to measure response error, providing critical evaluative information. The CFU operation included all households who responded by mail or CAPI and for whom we had a phone number. More information about the CFU operation follows below.

The Content Test mailed questionnaires to sampled households around December 28, 2005, coinciding with the mailing for the ACS January 2006 panel. The Content Test used an English-only mail form but the automated instruments (both CAPI and CFU) included both English and Spanish translations. Beginning February 2006, a sample of households that did not respond by mail was visited by Census Bureau field representatives in attempt to collect the data. The CAPI operations ended March 2, 2006.

3.1.2 Content Follow-Up data collection

The CFU reinterview, conducted by the Census Bureau's three telephone centers, provided a method for measuring response error. About 2 weeks after receiving the returned questionnaire or completed CAPI interview, the responding unit entered the CFU operation. Telephone staff completed the CFU interviews between January 17 and March 17, 2006. At the first contact with a household, interviewers asked to speak with the original respondent. If that person was not available, interviewers scheduled a callback at a time when the household member was expected to be home. If at the second contact we could not reach the original respondent, interviewers completed the interview with another adult household member.

The CFU reinterview did not replicate the full ACS interview. Rather, the CFU used the roster and basic demographic information from the original interview and only asked questions specific to the analytical needs of the Content Test. Reinterview questions were of two general formats: the same question as asked in the original interview (in some cases, modified slightly for a CATI interview), or a different set of questions providing more detail than the question(s) asked in the original interview for the same topic. For topics in which the CFU asked the same question as the original interview, the CFU asked the test or control version of the question based on the original treatment. For these cases, the goal was to measure the reliability of the answers – how often we obtained the same answer in the CFU as we did in the original mail or CAPI data collection. For topics using a different question or set of questions than the original interview, we asked the same detailed series of questions regardless of the original treatment condition. Generally, these questions were more numerous than what we could ask in the ACS. In some cases the questions came from another existing survey, for example, for labor force, we asked the labor force questions from the Current Population Survey questions. In other cases the CFU asked additional probing questions based on prior testing results, such as for health insurance. For these topics, the goal was to measure how close the original answers were to the more detailed CFU answers.

3.2 Sample Design

The sample design for the ACS Content Test consisted of a multi-stage design, with the first stage following the Census 2000 Supplementary Survey (C2SS) design for the selection of Primary Selection Units (PSUs) defined as counties or groups of counties. The first stage selection of PSUs resulted in 413 PSUs or approximately 900 counties being selected.

Within sampled PSUs, households were stratified into high and low response strata based on tract-level mail response rates to the Census 2000 long form and a stratified systematic sample of households was selected. The strata were defined such that the high response stratum contained 75 percent of the housing units that reside in tracts with the highest mail response rate. The balance of the tracts was assigned to the low response stratum. To achieve similar expected number of mail returns for the high and low response strata, 55 percent of the sample was allocated to the low response strata and 45 percent to the high response strata.

A two-stage sampling technique was used to help contain field costs for CAPI data collection. The initial sample of PSUs was sorted by percentage of foreign-born population since the majority of that target population responds via CAPI. At least one item undergoing testing in the content test required an adequate sample of this population. The 20 PSUs with the highest percentage of foreign-born population were included with certainty and the remaining PSUs were sampled at a rate of 1 in 3. For the second stage, mail nonresponding households were sampled at a rate of 1 in 2 within the top 20 PSUs and at a sampling rate of 2 in 3 within the remaining PSUs. The final design designated 151 PSUs be included in the CAPI workload.

In the majority of PSUs, we assigned cases to both the control and test groups. To maintain field data collection costs and efficiencies, PSUs with an expected CAPI workload of less than 10 sampled addresses had all of their work assigned to only one treatment (either control or test). The PSUs were allocated to the two groups such that the aggregated PSU characteristics between the two groups are similar for employment, foreign born, high school graduates, disabled, poverty status, tenure, and Hispanic origin. For more information on the 2006 ACS Content Test sample design, see Asiala (2006).

There was no sampling for CFU. A CFU interview was attempted for all responding households to the Content Test for which we had a phone number.

3.3 Methodology Specific to the Research Questions

The questions about veterans for the Content Test consisted of revisions to corresponding questions in the existing battery of ACS veteran questions, as well as new questions. The VA service-connected disability-rating questions are new questions. Figure 1 presents a side-by-side comparison of Version 1 and Version 2 from the control and test self-administered mail-out questionnaires. In analyzing the results, we compared the versions by their nonresponse rates, response distributions, and differences from the CFU results.

Figure 1. Version 1 and Version 2 Mail Questions

<p>27 a. Does this person have a VA service-connected disability rating?</p> <p><input type="checkbox"/> Yes (such as 0%, 10%, 20%, ... , 100%)</p> <p><input type="checkbox"/> No → <i>SKIP to question 28</i></p> <p>b. What is this person's service-connected disability rating?</p> <p><input type="checkbox"/> 0 percent</p> <p><input type="checkbox"/> 10 to 20 percent</p> <p><input type="checkbox"/> 30 to 40 percent</p> <p><input type="checkbox"/> 50 to 60 percent</p> <p><input type="checkbox"/> 70 percent or higher</p>	<p>27 Does this person have a VA service-connected disability rating?</p> <p><input type="checkbox"/> Yes → _____ % RATING (0%, 10%, 20%, ... , 100%)</p> <p><input type="checkbox"/> No</p>
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The Content Test consisted of two phases: an interview survey and a reinterview survey of each person in the sample. Figure 2 presents the questions used in the Content Followup (Reinterview) Survey (CFU). These questions were intended to measure the response bias and response variance in the results from both versions in the interview phase. To make these measurements, we compared simple response variances. For the analysis, we used SAS datasets containing all the observations from Version 1, Version 2, and the reinterview survey. These datasets included the merged observations from the interview and reinterview surveys for each individual in the study.

Figure 2. CFU Questions

<p>Q22a. Does this person have a VA service-connected disability rating?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No - Skip out</p> <p>Q22b. What is this persons service-connected disability rating?</p> <p>_____ % Rating</p>

4. LIMITATIONS

4.1 General Content Test and Content Follow Up Limitations

As noted in section 3.1, Data Collection Methods, the Content Test maintained the same general mail data collection methodology as the ACS, but differed in the mail nonresponse follow-up operations. In general the deviations did not impact the validity of the results, and in many cases increased the effectiveness of the testing. However, some aspects of the Content Test implementation should be considered in evaluating the data.

- As noted, the Content Test did not include CATI data collection in order to meet field data collection constraints. While the design of the Content Test allowed all sampled housing units an opportunity to participate even without CATI, questions administered differently over the phone did not get the benefit of a full CATI operation (though some of the CAPI interviews actually do occur by phone). However, since only ten percent of ACS data is collected by CATI and CATI interviewers are trained to help respondents understand question intent and response categories, overall ACS data quality should not suffer when questions are implemented using CATI.
- Though the test design required that field interviewers work only control or only test cases, interviewers in both conditions worked regular ACS production interviews at the same time they completed the Content Test cases. By design the control instrument very closely replicated the ACS production instrument, only differing in the addition of the three newly proposed topics. As a result, interviewers in the test condition had to learn and use two very different instruments, while control interviewers used basically the same instrument between their Content Test cases and ACS production. Thus, test interviewers experienced more challenges in completing their overall caseload. Interviewer debriefing suggested that test interviewers had some difficulty dealing with the two very different instruments simultaneously which may have some impact on the administration of the test version.
- On the first day of CFU interviewing, we discovered a usability problem with the CFU instrument. Left unaddressed, the usability problem could have potentially impacted comparisons between the Content Test and CFU responses when looking specifically at gross difference rate or simple response variance calculations. However, we immediately implemented two steps to mitigate any data problems -- a special instruction sheet to remind interviewers about how to avoid the potential problem and a procedure to report any problems to headquarters for repair. Interviewers followed the instructions and reported 90 cases to us. Post-collection processing corrected all reported errors, though it is possible that some cases went unreported.
- The CFU universe did not include non-telephone households and vacant housing units. This only affects those question topics included in the CFU study that are related to the non-telephone household or vacant universes.

4.2 Limitations Specific to Service-Connected Disability

Data from the 2006 ACS Content Test are limited to the household population: that is, they exclude the population living in institutions (such as nursing homes), military barracks, military ships, and other group quarters. The test covered only the stateside population, meaning that active duty military personnel overseas were not included. The exclusion of people in group quarters and overseas military personnel limits the scope of the accuracy of the estimates.

Also, for the purposes of the content test, the universe for the *service-connected disability* questions was limited to civilian veterans 18 years old and over. This population is determined by responses to the “on active duty in the past” category of the *military service status* question,

which is asked before the *service-connected disability* questions. As the report on the military service-status question showed¹, a significantly higher percentage of people answered “on active duty in the past” in the test version than in the control version. Therefore, the population eligible for the *service-connected disability* questions was different between Version 1 and Version 2.

5. RESULTS

5.1 Response to the Content Test and Content Follow-Up

Control and test treatments groups obtained equivalent response rates overall, and for each mode of collection. Similarly, response to the Content Test is comparable to response for the production ACS.

The table below gives the weighted response rates for each data collection operation and a test of differences between the control and test groups. The overall response rate reflects the final response to the initial data collection (mail and CAPI only). There were no significant differences between response rates for the control and test groups. Note that the denominator for each calculation included only eligible cases for each mode.

Table 1. Content Test Response Rates, Control vs. Test

Response Rate	Total (%)	Control (%)	Test (%)	Difference (%)	Margin of Error (%)	Significant
Overall response rate	95.7	95.8	95.5	-0.3	± 0.9	No
Mail response rate	51.3	51.5	51.2	-0.3	± 2.2	No
CAPI response rate	92.4	92.6	92.1	-0.4	± 1.7	No
CFU response rate	76.2	75.9	76.4	0.5	± 1.6	No

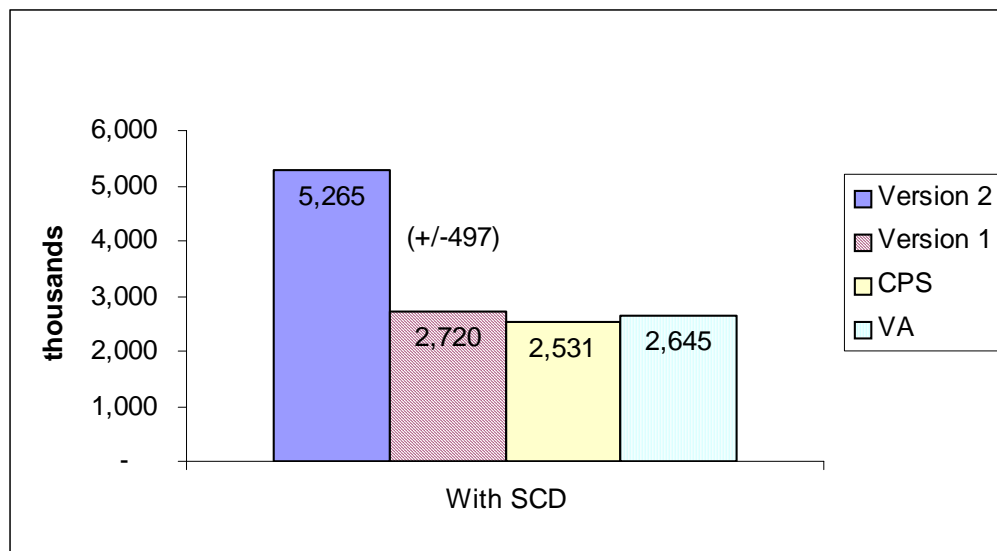
5.2 Which version produces estimates that are closer to statistics produced from other sources, such as VA administrative records and CPS survey data?

a.)Service-connected disability-rating status: Figure 3 shows results from both Content Test versions of the question for service-connected disability-rating status, along-side comparable figures from VA’s Compensation and Pension administrative data and the 2005 Veterans Supplement of the Current Population Survey (CPS). In evaluating these comparisons, it is important to remember that the Content Test data have not been edited, imputed for, adjusted for unit nonresponse, or benchmarked to population controls – drawbacks that increase the uncertainty in the comparisons. Nevertheless, if used cautiously, the comparisons are of considerable value in establishing some clear areas of what is reasonable, and what is not, in

¹2006 ACS Content Test Evaluation Report Covering Military Service Status

assessing the quality of the Content Test results, even if there is a large murky area between the two.

Figure 3. Service-Connected Disability Status

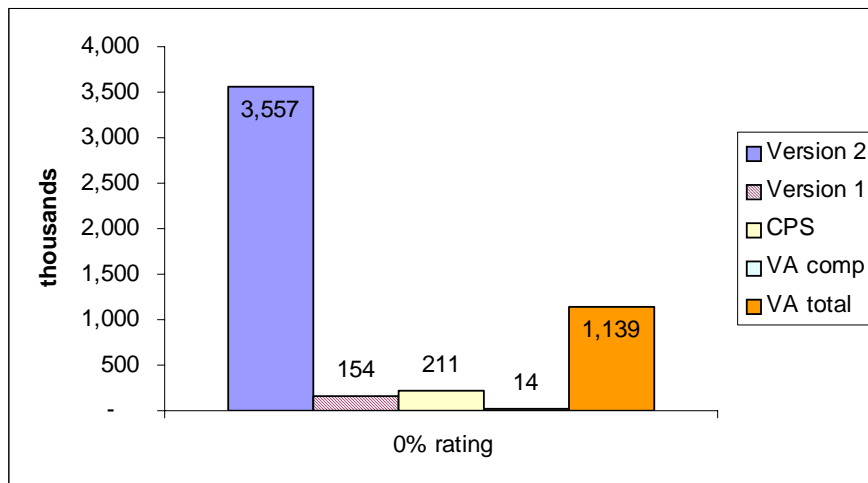


The graph shows that the results from Version 1 are somewhat close to the VA and CPS estimates, while results for Version 2 are considerably distant. The results cannot rule out the reasonableness of the Version 1 results. On the other hand, the Version 2 results are so different from the benchmark data that they make it impossible to argue in good faith that Version 2 produced useable or reasonable data on disability-rating status. Since such estimates are a necessary component of calculating disability-rating levels – the paramount goal of this research, the results for Version 2 can be used to rule it out as a viable method of obtaining the desired data. Appendix F discusses a plausible explanation for the outlier nature of the Version 2 results.

b.)Service-connected disability-rating status:

A special concern in testing the service-connected disability-rating percent questions was whether they could adequately identify veterans who have a 0-percent rating. It was not known whether respondents – many of whom were non-veterans who were reporting for somebody else – were aware of the technical distinction between a 0-percent rating and the absence of a rating. Figure 4 compares data on the number of veterans with a 0-percent service-connected disability rating from Version 1 and 2 with data from the VA’s Compensation and Pension source and the 2005 Veterans Supplement of the CPS. The VA data are presented in two bars: the first shows the number of veterans with a 0- percent rating who receive compensation, and the second shows the total number of veterans with a 0- percent rating, including those who do not receive compensation.

Figure 4. Service-Connected Disability Rating: 0% Rating

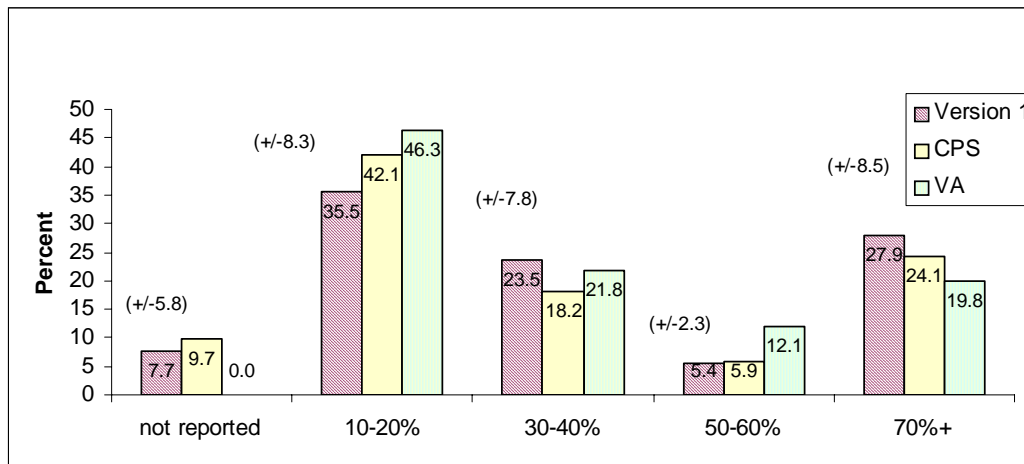


While the figures in Figure 4 for Version 1 and the CPS are similar, both are very different from the two VA numbers. Version 1 and CPS estimates are higher than the compensated VA number, but much lower than the VA total number. This finding suggests that Version 1 and the CPS may not be adequately identifying 0-percent veterans who are not compensated; such veterans make up the overwhelming majority of veterans with this rating. The Version 2 estimate, 3.6 million, is unreasonably compared with all the other figures.² In general, it does not appear that the Version 1 or Version 2 questions are able competently to identify veterans with a 0-percent rating. For Version 2, this failure, in combination with the other deficiencies noted above, disqualifies it from further consideration as a useable question, and renders further analysis of its results pointless; hence, the remainder of this study is restricted to an analysis of Version 1 results only.

The poor results from Version 1 for the 0-percent category distort the results and cloud the evaluation of the findings for the other rating-level categories. To filter out these effects, Figure 5 is restricted to veterans in the non-0-percent categories. The figure compares test data of the percent distribution of non-0-percent veterans by rating level from Version 1 with data from the above-mentioned VA-administrative and CPS sources.

² Most of this count resulted from responses to CAPI interviews. See Appendix F for further information.

Figure 5. Distribution of Non-0-percent Veterans by Rating Level



A comparison of the Version 1 and VA-administrative distributions in Figure 5 reveals that the figures for the 30 to 40 percent category are fairly alike, and that those for the 70 percent and higher category are not statistically different, but that the figures in the remaining categories are quite different. The Version 1 versus CPS comparison shows that the CPS estimates fall within the confidence intervals of the Version 1 figures for every rating level. Together, these comparisons hint that Version 1, being a survey instrument, shares with the CPS in the limitations of using a survey approach to collecting ratings data, and that, while it may be able to produce good-quality survey data, it may not be able to achieve quite the quality of data from administrative records.

5.3 Which version results in more reliable measures of service-connected disability status and ratings?

To measure reliability, we used a content follow-up (CFU) survey where we asked the *service-connected disability-ratings* questions again, but in a slightly different way. The CFU questions were hybrids of the questions for the test versions. The CFU status question was the same as that for Version 1. The CFU ratings question was similar to that for Version 2, but, besides using an open-ended format, it included additional instructions to the respondent.

Based on the results from the CFU, we calculated the simple response variance. The simple response variance (SRV) measures the random variation in respondents answers for a given response category between the initial response to the Version 1 or Version 2 question and the subsequent response in the CFU. The SRV provides a measure of the reliability or consistency of a question item. The smaller the SRV, the better the reliability. For the purpose of this evaluation, we also calculated the adjusted simple response variance (ASRV). This consisted of an adjustment to the standard SRV to reflect the fact that the CFU objective was not to perform a re-ask of the original question, but to obtain a supposedly better measure of the phenomenon under study. The ASRV for Version 1 was significantly lower than that for Version 2 for the rating status. For rating percent, the differences in the ASRVs between versions were not statistically significant. However, because having a service-connected disability rating is such a rare characteristics the simple response variances for all the categories were very low. To help

gauge reliability, therefore, it is helpful to look at cross-tabulations of the responses in the initial interviews by the corresponding responses in the follow-up interview. Figures 6 and 7 display such data for Version 1 (for reasons described above, Version 2 data are not displayed ³).

Table 2 shows a cross-tabulation of Version 1 and CFU responses for the rating-status question. The data show a high degree of consistency between responses. Only 1.6 percent of the cases are on the off diagonal, and those on the off diagonal are evenly split; this pattern suggests that there is no systematic bias in the Version 1 data. Of the people who reported having service-connected disability-rating in either Version 1 or the CFU (shown in yellow), 90 percent reported having one in both.

Table 2. Crosstab of Service-Connected Disability Status: Version 1 vs CFU (numbers in thousands)

Control	No SCD	With SCD
Follow-up		
No SCD	14,364 85%	129 0.8%
With SCD	133 0.8%	2239 13%

Table 3 displays a crosstab of Version 1 versus CFU responses to the disability rating- percent question. The data reveal that almost all of the respondents are on the diagonal (shown in yellow). In fact, of the people who reported a rating in both Version 1 and the CFU, 98 percent reported the same rating. This pattern demonstrates that people can consistently report a disability rating, but it does not speak to accuracy of the reporting.

³The conclusions drawn from corresponding crosstabulations for Version 2 were the same as those drawn for Version 1.

Table 3. Crosstab of Service-Connected Disability Rating Levels: Version 1 vs CFU (numbers in thousands)

Control	0%	10 or 20%	30 or 40%	50 or 60%	70% or higher
Follow-up					
0%	84	0	0	0	0
10 or 20%	15	669	0	0	0
30 or 40%	0	10	458	0	2
50 or 60%	0	2	12	105	2
70% or higher	0	0	0	0	622

5.4 Which version results in the least amount of item non-response?

The item nonresponse rate (INR) measures the proportion of housing unit or person responses with missing data. The item nonresponse rate for the rating-status question is lower for Version 1 than for Version 2 (see Table 4). The nonresponse rate for Version 1, 2.1 percent, is fairly low.

Table 4. Item Nonresponse Rates, Version 1 vs. Version 2

Questionnaire Item	Version 1 (%)	Version 2 (%)	Difference (%)	Margin of Error (%)	Significant
Serv-Conn Disability Status	2.1	8.8	6.7	± 1.4	Yes
Serv-Conn Disab Rating	7.4	2.3	-5.1	± 5.6	No

The item nonresponse rate for the rating percent question was not statistically different between versions. Although the item nonresponse rate for Version 1, 7.4 percent, is relatively high by ACS standards, it is similar to the nonresponse rate for the item in the CPS.

6. SUMMARY OF EMPIRICAL RESULTS

Version 1 met the criteria for each of the three research questions for both the rating status and rating percent components. Version 2 failed to meet the criteria for the first research question; the failure was severe enough to remove it from any further consideration for use in the ACS. Version 1's results were reasonably, if not ideally, comparable with benchmark data from VA administrative data and from the CPS. The Content Test results indicate that Version 1 is capable of producing useful data on service-connected disability-rating levels.

References

Asiala M. and Navarro A. (2006). "Experimental Design for the 2006 American Community Survey Content Test," American Statistical Association 2006 Proceedings of the Section on Survey Research Methods [CD-ROM].

Clark S and Raglin D. (2007); "Evaluation Report Covering Military Service Status," U.S. Census Bureau; 2006 American Community Survey Content Test Report P.5.a.

CONTENT TEST INFORMATION PAGE
For
MILITARY SERVICE STATUS (CFU required)

Question Wording:

Current ACS Wording	Content Test Wording
<p>Has this person ever served on active duty in the U.S. Armed Forces, military Reserves, or National Guard? <i>Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.</i></p> <p><input type="checkbox"/> Yes, now on active duty</p> <p><input type="checkbox"/> Yes, on active duty during the last 12 months, but not now</p> <p><input type="checkbox"/> Yes, on active duty in the past, but not during the last 12 months</p> <p><input type="checkbox"/> No, training for Reserves or National Guard only → <i>SKIP to question 23</i></p> <p><input type="checkbox"/> No, never served in the military → <i>SKIP to question 23</i></p>	<p>a. Has this person ever served on active duty in the U.S. Armed Forces? <i>Active duty does not include training for the Reserves or National Guard.</i></p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No, Reserve or National Guard training only → <i>SKIP to question 22</i></p> <p><input type="checkbox"/> No, never served in the military → <i>SKIP to question 23</i></p> <p>b. This person's active duty status is:</p> <p><input type="checkbox"/> Currently active WITH a prior discharge</p> <p><input type="checkbox"/> Currently active WITHOUT a prior discharge</p> <p><input type="checkbox"/> On active duty in the past</p>

Research Questions & Evaluation Measures:

No	Research Questions	Evaluation Measures
1.	<p>Do the following changes to the <i>military service status question</i> increase the estimate of the number of veterans:</p> <ul style="list-style-type: none"> - Break question into two parts by adding "This person's active duty status is:" - Remove "military, Reserves, or National Guard" 	Compare the estimate of the number of veterans between test and the control

	<p>from the question</p> <ul style="list-style-type: none"> - Remove from the instruction “<i>but DOES include activation, for example, for the Persian Gulf War</i>” - Change the reference period for identifying active duty status from 12 months (i.e., active now, in the last 12 months, or beyond 12 months) to currently or in the past - Modify the response categories to identify those “currently active with a prior discharge” 	
2.	Do the changes to the <i>military service status</i> question impact the distribution of responses for active duty status?	Compare the equivalent distributions of active duty status between test and control
3.	Do the changes to the <i>military service status</i> question adversely affect the item nonresponse rate	Compare the item nonresponse rate between test and control
4.	Do the changes to the <i>military service status</i> question reduce response error (bias) for reporting veteran status overall, for persons with only Reserves or National Guard service, and for “military veterans” (i.e., persons active with a prior discharge)?	Compare net difference rates, calculated from CFU data, between the control and test (based on answers to more detailed content follow-up questions) for overall, for Reservist/National Guardsmen, and for “military veterans”
5.	Do the changes to the <i>military service status</i> question reduce (or at least not increase) response variability for reporting veteran status overall, for persons with only Reserves or National Guard service, and for persons reporting “military veteran status?”	Compare the Gross Difference Rate (GDR), calculated from CFU data, between the control and test for overall, for Reservist/National Guardsmen, and for “military veterans”

Selection Criteria:

Research Q	Criteria
1	Estimate of veterans for the test version is greater or equal to the estimate for the control version
2	For informational purposes only – not part of the selection criteria
3	Item nonresponse rates for the test version are equal or less than those produced by the control version
4	The Net Difference Rate (NDR) associated with the test version is less than the control version
5	The Gross Difference Rate (GDR) associated with the test version is equal to or lower than the control version

Minimum criteria for selecting the ‘test’ version:

- Estimate of veterans reported for the test version is greater than the control estimate, or
- If the estimate of veterans is about equal between test and control, then the NDR from the test version should be equal to or better than the control version

CONTENT TEST INFORMATION PAGE
For
PERIOD OF MILITARY SERVICE (CFU required)

Question Wording:

Current ACS Wording	Content Test Wording
<p>When did this person serve on active duty in the U.S. Armed Forces? <i>Mark (X) a box for EACH period in which this person served, even if just for part of the period.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> September 2001 or later <input type="checkbox"/> August 1990 to August 2001 (including Persian Gulf War) <input type="checkbox"/> September 1980 to July 1990 <input type="checkbox"/> May 1975 to August 1980 <input type="checkbox"/> Vietnam era (August 1964 to April 1975) <input type="checkbox"/> March 1961 to July 1964 <input type="checkbox"/> February 1955 to February 1961 <input type="checkbox"/> Korean War (July 1950 to January 1955) <input type="checkbox"/> January 1947 to June 1950 <input type="checkbox"/> World War II (December 1941 to December 1946) <input type="checkbox"/> November 1941 or earlier 	<p>In which period(s) did this person serve on active duty in the U.S. Armed Forces?</p> <p><i>Mark (X) all that apply.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> September 2001 or later <input type="checkbox"/> August 1990 to August 2001 <input type="checkbox"/> May 1975 to July 1990 <input type="checkbox"/> August 1964 to April 1975 (Vietnam Era) <input type="checkbox"/> February 1955 to July 1964 <input type="checkbox"/> July 1950 to January 1955 (Korean War) <input type="checkbox"/> January 1947 to June 1950 <input type="checkbox"/> December 1941 to December 1946 (World War II) <input type="checkbox"/> November 1941 or earlier

*Question 22 on years of active-duty military service has been deleted.

Research Questions & Evaluation Measures:

No	Research Questions	Evaluation Measures
1.	<p>Do the following changes to the period of military service question affect the distribution of responses for “periods of service”:</p> <ul style="list-style-type: none"> - Change question wording from “When did...” to “In which periods...” - Change instructions from “<i>Mark (X) a box for EACH period in which this person served, even if just for part of the period.</i>” to “<i>Mark all that apply</i>” 	<p>Compare the equivalent distributions of “periods of service” between test and the control</p>

	<ul style="list-style-type: none"> - Remove “include Persian Gulf War” from “August 1990 to August 2001” response category - Place “Vietnam era,” “Korean War,” and “World War II” in parentheses at the end of the response category - Collapse “September 1980 to July 1990” and “May 1975 to August 1980” response categories - Collapse “March 1961 to July 1964” and “February 1955 to February 1961” response categories 	
2.	Do the changes to the <i>period of military service</i> question adversely affect the item nonresponse rate	Compare the item nonresponse rate between test and control (<i>note that item nonresponse is defined at the question level</i>)
3.	Do the changes to the <i>period of military service</i> question improve the consistency in reporting periods of service for veterans?	Compare Gross Difference Rates for each of the “periods of service” categories between the control and test
4.	Do the changes to the <i>period of military service</i> question increase the number of multiple responses?	Compare the number of multiple responses between control and test

Selection Criteria:

Research Q	Criteria
1	No change in the distribution of periods of military service across control and test
2	Item nonresponse rates for the test version are equal or less than those produced by the control version
3	The GDR associated with the test version are equal to or less than those associated with the control version
4	The number of multiple responses associated with the test version is equal to or greater than the number experienced by the control version

Minimum criteria for selecting the test version:

- The GDR for the test version is equal to or better than the control version

CONTENT TEST INFORMATION PAGE
For
SERVICE-CONNECTED DISABILITY – CFU required

Question Wording:

Version 1 (New Content)	Version 2
<p>a. Does this person have a VA service-connected disability rating?</p> <p><input type="checkbox"/> Yes [such as 0%, 10%, 20%, ... 100%] <input type="checkbox"/> No → <i>SKIP to question 23</i></p> <p>b. What is this person's service-connected disability rating?</p> <p><input type="checkbox"/> 0 percent <input type="checkbox"/> 10 or 20 percent <input type="checkbox"/> 30 or 40 percent <input type="checkbox"/> 50 or 60 percent <input type="checkbox"/> 70 percent or higher</p>	<p>Does this person have a VA service-connected disability rating?</p> <p><input type="checkbox"/> Yes → _____ % RATING [0%, 10%, 20%, ... 100%] <input type="checkbox"/> No → <i>SKIP to question 23</i></p>

Research Questions & Evaluation Measures:

No.	Research Questions	Evaluation Measures
1.	<p>Which of the following two approaches for asking about <i>service-connected disability</i> results in a more reliable measure of service-connected disability ratings?</p> <ul style="list-style-type: none"> - two questions with the first asking whether the respondent has a service-connected disability rating, and the second asking for a categorical response of the rating value - one question asking whether the respondent has a service-connected disability rating and 	<p>Compare the Gross Difference Rate (GDR) between the two different versions</p>

	if so the value of the rating	
2.	Which of the two methods results in the least amount of item non-response?	Compare item nonresponse rates between the two methods
3.	Do the new <i>service-connected disability</i> questions produce estimates that are roughly comparable to statistics produced from administrative records?	Compare service-connected disability estimates with statistics produced from administrative records (proportion of veterans with a disability rating, and the average disability rating among those with a disability rating)

Selection Criteria:

Research Q	Criteria
1	The method that has the smallest GDR for service-connected disability rating
2	The method with the lowest item nonreponse rates
3	The method that most closely approximates benchmark estimates of veterans with a service connected disability rating

To include this new content:

- Approval must be given,
- Estimate of veterans with a disability rating must approximate that produced from administrative records

Criteria for selecting one version over the other:

- the version with the lowest Gross Difference Rate for estimate of disability rating,

2006 AMERICAN COMMUNITY SURVEY NATIONAL CONTENT SURVEY ISSUE BRIEF

1. Topic/Question:

(a) Name: Service-Connected Disability Status of Veterans of Active-Duty Military Service

(b) Facsimile of questions on the 2003 ACS:

Not applicable: new question.

(c) If new question:

– Why question should be added:

The question will enable the ACS to obtain counts of veterans according to the statutorily-determined definition of the Department of Veteran Affairs (VA) of who is a veteran, something not possible using the existing veteran questions in the ACS. More importantly, the information is needed to classify veterans by their priority status for enrollment in VA health care programs.

– Agencies requesting:

The Department of Veteran Affairs (VA) has made a preliminary request; they expect to make a final request in July, 2004.

– Legislative requirements for the item:

Title 38, Chapter 17 (Medical Care), Section 1705 (Management of healthcare: patient enrollment system). The following regulations implement this law (and have the effect of law themselves): CFR 17.36(c)(1). When the formal request comes in from VA, we will ask them to have their legal staff classify the listed citations for this question according to our M/R/P typology.

(d) Procedural changes planned:

None planned.

2. Describe the changes (question wording, order, and/or format; response categories; screener questions; etc.) intended for testing and/or consideration:

(a) What needs to be tested:

New two-part question to measure levels of military service-connected disability.

(b) External recommendations for testing:

No official recommendation as of this writing, but the Department of Veteran Affairs (VA) is expected to make a formal request to test this new question in July, 2004.

(c) Wording for test questions:

(a) Does this person currently receive service-connected disability compensation payments from VA each month?

☐ Yes

☐ No

(b) If "yes," what is this person's service-connected disability rating?

☐ 10% or 20%

☐ 30% or 40%

☐ 50% or higher

3. Analysis or issues which provided rational for testing:

The Department of Veteran Affairs has provided the following draft statement¹ :

We recommend adding this question on service-connected disability status. By definition, if someone receives compensation, that person is a veteran. Without asking the question, ACS might undercount veterans based on VA's statutorily-determined definition of who is a veteran. For example, a Reservist or Guard injured during training but not having any activity duty service would check the fourth option of Q20 ("No, training for Reserves or National Guard only") indicating he is not a veteran. However, he actually would be a veteran due to his service-connected disability status and this would be indicated by new Q22.

¹ Attachment (VA ACS2008 Recommendation (17MAR04)) in email of 03/19/2004 09:32 AM from George Sheldon (George.Sheldon@mail.va.gov) to Thomas.J.Palumbo@census.gov.

More important, this question is needed to measure service-connected disability status in order to classify veterans by VA health care enrollment priority. The two key customer groups for VA health care (and many other VA benefits) are service-connected (SC) veterans and low income non-service connected. We need to be able to measure both within the same ACS data set in order to cross-classify veterans by SC status and income at the county level. For example, we need to know the number of low income veterans in Cook County Illinois who are also service-connected veterans in order to re-classify these veterans from Priority 5 (for low income nonservice-connected veterans) up to the higher Priorities 1, 2, and 3 (for service-connected veterans).

We can determine the number of SC veterans by analyzing administrative Compensation and Pension (C&P) data files. However, C&P data will not permit us to accurately locate a veteran's residence in a particular county (we typically know the county where the veteran's bank is located rather than the county where the veteran's residence is located). Also, C&P data do not tell us the income of SC veterans, information which is needed to net out of our low income veteran estimates the correct number who are also service-connected low income veterans who would move up in priority from Priorities 5, 7, and 8 to Priority 1, 2, or 3.

Regarding Part (a) of new Q22, one might considering re-wording the question to get at the idea of service-connected disability compensation eligibility rather than receipt of SC disability compensation payments. Eligibility is more important to VA for the purpose of classifying veterans by VA health care enrollment priority. However, measuring eligibility is undoubtedly more difficult and done with less reliability than measuring receipt of a payment.

4. Testing Objectives:

(a) Concerns to be identified/Questions to be answered:

– What is the best way to collect the required information?

(b) Testing approach:

We would like to perform a laboratory test of the propose new question using cognitive-research methods, and then to include the new question (or some alternative suggested by the cognitive research) in the content test.

5. Data Needs: *Note: By definition, any new question can't be classified as an 'R'. When the formal request comes in from VA, we will ask them to have their legal staff classify the listed citations for this question according to our M/R/P typology.

Agency	Statutory Requirement		Classi- fication*	Uses
	Title	Citation		
VA, Veterans Health Administration	Veterans Health Care Eligibility Reform Act of 1996	38 USC 1705	R	Used to establish priority categories for eligibility for VA health care.
HHS	Collection and Publication of Statistical Information Title 15 Chapter 40	15 USC 1516a	R	Used to collect and publish social, health, and economic statistics on individuals of Spanish origin or descent.
Dept. of Veterans Administration (VA)	Veteran Definitions	38 USC 101(29)(A) & (B), 4102, and 4102A (b) (1)	R	Extends Vietnam era back to Feb. 28, 1961 for those serving in Rep. of Vietnam. Needed for 38 USC 4102.
VA, Veterans Benefits Administration	Job counseling, training, and placement (purpose)	38 USC 4102 and 4102A	R	Establishes program of job counseling, training, and placement, with emphasis on disabled and Vietnam vets.
VA, Veterans Benefits Administration	Directors and Assistant Directors for Veterans Employment and Training	38 USC 4103(a) and 4107 (c) (1) Chapter 41	R	Used to determine state-to-state migration of veterans: statute specifies that the Secretary must appoint one Assistant Director for Veterans Employment and Training per 250,000 eligible veterans in the state.
VA, Veterans Benefits Administration	Directors and Assistant Directors for Veterans Employment and Training	38 USC 4103 (c)(1)(A) Chapter 41	R	Used to help in registering, counseling, training and job placement of eligible veterans as local employment offices, requiring local data.
VA, Veterans Benefits Administration	Directors and Assistant Directors for Veterans Employment and Training	38 USC 4103 (c)(15)(A) Chapter 41	R	Used in annual evaluation of performance of local employment offices, requiring data on veterans employment at local area.
VA, Veterans Benefits Administration	Disabled Veterans Outreach Program	38 USC 4103A(a)(1) Chapter 41	R	Used to support the appointment of a disabled veterans outreach program specialist for each of 7,400 veterans who are between ages 20 and 64 in each state.
VA,	Veterans Assistance Offices	38 USC 7723(a)	R	Used to determine geographical

Veterans Benefits Administration		Chapter 77		distribution of veterans recently discharged, those educational disadvantaged; and those in sparsely populated areas.
VA, Veterans Benefits Administration	Rehabilitation Services: Evaluation and data collection	38 USC 527 Chapter 5	R	Used to collect, collate and analyze statistical data to plan for rehab services and construction of facilities.
VA, Veterans Benefits Administration	Veterans Outreach Services	38 USC 7722(a)(b)(c)(d) Chapter 77	R	Used to plan outreach activities to special veteran populations and the dependents of special veterans, including those with languages other than English.
VA, Veterans Benefits Administration	Veterans Assistance Offices	38 USC 7723(a) Chapter 77	R	Used to determine geographical distribution of veterans recently discharged, those educational disadvantaged; and those in sparsely populated areas.
VA, Veterans Benefits Administration	Minimum Active Duty Service Requirement	38 USC 5303A (a)(b)(1)(A) & (B)	R	Eligibility for select benefits requires a minimum of 24 months active duty for those beginning active duty after 9-7-80. This is the "24 month rule."
VA, Veterans Health Administration	Congressional approval of certain medical facility acquisitions; Operational and construction plans for medical facilities	38 USC 8104(b)(4) and 8107(b)(3)(c) Chapter 81	R	For strategic planning to show demographic data for proposed new facilities, with projections over a 5- and 10-year period.
VA, Veterans Health Administration	Operation and medical facilities	38 USC 8110(a)(3)(A)(ii) Chapter 81	R	Used to review adequacy of operating bed levels based on geographic distribution and demographic characteristics of local veterans.
Dept. of Veterans Affairs (VA), Veterans Health Administration	State Home Facilities for Furnishing Domiciliary, Nursing Home and Hospital Care (Definitions)	38 USC 8131(1) Chapter 81	R	Used to determine state-to-state migration of veterans for estimating veteran population of states and other localities in planning for VA medical facilities.
VA, Veterans Health Administration	State Home Facilities for Furnishing Domiciliary, Nursing Home and Hospital Care (Definitions, General Regulations, Applications projects, payments)	38 USC 8131(1) and 8134(a)(2) Chapter 81	R	Used to determine the number of beds required for adequate nursing home care (with an emphasis on veterans 65 years and over).

VA, Veterans Health Administration	Veterans Health Care Eligibility Reform Act of 1996	38 USC 1710 (a) and 1722 (a) Chapter 17	R	Used to establish priority categories for eligibility for VA health care. Used to determine low income vets in the general population.
VA, National Cemetery Administration	Independent study on improvements to Veterans' cemeteries	H.R. 2116, Section 613(b)(2)(A) & (B)	R	To project the number of added cemeteries needed for vets dying after year 2005.
VA, National Cemetery Administration	Veterans Cemeteries Assistance Act of 1999	H.R. 2040 Sec. 2(b)(1)(C)(2)(A)(B)	R	Assess changes in veteran population to be served over a 10-year period.
VA, Centers for Women Veterans and Minority Veterans	Veterans Benefits Improvement Act	38 USC 317 and 318 Chapter 3	R	To conduct demographic and social studies of special veteran populations: women, and minorities.

*(M= Mandatory; R=Required; P= Programmatic)

6. Impact of Not Including Topic/Question in the 2006 ACS National Content Test

The VA will not have the information they require to improve the process of classifying veterans by their priority status for enrollment in VA health care programs. Also, the ACS will undercount the number of veterans according to the statutorily-determined definition of the Department of Veteran Affairs of who is a veteran.

Last Revised: June 4, 2004 (11:00 a.m.)

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**Department of Veterans Affairs Recommended Changes
to the 2008 American Community Survey****1. Introduction**

The following document was prepared by the Department of Veterans Affairs (VA) Office of the Actuary (OACT) in consultation with the “VA Census 2000/American Community Survey Work Group” and the Deputy Assistant Secretary (DAS) for Policy. The Work Group represents organizations throughout VA with interests as diverse as health care, disability compensation, and burial benefits. Extensive discussions with the Work Group, within OACT, and with the DAS resulted in several recommended changes to the 2008 American Community Survey (ACS) questionnaire.

The recommended changes are highlighted in **yellow** in Sections 2 and 3 below. Since bold font was used in introducing questions and some responses in the 2003 ACS, this formatting has been retained. Question numbering follows the 2003 ACS.

There are three changes that stand out in Section 2:

- One change concerns identifying “military veterans,” namely persons on active duty at the time of the ACS who have a prior discharge from active duty that qualifies them as a veteran. VA wants to count all veterans whether they be in the military or not (civilian veterans). Only civilian veterans have been counted in the past.
- The second change is the addition of a question to ascertain those veterans who achieved that status by being activated for federal duty in the Reserve Forces or National Guard. Such military service members are becoming increasingly important.
- The third change is to substitute a question concerning length of service with a more useful question that will permit us to identify the service-connected (SC) disability compensation status of veterans. VA needs to derive estimates of the future demand for VA health care in local market areas across the country where veterans are classified by VA health care enrollment priority. Service-connected disability status in large part defines the highest three priority groups.

In Section 3 we discuss issues related to migration. We do not suggest any new wording for the “migration question” itself, but we do suggest a small change in the wording of the third response to Question 14, “Did this person live in this house or apartment 1 year ago?” While this is not a veteran-specific question, it is nonetheless important to VA to project future state and county veteran population estimates that take into account patterns of veteran migration.

The VA Office of the Actuary regards the question content and formats suggested below as a work in progress. We look forward to working closely with the Census Bureau and others as the process of creating a 2008 ACS questionnaire advances.

2. Veteran Questions (Q20a-b, Q21, and Q22a-c)

Who is a veteran?

Q20a: Has this person ever served on active duty in the U.S. Armed Forces including the Reserve Forces and National Guard? Active duty includes federal activation of the Reserve Forces or National Guard for service in such places as Afghanistan, Iraq, and even within the United States. Active duty DOES NOT include Reserve or National Guard training.

- ☐ Yes, now on active duty for the first time (no prior discharge)
- ☐ Yes, now on active duty (but was on active duty before and then discharged)

- ☐ Yes, on active duty during the last 12 months, but not now
- ☐ Yes, on active duty in the past, but not during the last 12 months

- ☐ No, training in Reserve Forces or National Guard only - skip to question 22
- ☐ No, never served in the military - skip to question 23

New question (Q20b) is added to determine if a veteran's active duty service requirement was satisfied by activation in the Reserves or National Guard.

Q20b: Was this person ever activated for federal duty in the Reserve Forces or National Guard?

- ☐ Yes
- ☐ No

- "What Is" Before "What Isn't": We have stated what active duty DOES include before stating what it DOES NOT include. We think that stating the positive before the negative provides greater clarity.
- War References and Activated Reserve Forces and National Guard: The reference to "Persian Gulf War" has been replaced with more recent theaters of military operations, viz., "Afghanistan, Iraq, and even within the United States" because: (a) the first Gulf War will have started 18 years before the 2008 implementation of this questionnaire; (b) activated Reserve Forces and National Guard have become an increasingly more important component of total forces; and c) Reserve Forces were called up to guard U.S. airports right after 9/11.
- Activated Service by Reserve and National Guard Forces: We are recommending that activation in the Reserve Forces or National Guard be probed in a new, follow-up question, 20b, for those who respond that they have been on active duty, now or in the past. There is no legal mandate for collecting this information. However, from the time of the Gulf War of 1990 up through

current military operations in Iraq, we observe that the active duty military service population is increasingly composed of activated members of the Reserves and National Guard. VA needs to document this shift.

- Military Veterans: The purpose of adding words to the first response option and adding an entirely new second response option is to identify “military veterans.” These are persons who served on active duty in the past for purposes other than training, were discharged, and now are on active duty having re-entered the military. This has become a common occurrence with activation of Reserve Forces for Afghanistan and Iraq, and it may be increasingly important in the future. As of December 31, 2001, over 639,000, or 49% of all active duty service members, had a discharge from prior active duty. Current and future percentages may be greater given Reserve Force call-ups.

Counting military veterans is consistent with the concept, “once a veteran, always a veteran.” If a person has ever (a) served on active military duty for other than training purposes, and (b) been discharged under conditions other than dishonorable, that person is a “veteran” by law [see 38 U.S.C. § 101(2)]. To conform with the law, it is important to VA that all persons who satisfy these two criteria be counted as veterans.

Our intent is to count all veterans classified in the two groups: “civilian veterans” and “military veterans.” Historical veteran population counts of both the Census Bureau and VA have been based on counts of civilian veterans. These veterans would be identified by a checked first, third, or fourth responses. Military veterans would be identified by a checked second response. The issue of whether and how military veterans ought to be included in an official count of the veteran population is not addressed. Our aim is provide the option of counting one or both groups.

Finally, there is an often overlooked distinction between the definition of “veteran” and definitions of “eligibility” for various VA benefits. Having an honorable active duty discharge defines a veteran. However, eligibility for VA benefits is not limited to veterans. All Armed Forces personnel are eligible for some VA benefits that can be used while on active duty even if the individual is not a veteran (e.g., education, home loan guarantee, and insurance). Military veterans are eligible to receive a wider array of VA benefits as compared to all Armed Forces personnel.

- New Skip Logic: The fifth response option is followed by the phrase “skip to question 22”, which is now a question about receiving VA disability compensation payments (and not a question about less than two years of active duty service).
- Space Breaks Creating Three Groups of Paired Responses: This question has always been difficult for the Census Bureau and VA to formulate and (we suspect) for respondents to answer. One complexity is due to the need to count separately those with activity duty for Reserve Force and National Guard training only. A second complexity, introduced in the 2003 ACS, is created by the third

and fourth responses above on service in the last 12 months that are designed to improve veteran migration analyses by insuring that we are measuring veterans at two points in time, the time of the ACS response and a year prior to that date (see Q14). A third complexity has now been added that concerns our desire to be able to count military veterans. All of these complexities can be accommodated if we realize that that we have three groups of paired responses. We suggest that two blank lines be added to make this characteristic of the responses clear.

Period of Service

Q21: **When did this person serve on active duty in the U.S. Armed Forces?** Mark (X) a box for EACH period in which this person served.

- [] September 2001 or later
- [] August 1990 to August 2001
- [] May 1975 to July 1990
- [] **Vietnam era** (August 1964 to April 1975)
- [] February 1955 to July 1964
- [] **Korean War** (July 1950 to January 1955)
- [] January 1947 to June 1950
- [] **World War II** (December 1941 to December 1946)
- [] November 1941 or earlier

- Dropped Pre-Vietnam Era: These period of service response options differ from those on the 2003 ACS in that no longer is there a “1961 to 1964” period. Those veterans are now included in the peacetime period between the Korean and Vietnam wars. Only a very small number were stationed in Vietnam before the beginning of the Vietnam era in August of 1964.
- Gulf War Not Named: The proposed change eliminates specific reference to the Gulf War in the second period inasmuch as that period is still open. As a result, the second period takes up one line on the questionnaire instead of two.
- Dropped Period for Less than Two Years of Service: We are recommending that Q22 not be retained (see discussion below) in its present form where the purpose is to identify veterans with less than two years of service (L2s). Therefore, we have eliminated the period “September 1980 to July 1990” appearing on the 2003 ACS. This period is relevant only if Q22 is retained. The September 1980 to July 1990 period is now folded into the peacetime category, “May 1975 to July 1990.”

In sum, the recommended response options for period of service are both more accurate (no end date is suggested for the Gulf War period) and useful. Also, they consume 9 lines instead of 12.

Length of Service (less than 2 vs. 2 or more years of active duty military service)

VA recommends that Q22 as it now exists on the 2003 ACS be eliminated.

- **L2 Rule Exceptions:** We are recommending eliminating this question. Responses to the less than 2 years of service question were intended to be used in conjunction with period of service after September 1980 to ascertain those veterans not eligible for at least some benefits. The law provides for many exceptions to the 2 year rule, however. Due to exception clauses, many Reserve Force and National Guard service members activated for duty in Iraq or Afghanistan will in fact be entitled to benefits even if they serve tours of less than 2 years. DoD administrative records should permit the most accurate determination of those who have served less than 2 years active duty such that their eligibility for VA benefits might be affected. However, use of DoD administrative data to measure L2 veterans will result in our not being able to cross-classify L2 veterans by important ACS variables. Furthermore, by eliminating the space needed for this question, we will have a better argument for adding space for additional and more important questions measuring Reserve Forces (see above) and service-connected disability status (see below).

New Q22: Service-Connected Disability

Q22a: Does this person have a VA service-connected disability rating?

- ☐ Yes
☐ No (-> go to question 22c)

Q22b: What is this person's total service-connected disability rating?

- ☐ 0 percent
☐ 10 or 20 percent
☐ 30 or 40 percent
☐ 50 or 60 percent
☐ 70 percent or higher

Q22c: Does this person currently receive service-connected disability compensation payments from VA each month?

- ☐ Yes
☐ No

- **Classifying Veterans in Small Areas By VA Health Care Enrollment Priority:** The SC status question has much added importance because it is needed to derive small area estimates of the demand for health care by veterans classified by VHA enrollment priority. The two key customer groups for VA health care (and many other VA benefits) are service-connected veterans and low income non-service connected veterans. We need to be able to cross-classify veterans by both SC status and income at the county level in order to assign veterans on a hierarchical basis to priority groups. Although the number of SC veterans can be determined from VA Compensation and Pension data files, these administrative data cannot be used to locate accurately a veteran's residence in a particular county (we typically know the county of the veteran's bank rather than the county

where the veteran resides.) Furthermore, administrative data do not include the income of SC veterans. With data that cross-classifies veterans by both income and SC disability compensation status, we are better able to classify veterans by priority.

- Reserve Forces or National Guard Injured During Training: Additionally, asking the question on service-connected disability, in conjunction with Q. 20a, now ascertains Reserve Force or Guard service members injured during training but not having any activity duty service for purposes other than training. Such persons are statutorily veterans, heretofore not identified and counted as veterans.
- Rating vs. Receipt of Payments: In New Q22 (a & b) we ask about the SC rating because that is a criterion for defining the highest health care priorities, not whether a person receives VA compensation payments [new Q22(c).] It is estimated that approximately 30% of SC-entitled Gulf War veterans reject VA disability compensation payments in favor of higher alternative payments (e.g., VA pension payments, military retirement payments). These so-called “rejectors” are an important class of all SC veterans who are identified in New Q22 (a, b, and c) but not in New Q22(c) alone.

In New Q22(c) we ask about receipt of VA disability compensation payments as an inherently easy way to measure whether a person is entitled to receive VA disability compensation payments. Also, by asking New Q22(c), it is possible to both (a) check ACS results against VA administrative data documenting compensation payments, and (b) document the distribution of compensation payments across Congressional Districts, a subject that has long been of interest to members of Congress.

We ask about “total” service-connected disability rating as veterans often have ratings for several conditions. The total rating is used to classify veterans by priority.

3. Other Recommendation: Migration

Q14: **Did this person live in this house or apartment 1 year ago?**

- ☐ Person is under 1 year old—Skip
- ☐ Yes, this house—Skip
- ☐ No, outside the United States, **including service in the U.S. military** – Print name of foreign country, or Puerto Rico, Guam, etc., below then SKIP
- ☐ No, different house in the United States

- Veteran Migration Estimation: In order to improve veteran migration estimates, we are recommending adding the phrase “including service in the U.S military” to make sure we can ascertain new U.S. veterans who served outside the U.S. and returned within the year reference time period.

- Why is clarification needed? In our discussions at VA, the following was asked:

“Given the original language of the 2003 ACS that lacks the phrase in the third response, ‘including service in the U.S. military,’ what other response but the third could a person check who, for example, was in Iraq a year prior to completing the 2008 ACS?”

The answer is two-fold. First, we don’t want veterans to skip over this question if they think that an overseas posting of a year ago “doesn’t count” now when responding to the ACS. Second, we want to avoid confusion that results from equating “my house” with “my home.” A veteran at the time of the 2008 ACS who was stationed overseas a year earlier might regard his “home” location (say, in Richmond, VA, where his family is located) as never having changed even though his “house” a year ago was somewhere in Iraq, Afghanistan, or another country while deployed with the U.S. military.

George Sheldon

Rob Klein Aug. 30, 2004

**Legal Basis for Proposing Question on
Service-Connected Disability Status (New Q22)**

In all legal citations discussed below reference is made to the VA need to classify veterans by health care enrollment priority in order to estimate expected VA health care utilization classified by health care enrollment priority group. Key passages are underlined. The last citation is more general than the first two.

Title 38, Chapter 17 (Medical Care), Section 1705 and CFR 17.36(c)(1): Titled, "Management of health care: patient enrollment system," this statutory language describes seven priorities in establishing a VHA enrollment system. Regulation at CFR 17.36(c)(1) implements this law. This regulation describes an annual decision by the Secretary of Veterans Affairs where he or she informs Congress if "projected healthcare utilization and expenditures for veterans in each priority category" will be covered by "appropriated funds and other revenue." To estimate expected utilization by veterans in each health care enrollment priority group, VA needs to classify the total veteran population by health care enrollment priority as it is this population which produces the sub-population of VA health care enrollees and users. As the top health care enrollment priority groups are defined in terms of eligibility for VA service-connected disability compensation, New Q22 is very important to VA. Congress has also asked VA to determine if its capital assets (and resource allocations generally) are distributed around the country in ways that would be expected to maximize system-wide expected utilization, classified by health care enrollment priority. To meet this requirement, VA has used decennial census data to estimate and forecast VA health care utilization classified by health care enrollment priority on a small area, market-specific basis. This type of analysis will be extended in the future using small area data from the American Community Survey.

Title 38, Section 1710(A) as amended by The Veterans Millennium Health Care and Benefits Act (PL 106-117): "The Secretary shall provide nursing home care which the Secretary determines is needed (1) to any veteran in need of such care for a service-connected disability, and (2) to any veteran who is in need of such care and who has a service-connected disability rated at 70 percent or more." Thus, a key VA long term care planning need is for small area ACS data that distinguishes Priority 1 veterans with SC ratings of 70% or higher.

Title 38, Section 527: "The Secretary, pursuant to general standards which the Secretary shall prescribe in regulations, shall measure and evaluate on a continuing basis the effect of all programs authorized under this title, in order to determine their effectiveness in achieving stated goals in general, and in achieving such goals in relation to their cost, their effect on related programs, and their structure and mechanisms for delivery of services. Such information as the Secretary may consider necessary for purposes of such evaluations shall be made available to the Secretary, upon request, by all departments, agencies, and instrumentalities of the executive branch." The analysis referenced above is precisely the kind of program evaluation covered by this language.

Appendix E: Cognitive Testing Report

Cognitive Testing of Proposed Items on Veteran Status and Health Insurance Coverage for the American Community Survey

Final Report

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1. BACKGROUND

In January 2005, the U.S. Census Bureau began working toward full implementation of the American Community Survey (ACS). At full implementation, the ACS will be the largest household survey in the United States. It will provide annual estimates of important demographic, socio-demographic and housing characteristics for the nation, states, and counties. The ACS will use a multimode data collection with the initial mode administered by mail to about 250,000 addresses, the follow-up mode by a Computer-Assisted Telephone Instrument CATI, and a subsample of the remaining nonresponse by personal interviews (CAPI). During March 2005, Westat conducted cognitive interviews to test questions that will appear on future rounds of the ACS.

Two health insurance items are new to the ACS questionnaire. Responses to these health insurance questions will provide estimates of the number of insured vs. uninsured in the population and, for those who are insured, the general categories of health coverage they have.

This cognitive interviewing task focused on how respondents with past and/or current military service would interpret items about veteran status and health insurance coverage. The Census Bureau provides these item responses to the Department of Veteran Affairs (VA). The VA needs precise and accurate estimates of veteran status and related characteristics in order to make budgeting and planning decisions. Other changes, both in the legislative arena and in the composition of the military, will affect VA programs, e.g., provision of health care and disability compensation.

The purpose of this test was to investigate potential sources of measurement error. The Census Bureau and VA wanted to learn whether respondents understand the questions and response categories as the Bureau intends. Specifically, we investigated whether respondents had difficulty with the question phrasing, terminology, and/or the reference periods used in the questions. We tested the focal survey items across three different versions of the ACS questionnaire: paper version 1, paper version 2, and the CATI version.

Appendix A presents the questions on health insurance coverage and veteran status tested in this study, for both the mail and telephone modes.

2. METHODS

2.1 Confidentiality

Information generated during the interviews was confidential and handled in accordance with the guidelines and regulations of Title 13, United States Code. All cognitive interviews were conducted in a designated room with restricted access; all materials generated by the interviews were kept in a locked cabinet in a locked room. Designated computers were available for the interviewers to write up their notes. All Westat staff members working on the project, including those who conducted the recruiting, were required to pass a Census Bureau security clearance and obtain a certificate for completing an on-line tutorial (“Safeguarding Census Bureau Confidential Data”) about handling Title 13 data before they could begin work on the project. All recruiting also followed Title 13 regulations (confidentiality of the list protected, etc.). All staff assigned to this project worked in accordance with Title 13 regulations.

2.2 Recruitment

The VA specified seven distinct types of respondents to recruit for the testing, with target numbers for each type. See Table 2-1 below for these type definitions. The VA generated two lists of potential respondents for the Census Bureau and Westat. One list consisted of active service persons (Types 1-3) and the other list consisted of those receiving benefits (Types 4-7). The list of active service persons contained approximately 400 names with contact information. The list of those receiving benefits contained approximately 500 names with contact information. All of the persons on the list were located within a 40-60 mile radius of the Washington, DC metropolitan area. The list was relatively clean and had a high percentage of correct information.

Table 2-1
Participant Types

Type	Definition of type by VA classification
Type 1	Active duty with a prior discharge
Type 2	National Guard or Reserves, training only
Type 3	National Guard or Reserves, federally activated
Type 4	One Service-Connected disability
Type 5	Multiple Service-Connected disabilities
Type 6	Rated unemployable
Type 7	Rating greater than 0%, opt for no compensation

The Westat recruiter first called the area codes and exchanges that were geographically closest to Westat, then proceeded to canvass the outlying areas. We found that only those directly inside the DC metropolitan area were willing to travel to Westat’s campus in Rockville, MD. Those in the outlying areas (e.g., Howard County,

MD; Frederick County, MD; and Prince William County, VA) declined participation because of the travel time involved. For the most part, our participants came from the Washington, DC, Montgomery County, MD, and Fairfax County, VA regions.

The Westat recruiter called individuals on the list, administered the screener (included in Appendix B), and set the appointments for people who agreed to participate. There were recruitment targets for each service category (i.e., the types) and version of the instrument. Table 2-2 shows the actual number recruited for each service category and survey version, with the recruitment targets in parentheses.

Over half of all scheduled appointments failed to report for their scheduled interview, resulting in a no show rate of 52%. In addition, there were numerous cancellations which were not included in the no-show rate.

Table 2-2
Respondent Groups by Mode of Cognitive Interview

Version	Type 1	Type 2	Type 3	Type 4	Type 5	Type 6	Type 7
1	3(3)	3(3)	2(3)	2(2)	2(2)	1(1)	1(2)
2	4(3)	2(3)	3(3)	1(2)	3(2)	0(1)	1(0)
CATI	1(2)	2(2)	3(2)	2(2)	1(0)	0(0)	2(2)
total	8	7	8	5	6	1	4

Thirty-nine respondents (of the target total 40) were recruited and interviewed. Thirty-six were from the list provided by the VA; the remaining three were recruited by flyers, Internet advertisements, and networking on the part of Westat staff. Interviewees received a \$40 incentive for their participation.

2.3 Participants

Table 2-3 presents the demographic and educational characteristics of the respondents.

Table 2-3
Demographic Summary of Cognitive Interview Participants

Demographic Characteristic	Number of Respondents
Gender	
Male	31
Female	8
Age	
30-39	10
40-49	9
50-59	11
60-69	5
70 and older	3
unknown	1
Education Completed	
12 th Grade-No Diploma/High School Graduate/GED	6
Some college credit, no degree	8
Associate's degree	3
Bachelor's degree	9
Master's degree or higher	12
Unknown	1
Race/Ethnicity	
White	22
Black/African-American	12
Black/African-American, American Indian	1
White or other Spanish/Hispanic/Latino	1
Korean	1
Unknown	2

A few respondents identified themselves during the interviews as a different type classification than listed by the VA. These discrepancies were:

- Two respondents who were classified as Type 7s self-reported as a 4 or 5.
- Two respondents who were classified as Type 2s self-reported as a Type 3.
- One Type 4 responded as a Type 1.

2.4 Protocol Development

The VA and Census provided an outline of research questions and an explanation of potential issues that military and veteran respondents were expected to have with each

of the ACS items identified for testing. We discussed these issues in detail at the kick-off meeting held at the Census Bureau.

Westat staff used the provided materials and notes from the kick-off meeting to draft a protocol for each version of the questionnaire. Each protocol listed two types of probes. Concurrent probes were provided for cognitive interviewers to use only under circumstances where a respondent was very confused by an item, changed an answer, paused for a very long time, responded “I don’t know” to an item, or asked a question. These probes were very general, to get the respondent to articulate the problem as it occurred in real time. Retrospective probes were written such that an interviewer could cover the research questions and select the probes that were applicable to the particular respondent.

The insurance items were the same across the two paper versions and CATI version, so the probes were the same. Probes for the military service items were tailored for the variations across the two paper and CATI versions. These drafts were sent to both the Census and VA for review and comment. A conference call between Westat, VA, and Census was held to discuss the probes. Westat finalized these protocols; copies of the protocol are provided in Appendix C. The cognitive interviewers were trained to use the protocols, stressing the use of probes to address research questions. Staff then took turns playing the roles of interviewer and respondents, based on the seven respondent types identified by the VA.

2.5 Interview Procedures

Six cognitive interviewers from Westat participated in this study. All interviewers were survey methodologists with extensive experience in cognitive methods testing. They used a think-aloud protocol with retrospective probing. Interviewers were instructed to avoid concurrent probing to the extent possible so as not to contaminate the respondent’s thought processes.

All in-person interviews were conducted on Westat’s campus in Rockville, MD. Most of the CATI interviews were conducted over the telephone with the respondent coming to Westat and then being called on the telephone by the methodologist who was in a separate room. For three of the CATI interviews, the respondent remained in his/her home and the methodologist called his/her home number.

To start the session, the interviewer used a script to explain the purpose of the study, its sponsors, the voluntary nature, and the role of the respondent. The respondent was also asked to read and sign a consent form. All interviews were audio-taped; the respondent’s permission was captured at the beginning of each tape. At the conclusion of the interview, the interviewer asked the respondent whether he/she had any questions, then asked him/her to sign the incentive receipt.

For the two paper versions, the respondent read the questions aloud while working through the instrument. The respondent was also asked to verbalize his/her thoughts and reactions while working through the instrument, specifically any problems, confusions, ambiguities, and so forth that a question presented. The respondent worked through the entire instrument, providing information for him/herself and one other family member. As described above, the interviewer only probed concurrently if there was a marked problem, to reduce cognitive contamination that can result from frequent interruption of a respondent's train of thought. After the respondent worked through the survey, the interviewer asked the respondent to look back at the items of interest for the test and administered the retrospective probes for those items.

For the CATI version sessions, the respondents were also instructed to think aloud and provide answers to all items for him/herself and one other family member. However, to simulate the CATI experience, the interviewer went to a nearby room after providing the introductory information. The interviewer called the respondent on the telephone and read the survey items and responses aloud, recording the respondent's response choices. (For the three sessions where the respondent was at home rather than at Westat, the interviewer conducted all parts of the session by phone.)

For all sessions, once the respondent had completed the entire instrument, the retrospective probing started. For the CATI sessions, the interviewer returned to the room to conduct this part of the session face-to-face. In addition to covering the research issues and probing to understand each respondent's unique context, the interviewer addressed items where nonverbal expressions had been noted.

Two interviews were observed by Census and VA staff. Written summaries of all interviews and the tape recordings were delivered to the Census Bureau.

3. RESULTS AND RECOMMENDATIONS

3.1 Key Findings

Cognitive testing produced two sets of findings – general and item-specific. This section begins by presenting general findings that applied across multiple items that we tested. Then, we present detailed findings that were specific to individual items.

- The items generally function as intended. However, participants identified some terminology which either elicited a negative response or caused some confusion. Some Veterans reacted negatively when they found their health benefit program grouped with poverty-related entitlement programs.

- Several respondents either misread or skipped parts of questions and directions. For example, several respondents missed the instruction to “*Mark All that Apply,*” and stopped selecting responses after finding the first satisfactory answer choice that applied. This resulted in an under-count of events (e.g., health insurance coverage).
- While most Veterans excluded DD214s when considering their discharge status, others did not. Previous experience filling out surveys cued Veterans to reference either an Honorable Discharge in some cases, or a break in service in others.
- Qualifying clauses, especially at the end of a question, were often skipped by respondents. Participants expressed concern about the amount of reading required for the tested items.
- Veterans were able to report their service-connected disability rating to both an open-ended and closed-ended question.

3.2 Question by Question Findings and Recommendations

This section documents item-specific results for each section of the questionnaire. We have placed the test versions of the questionnaire text with each set of item-specific results to make the results easier to follow.

3.3 Reporting Current Coverage

15a. Are you CURRENTLY covered by any type of health insurance? *Include insurance obtained through a job or purchased directly from an insurance company, and government health insurance such as Medicare, Medicaid, VA and military programs.*

Yes

No-Skip to F

This item is identical across all three versions, 15a in Versions 1 and 2, and 17a in CATI.

Purpose of Item and Initial Response Issues:

This health insurance question and its follow-up were included to collect information on health insurance coverage. These items are not specific to veterans. They will be used to collect health insurance information for all ACS respondents. This is

important to note because consideration of changes has to be made within the context of collecting insurance information for both those with and without military coverage.

The initial issues identified by the VA and Census were to ascertain:

- 1) How respondents interpret the question generally;
- 2) What the phrases “currently covered,” “any type of health insurance,” and “government health insurance” mean to Veterans;
- 3) What terminology respondents use to refer to their military/Veteran health care coverage; and
- 4) Whether the italicized instruction in the question stem is read and correctly interpreted, that is, whether respondents use it in selecting their responses to the question.

Findings:

- Respondents generally understood the question, and were not confused by the phrase “currently covered.”
- Some respondents had problems with some of the terminology and the italicized instruction.
- “Government health insurance” was not perceived as preferred terminology by Veterans.
 - This phrasing conjures up images of welfare or poverty-related entitlement programs -- in marked contrast to Veteran benefits. Veteran respondents feel entitled to their benefits in recognition of service and sacrifice.
 - Other interpretations of “government benefits” included FEHBP, the health insurance program for federal government workers and retirees.
 - One respondent considered *life* insurance to be “any type of health insurance.”
 - Some Veterans were confused by the listing of the VA alongside health insurance options, e.g., “VA is not health insurance, why is it lumped with the others?”
- Some respondents omitted reading or glossed over the italicized instruction, because they felt they understood the question intent and did not require any further clarification, because they turned their focus toward responding to the item, or because the sentence was too long.

- One respondent suggested re-wording the italicized portion and using the conjunction “or” in a parallel fashion to alert respondents that another response category is present: “*or* government health insurance programs
- One respondent who did not read the second sentence when answering the questionnaire felt the italicized sentence was “not harmful, but [he didn’t] think it was necessary.”
- Currently, only a comma serves to separate “VA and military programs” from “Medicare, Medicaid.”
- The terminology some military personnel prefer is “benefit,” “program,” or “system” instead of insurance.

Recommendations:

- It would be helpful if the instruction in the question stands out visually, either on a separate line or in different font (other than Italics).
- The findings suggest that a revision of this item should employ parallel construction and separate the insurance alternatives. Using a semi-colon instead of a comma might serve to distinguish the grouping of VA and military programs from Medicare and Medicaid. Even though the funding source is the same for these programs, respondents regard them differently, and ‘skimmed past’ the relevant answer option as currently grouped. This alternate wording would make the categories more meaningful for Veteran and military respondents:

“Include insurance obtained through a job or purchased directly from an insurance company; Medicare, Medicaid; or other government health program such as TRICARE or the VA.”

3.4 Reporting Health Insurance Type

15b. What type of health insurance do you have? *Mark [X] all that apply.*

- Insurance through a current or former employer or union (of this person or another family member)
- Insurance purchased directly from an insurance company (by this person or another family member)
- Medicare, for people age 65 and older, or people with certain disabilities
- Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
- TRICARE, CHAMPUS or other military care
- VA or CHAMPVA (including those who have ever enrolled for or used VA health care)
- Indian Health Service
- Insurance that covers just one type of care (for example: dental, accident, nursing home care plans)
- Other-Specify

This item is identical across all three versions as 15b in Versions 1 and 2, and 17b in CATI.

Purpose of Item and Initial Response Issues:

Military and Veterans obtain health coverage through a health provider (at military or Veteran health care facilities) rather than obtaining coverage through a contract with a health insurance organization. This may affect how Veterans think about the type of coverage they have. This item was tested to determine how Veteran and military respondents interpret the various response options and select one or more insurance types for their response. It was of interest to find out whether Veterans who had either used or officially enrolled in VA (or CHAMPVA) -- but have not used it recently or ever -- report that they do have health coverage. A concern was also whether military who use currently use private insurance and who have previously received treatment at a VA hospital indicate coverage by the VA.

Findings:

- The response categories proved problematic in that respondents tended to report the health insurance coverage that they use or access currently. Because the categories are complex and included much verbiage, there is a tendency to underreport military-related insurance coverage. Thirty-seven of 39 respondents said they had insurance. Though two reported no insurance, they actually had military coverage. And although 37 respondents reported

having coverage, most did not list *all* of their coverage. Sources of under-reporting included the following:

- Respondents with single-type health care did not select more than one type of care.
- Former military tended to report only their current coverage. They were still using the highlighted “currently” frame of reference established at 15a. Four respondents who previously used VA benefits only reported the insurance they obtain through their current employer. They did not report insurance coverage through the VA even though they had used VA in the past. One veteran did not check VA but then actually showed the interviewer his VA enrollment card during the debriefing.
- Respondents did not follow the instruction to *Mark All That Apply*. Some respondents did not “see” this instruction. Others stopped scanning the list of response options once they felt they had responded to the question in a satisfactory manner and did not read the response items that were presented further down the response option list (satisficing).
- Dental plans were undercounted for two reasons. First, dental and other supplemental plans are presented near the end of the list of response options. Respondents who used a satisficing strategy did not encounter this option. Second, dental plans were often considered to be part of the primary health insurance plan, even when an additional premium payment is required. This was found to be the case with Delta Dental (considered to be part of TRICARE) as well as with commercial insurance programs.
- The supplemental response option was also the source of an over-reporting error. One participant considered his Life insurance plan to be a supplement to his private healthcare insurance since the policy was issued by the same insurer.
- Respondents reported that they were unfamiliar with some of the terminology in this item. In several cases they did not recognize CHAMPUS, and in other cases, they had heard of CHAMPUS, but knew it was defunct and felt it did not belong in this list.
- No respondent recognized CHAMVPA, not even the one participant who is a VA Benefits Counselor. The unfamiliarity served to deter at least one participant who had VA; he did not select it because it appeared with CHAMPVA. He did not check any options in this item, despite having said “Yes” to the previous gate question. It should be noted that no widows or dependents of Veterans, to whom this acronym would be relevant, were included in this round of cognitive testing.

- There were different interpretations of the terms “health insurance” versus “health care” versus “health coverage.” Most respondents considered the terms “health insurance” and “health care” when responding to these items. “Health coverage” was seen as a tertiary concept: “If you have health insurance, then you have coverage.” Another respondent said that coverage is what “The government or some other entity that I am not aware of would provide for me.”

Two respondents reported having no insurance, but upon interviewer probing, indicated they have comprehensive coverage through the VA. They had coverage that they just did not consider to be ‘health insurance.

- Most military personnel preferred terminology such as “benefit,” “program,” or “system” to refer to both TRICARE and VA.
- Another respondent listed “military healthcare” under the “Other” category.
- Some respondents found “Of this person” to be a stilted or awkward phrase: “Why not just say, ‘you’?” (The CATI version employed the more familiar ‘you.’) “Or another family member” was an accepted and well-understood term.
- There were instances where a single plan prompted multiple responses. One military respondent, for example, reported TRICARE coverage both at the first response option, ‘insurance through a current employer’ and at the ‘TRICARE’ option [listed fifth] since “The military *is* my current employer.”
- In another instance, a respondent who had a disability keyed on that word and marked the ‘Medical Assistance’ option [listed fourth] after reading the accompanying description: “*any* kind of government-assistance plan for those with low incomes or a disability.”
- One issue that the VA wanted to address through testing was whether respondents who had insurance through a job also reported that insurance as ‘purchased directly.’ We found no instances of this across the 39 sessions.

Recommendations:

It would be desirable to revise the item to encourage respondents to read all of the options. This might involve simplifying and shortening the language of the options that are provided. It also might involve turning the item into a series of yes/no response alternatives, trying to force respondent to read each one. However, neither of these solutions can be done without considering their impact on the primary purpose of this item, which is to collect health insurance coverage information for the entire population –

not just veterans. With this in mind, our recommendations for this item are the following:

- Move item 15a so that it is positioned together with 15b on the same page. The instruction to include VA and military programs at 15a would then be visually available to respondents at 15b.
- Omit CHAMPVA, as none of these respondents had ever heard of it. (Note, however, that we did not interview widows or dependents of Veterans.)
- Omit CHAMPUS, as it no longer exists. Older Veterans should be able to select “TRICARE or other military care.”

3.5 Reporting Active Duty Status

Question 21 Version 1

Have you ever served on active duty in the U.S. Armed Forces? *Active duty does not include training for the Reserves or National Guard. Mark [X] one box.*

- Now on active duty, WITH a prior discharge
- On active duty during the last 12 months, but not now
- On active duty in the past, but not during the last 12 months
- Training for Reserves or National Guard only-Skip to question 23
- Never served in the military-Skip to questions for next person

Question 21 Version 2

a. Has this person ever served on active duty in the U.S. Armed Forces? *Active duty does not include training for the Reserves or National Guard.*

- Yes
- No, Reserves or National Guard training only-Skip to question 23
- No, never served in the military-Skip to next person

b. This person's active duty status is:

- Currently active WITH a prior discharge
- Currently active WITHOUT a prior discharge
- On active duty in the last 12 months, but not now
- On active duty in the past, but not in the last 12 months

Question 23 CATI

A. Have you ever served on active duty in the U.S. Armed Forces?

Active duty does not include training in the Reserves or National Guard.

- Yes
- No-Skip to next person

A1. Did you ever train for the Reserves or National Guard?

- Yes
- No

B. Are you currently on active duty?

- Yes
- No

C. Did you have a prior discharge?

- Yes
- No

D. Have you been on active duty in the last 12 months?

- Yes
- No

Purpose of Item and Initial Response Issues:

The purpose of this item is to count the number of people currently and who had previously served in the Armed Forces. As part of this task, it is important to distinguish between current active duty military who have no prior discharge and those who do have a prior discharge. Those with a prior discharge comprise a special category of veterans called “military veterans” who must be accurately counted as they are eligible for specific VA benefits.

The language used in Version 2 is intended to minimize the chance that respondents read only part of the response option list or just skim the list and as a result miss the subtle distinction between categories.

Across all versions, it was important to make sure that people who only had training in the National Guard or Reserves but never served on active duty select the appropriate response category.

Findings:

- All respondents stated that they have served in the military, and there were no problems interpreting “active duty.” The term “prior discharge,” however, is confusing and means different things to different respondents. Although the VA is interested in capturing data on prior discharge, including re-enlistments, transfers, etc., many of our respondents did not interpret prior discharge in the same way.

- Several respondents included their DD214s when responding to this item, while others discounted their DD214s since there was no *break in service*. These participants explained that “A discharge and re-enlist is not considered a *break in service*.” “Discharges don't count [if just for moving around in military].” (While not included in the survey, the term DD214 itself was confusing to one respondent who thought this was a death benefit disbursement.)
- Respondents were eager to correct the wording of this item and several urged us to use the phrase “break in service” instead of “prior discharge.”
 - One respondent chose “Currently active WITHOUT a prior discharge” and then clarified “That’s [the answer] I’m picking, but every time you actually re-enlist, as an enlisted person, you are discharged.” The respondent stated “What you probably want to ask is ‘Do you have broken service?’ Broken service to a military person means you were in, you got out, became a civilian, and then came back in the military.”
 - One respondent found the categories confusing, and stated that “Discharge could mean several things.”
 - One respondent stated “Discharge to me means you’re out of the military altogether.” This respondent had trouble answering the question and second-guessed her answer, stating “Maybe it’s not a discharge, because I don’t have any breaks in service.”
- There were no strong interpretive differences between versions of the items; however, some differences were noted.
 - In Version One, a participant reported expecting to see a yes/no format since the question asks, “Have you ever served on active duty in the U.S. Armed Forces?”¹ Additionally, several participants commented that the choices were burdensome to read: “It took a long time to read through.” One respondent felt that “Never served in the military” should be listed first, so that each person would not be required to read through all of the possible answer categories before opting out.
 - In Version Two, which employed two questions with a skip pattern, there were no problems with the yes/no format. However a difficulty was noted with the Version Two response options. Two respondents noticed only the first part of the response options (Currently Active/Currently Active/On Active Duty/On Active Duty) and did not know which option applied as they were each attempting to report *prior* service. The vertical alignment

¹ It was our understanding that a “yes” or “no” preceded each of the response options in a previous version. This was changed for the version that was tested.

and repetition of the word “Active” interfered with the respondents’ ability to grasp the temporal distinctions between these categories. One respondent skipped the item altogether because the latter portion of the phrase was not read.

- With CATI administration, it was apparent that respondents did not retain the definition of active duty as given at point A (“*Active duty does not include training in the Reserves or National Guard*”) when responding to the query about active duty (“*Have you been on active duty in the last 12 months?*”) at point D. Four questions intervene.

Recommendations:

We recommend one of the following two options. One, use the two-question format of Version Two with the following wording changes to incorporate “break in service,” to break up a repetitious pattern, and to cue the respondent where to report a past event. The two-question format functioned as an efficient screener and reduced the wordiness of the response options, which participants preferred.

- 21b. This person’s active duty status is:
- Currently active **WITH** a break in service
 - Currently active **WITHOUT** a break in service
 - Not currently active, but active in the last 12 months
 - Not active in the last 12 months

A second option, if the VA wants respondents to include all DD214s, is to explicitly state and then explain that in the question.

A second recommendation is to remind CATI respondents of the definition of active duty at question 23d.

3.6 Reporting Active Duty: Period of Service

Question 22 Version 1

Question 22 Version 2

When did you serve on active duty in the U.S. Armed Forces? *Mark [X] a box for EACH period in which you served, even if just for part of that period.*

- September 2001 or later
- August 1990 to August 2001
- May 1975 to July 1990
- Vietnam Era (August 1964 to April 1975)
- February 1955 to July 1964
- Korean War (July 1950 to January 1955)
- January 1947 to June 1950
- World War II (December 1941 to December 1946)
- November 1941 or earlier

Question 24a CATI

Did you serve on active duty during: *Read each category. Enter all that apply even if the person served part of the period.*

- September 2001 or later
- August 1990 to August 2001
- May 1975 to July 1990
- Vietnam Era (August 1964 to April 1975)
- February 1955 to July 1964
- Korean War (July 1950 to January 1955)
- January 1947 to June 1950
- World War II (December 1941 to December 1946)
- November 1941 or earlier

Purpose of Item and Initial Response Issues:

The purpose of this item is to collect the “era” in which respondents served. Relative to other previous items that have been used to collect this information, this combines several different peacetime categories. The biggest initial concern with this item was that respondents only include periods of service for active duty and not include periods representing training only.

Findings:

- Some participants under-reported their periods of service, due to two different problems with the instructions. A few didn't immediately see the *Mark All That Apply* instruction and indicated only their 'primary' period of service. "Even for just part of period" was in Italics and missed by other respondents.
- A few participants who experienced difficulties with the response options pointed out to interviewers the differences in how periods are labeled – some are wars and some are time periods. The inconsistency in the phrasing increased the cognitive complexity of processing the options: "It was work to get the answer."
- "Era" was a problem for one non-native English speaker. This respondent, who did not go to Vietnam, was reluctant to mark this option even though he had served during that time. For another respondent, the word era seemed to evoke the entirety of the period, drawing his focus away from the response task to such an extent that he failed to report two other periods.
- None of the 39 participants were in Training Only for Reserves or National Guard for any of the periods listed. The Reserves and National Guard participants had been on active duty in the military prior to joining the Reserves or National Guard.
- For the CATI version, Respondents only included their "primary" period of service and did not include "*all that apply even if the person served part of the period*" since interviewers are not instructed to read the "part of the period" direction aloud. As written, that particular instruction is never communicated to respondents.

Recommendations:

- To avoid confusion, consider using response option choices with consistent and similar language. Use time periods of equal length to start the phrase, and follow these with descriptive text. If time periods are not tied to specific benefit-levels, consider using decades as a 'natural' divider and present time periods uniformly.
- Emphasize the instruction to the respondents. Retain bold text for all the question text *or* start the instruction on a different line.
- Consider replacing "September 2001 or later" with "September 2001 to present" to help orient the respondent.
- For the CATI, make "part of the period" a part of the question text so that interviewers must read it aloud.

3.7 Reporting Disability Rating

Question 23 Version 1

23a. Does this person have a VA service-connected disability rating?

If you have more than one service-connected disability, report the combined rating.

- Yes
- No-Skip to questions for next person

23b. What is this person's combined service-connected disability rating?

- 0 percent
- 10 or 20 percent
- 30 or 40 percent
- 50 or 60 percent
- 70 percent or higher

Question 23a Version 2

Does this person have a VA service-connected disability rating? *If this person has more than one service-connected disability, report the combined rating.*

- Yes _____%
RATING
- No-Skip to next person

Question 25 CATI

25a. Do you have a VA service-connected disability rating?

- Yes
- No-Skip to next person

25b. What is your service-connected disability rating? Report the combined rating if you have more than one service-connected disability.

Percent disability: _____

Prompt with categories if necessary

- 0 percent
- 10 or 20 percent
- 30 or 40 percent
- 50 or 60 percent
- 70 percent or higher

Purpose of Item and Initial Response Issues:

There purpose of this item is to obtain information on the disability ratings for service connected disabilities. These data will help VA measure demand for health care by health care enrollment priority. These data are needed at low levels of geography in order to measure demand and thus assign Veterans on a hierarchical basis to priority groups. These items will also account for a group of Veterans who may otherwise be missed. Anyone who receives services or is eligible to receive VA service-connected disability compensation is considered a Veteran. This includes individuals who were injured in training but never activated. The preceding question ["When did you serve on active duty?"] would not pick up these individuals as Veterans, since they would indicate that they never served on active duty, only training. However, they should be counted in this question. Lastly, it should provide a measure of those who are eligible to receive service-connected disability compensation versus those who actually elect to receive such payments.

The issues that were of initial of concern were:

- (1) Do people know their rating, or do they have to look at records to report this percentage?
- (2) Do respondents use the cues provided by the response categories (in 23b) in order to understand what the question is asking, or use it to help them remember/estimate their rating?
- (3) Understand how people with a single disability rating (as opposed to those with a combined disability rating) understand these questions. Do those with a combined disability rating have to compute the combined rating, or is it a figure they know? How

do people with a single disability rating interpret and respond to the term “combined disability rating”?

Findings:

- According to the sample frame received from VA, it was expected that fifteen respondents would have a disability rating. Fourteen of these fifteen indicated they have a disability. One was misclassified, and said that he had no disability.
- No respondent reported a service-connected disability that VA did not list.
- There were no interviews with 0% disability respondents.
- While most participants had little difficulty with this item, two of the fourteen respondents who said they had a rating did not know their specific service-connected disability rating.
- Most reported familiarity with the process undertaken to obtain a rating and felt that everyone would know it, since it is directly tied to compensation levels. One participant said: “You are sent a document that lists the rating and the disabilities considered. The average conscientious person will be waiting for this document and would put it with other important papers, such as a passport.”
- The use of category ranges does not allow researchers to investigate whether Veterans report their actual rating or the rating level at which they are compensated.
- Respondents do not have a uniform level of knowledge about actual vs. compensated levels of disability.
- Differences between Versions :
 - All of the open-ended responses (6) given in Version Two would have fit into the ranges provided in Version One.
 - One unemployable in the sample (Version One) was rated at 100% and chose “70% or higher.” For Version One, this is the correct response.
 - All of the participants who responded to Version One were able to report a rating within the categories provided.
 - In Version Two, five of the six people said “Yes,” and reported their rating. One person said “Yes” but did not know what his rating was and

left the item blank. It is possible that this participant would have felt more comfortable reporting a range rather than a specific number.

- In CATI, two people said “Yes” and reported a rating. One did not know exactly what his rating was, but guessed “5 – 10%.” If the category ranges had been read aloud, similar to the Version One presentation, the participant might have selected the response option, “10 or 20 percent,” eliminating the uncertainty of his response.
- The range provision would also have eliminated a potential source of error for another respondent who reported a current rating of 20 percent, but said he was trying to get it reviewed and ‘upped’ to 25%. Since all range options end in zero, this potential source of error would be circumvented.
- Single versus Combined Disability Rating:
 - Participants knew whether their rating was based on a single vs. multiple condition. Most reported the highest level of disability rating obtained, regardless of whether it was based on a single disability or multiple conditions. Although the distinction between these terms seemed apparent to participants, they could not definitively state how their ratings were calculated.

Recommendation:

- Retain the Version Two format. Although the Version One ranges would cue respondents who were unsure about their rating, most respondents were well aware of their rating, as this was a very salient number to them, and were able to report it accurately.

3.8 Reporting Disability Compensation

Question 23c Version 1

Question 23b Version 2

Does this person currently receive monthly service-connected disability compensation payments from VA?

- Yes
- No

Question 25c CATI

Do you currently receive monthly service-connected disability compensation payments from VA?

- Yes
- No

Purpose of Item and Initial Response Issues:

This item is the final part of the series of questions that intend to account for Veterans who might otherwise not be counted. It should provide a measure of those who actually elect to receive service-connected disability compensation payments from those who are eligible to receive those payments.

Findings:

- There is evidence of significant confusion between pension and disability compensation which could lead to overestimation. While some respondents were quite knowledgeable in this area, others were unable to reliably distinguish between the two. Three of four Type 7 respondents (who ostensibly do not receive a payment) reported to interviewers that they *do* receive a payment. One respondent reported that disability payments were a part of pension payments, but enjoyed special status for tax and other purposes.
- Recipients just know they receive monies on a monthly basis and report this money without knowing the difference between pension and disability because of how it's paid. They cannot report with any certainty which agency issued the check, especially when direct deposit is used. Since they received the monies, they would not question the source.

Recommendation:

- We recommend that this item be revised or deleted, as it is not fulfilling the Census Bureau's intent. Based on our interviews, there is reason to be concerned about the validity of responses to this item. It is not likely to discriminate between those who are eligible to receive service-connected disability compensation and those who actually elect to receive such payments. Further testing is needed to determine how well this item 'captures' Veterans who are missed by previous items.

APPENDIX A

ACS Health Insurance Coverage and Veteran Status Items Tested

Paper 1 and Paper 2: Item 15a

CATI: Item 17a

Are you CURRENTLY covered by any type of health insurance? *Include insurance obtained through a job or purchased directly from an insurance company, and government health insurance such as Medicare, Medicaid, VA and military programs.*

Yes

No-Skip to F

Paper 1 and Paper 2: Item 15b

CATI: Item 17b

What type of health insurance do you have? *Mark [X] all that apply.*

- Insurance through a current or former employer or union (of this person or another family member)
- Insurance purchased directly from an insurance company (by this person or another family member)
- Medicare, for people age 65 and older, or people with certain disabilities
- Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
- TRICARE, CHAMPUS or other military care
- VA or CHAMPVA (including those who have ever enrolled for or used VA health care)
- Indian Health Service
- Insurance that covers just one type of care (for example: dental, accident, nursing home care plans)
- Other-Specify

Paper 1: Item 21

Have you ever served on active duty in the U.S. Armed Forces? *Active duty does not include training for the Reserves or National Guard. Mark [X] one box.*

- Now on active duty, WITH a prior discharge
- On active duty during the last 12 months, but not now
- On active duty in the past, but not during the last 12 months
- Training for Reserves or National Guard only-Skip to question 23
- Never served in the military-Skip to questions for next person

Paper 2: Item 21

a. Has this person ever served on active duty in the U.S. Armed Forces? *Active duty does not include training for the Reserves or National Guard.*

- Yes
- No, Reserves or National Guard training only-Skip to question 23
- No, never served in the military-Skip to next person

b. This person's active duty status is:

- Currently active WITH a prior discharge
- Currently active WITHOUT a prior discharge
- On active duty in the last 12 months, but not now
- On active duty in the past, but not in the last 12 months

CATI: Item 23

A. Have you ever served on active duty in the U.S. Armed Forces?
Active duty does not include training in the Reserves or National Guard.

- Yes
- No-Skip to next person

A1. Did you ever train for the Reserves or National Guard?

- Yes
- No

B. Are you currently on active duty?

- Yes
- No

C. Did you have a prior discharge?

- Yes
- No

D. Have you been on active duty in the last 12 months?

- Yes
- No

Paper 1 and Paper 2: Item 22

When did you serve on active duty in the U.S. Armed Forces? *Mark [X] a box for EACH period in which you served, even if just for part of that period.*

- September 2001 or later
- August 1990 to August 2001
- May 1975 to July 1990
- Vietnam Era (August 1964 to April 1975)
- February 1955 to July 1964
- Korean War (July 1950 to January 1955)
- January 1947 to June 1950
- World War II (December 1941 to December 1946)
- November 1941 or earlier

CATI: Item 24a

Did you serve on active duty during: *Read each category. Enter all that apply even if the person served part of the period.*

- September 2001 or later
- August 1990 to August 2001
- May 1975 to July 1990
- Vietnam Era (August 1964 to April 1975)
- February 1955 to July 1964
- Korean War (July 1950 to January 1955)
- January 1947 to June 1950
- World War II (December 1941 to December 1946)
- November 1941 or earlier

Paper 1: Item 23a

Does this person have a VA service-connected disability rating?

If you have more than one service-connected disability, report the combined rating.

- Yes
- No-Skip to questions for next person

Paper 1: Item 23b

What is this person's combined service-connected disability rating?

- 0 percent
- 10 or 20 percent
- 30 or 40 percent
- 50 or 60 percent
- 70 percent or higher

Paper 2: Item 23a

Does this person have a VA service-connected disability rating? *If this person has more than one service-connected disability, report the combined rating.*

- Yes _____%
RATING
- No-Skip to next person

CATI: Item 25a

Do you have a VA service-connected disability rating?

- Yes
- No-Skip to next person

CATI: Item 25b

What is your service-connected disability rating? Report the combined rating if you have more than one service-connected disability.

Percent disability: _____

Prompt with categories if necessary

- 0 percent
- 10 or 20 percent
- 30 or 40 percent
- 50 or 60 percent
- 70 percent or higher

Paper 1: Item 23c

Paper 2: Item 23b

Does this person currently receive monthly service-connected disability compensation payments from VA?

- Yes
- No

CATI: Item 25c

Do you currently receive monthly service-connected disability compensation payments from VA?

- Yes
- No

APPENDIX B

Recruiting Screener

Veterans and Health Insurance Cognitive Interviews - Participant Screener -

Name: _____ Phone: _____ ID#: _____

Hi my name is _____. I work for a company in Rockville, MD called Westat. We were hired by the U.S. Census Bureau to conduct some research. The Census Bureau is working with the Department of Veterans Affairs to develop a series of questions for veterans and military personnel to include on a very important Census Bureau survey, the American Community Survey. I'm calling to ask you to participate in this research project. We will pay you \$40 to complete a one hour interview at our Rockville office. Your participation is voluntary and cannot affect any VA benefits you may receive now or in the future.

[IF ASKED HOW WESTAT GOT THEIR NAME]: The Census Bureau, the Department of Veterans Affairs, and the Department of Defense have signed agreements that provide the Census Bureau with names and phone numbers of veterans and military personnel in the DC metro area. The information provided by VA and the Department of Defense can ONLY be used for the purpose of conducting research on the American Community Survey.

We are scheduling interviews from February 1st through Feb. 28th.

In order to find out if you are eligible to participate in this study, I need to ask you a few questions.

1. How old are you?

: _____: [IF UNDER 18, TERMINATE]

2. RECORD GENDER. IF NOT OBVIOUS, ASK: Are you male or female?

MALE : _____:

FEMALE : _____:

3. What is the highest level of education you have completed?

LESS THAN HIGH SCHOOL : _____:

HIGH SCHOOL/GED : _____:

SOME COLLEGE/VOC. ED : _____:

COLLEGE DEGREE : _____:

GRADUATE SCHOOL : _____:

4. What is your race or ethnic background?

WHITE : _____:

BLACK/AFRICAN AMER. : _____:

HISPANIC/LATINO : _____:

ASIAN : _____:

SOMETHING ELSE : _____:

NOTE TO RECRUITER: WE DO NOT HAVE SPECIFIC TARGETS FOR ANY DEMOGRAPHIC VARIABLE, BUT WE ARE TRYING FOR A MIX OF DEMOGRAPHIC CHARACTERISTICS. KEEP TRACK OF WHAT YOU ARE GETTING FOR THE FOLLOWING, AND CHECK IF YOU

ARE GETTING HIGH NUMBERS FOR ONE/SOME SUBGROUPS AND ALMOST NONE FOR THE OTHER(S) SUBGROUP(S).

- Age
- Gender
- Education level
- Race/ethnicity

Those are all the questions I have.

[IF WE ALREADY HAVE "ENOUGH" PEOPLE WITH THIS DEMOGRAPHIC PROFILE]:

Thank you for your information. We have fulfilled the requirements for [veterans/military] of your demographic group. If someone who is already scheduled had to cancel his or her interview, we may call you back to see if you are still available. Is that okay?

_____ Yes
_____ No

[IF WE ARE ACCEPTING THIS PERSON FOR INTERVIEW]:

I'd like to schedule a time for your interview.

DATE: _____ TIME: _____

Let me verify your name and address so I can send you directions. It will include instructions on where to park. If you have to cancel your interview, please call back so that we can schedule someone in your place, OK. Thanks very much.

Name: _____

Address: _____

Phone number: _____

APPENDIX C
Cognitive Interview Guides
(Two Paper Versions, one CATI version)

Cognitive Testing Version 1 Paper

Assumptions:

- A ‘think aloud’ approach will be used.
- Probe for obvious ‘issues’ (if there is a noticeable problem or response is ‘don’t know’) while completing the form/interview.
- Probes labeled “concurrent” should be asked while completing the form/interview.
- Majority of probing will be retrospective and asked after completion of the interview. Probes should be tailored to the respondent, and perhaps tailored to apply to more than one of the household members.

Probing Strategy:

- A ‘think aloud’ approach will be used including a practice think aloud exercise after the respondent signs the consent form
- Read questions as worded and follow appropriate skips. Fill in their answers and note any observations.
- Majority of probing will be retrospective - done AFTER all ACS items have been asked. Repeat the question (“One of the questions I asked you was.....”) along with the respondent’s answer. Then probe. As necessary, tailor probes to the respondent, and the person or situation for which the respondent is reporting.
- While completing the form/interview, probe IMMEDIATELY on obvious ‘issues’ – a noticeable problem such as respondent confusion, changing of answers, a very long pause, response is ‘don’t know,’ the respondent asks a question, or the cognitive interviewer needs some clarification on something the respondent said as part of the think aloud response. Example generic probes are:
 - *I noticed you hesitated before answering – can you tell me what you were thinking about?*
 - *Something seems to be confusing here – can you tell me about that?*
- Follow-up with more specific probes (e.g., those regarding specific phrases), as appropriate.
- Before dismissing respondent, ask if they have any additional comments on the questions asked in the interview.

Interview Flow:

Question text: **Bold**

Instructions: *Italics*

Skip instructions are color coded.

RETROSPECTIVE PROBES are in BLUE Arial font.

CONCURRENT PROBES FOR USE AS NEEDED ON ANY ITEM:
(If needed, use a specific retroactive probe listed with the item)

Respondent is obviously confused

- Something seems to be confusing here – what is it?
 - [If needed]: Is it the question, or the response options? Why?
 - [If question]: What do you think this question is trying to get at?
 - [If options]: Why are these options not right for you?
 - [If R does not like the options] What needs to be listed here so that you can easily give an answer?

Respondent changes answer

- What caused you to change your mind about that?
- What just occurred to you – that didn't come to you when you first read the question?

Respondent pauses for a long time

- You hesitated before answering – what are you thinking about?

Respondent says “I don’t know”

- What do you think this question is asking?

Respondent asks a question

- What do you think?
- If you were filling this out at home alone, what would you do at this point?

Cognitive interviewer needs some clarification on something the respondent said as part of the think aloud response

- Tell me more about that...

ITEMS

15a. Are you CURRENTLY covered by any type of health insurance? *Include insurance obtained through a job or purchased directly from an insurance company, and government health insurance such as Medicare, Medicaid, VA and military programs.*

- ☐ Yes
- ☐ No-Skip to F

Probes:

[Pay attention to and note what words the R uses to describe health care coverage of veterans and people in the military! Do they call it health insurance or health care or health coverage?]

In your own words, what is this question asking?

What does the phrase “CURRENTLY covered” mean to you?

What does the phrase “any type of health insurance” mean to you?

- What types of health plans would you include?
- [What types of health plans would you exclude?]

What do you think of the phrase “and government health insurance such as Medicare, Medicaid, VA, and military programs?”

- In your own words, what does “government health insurance” mean to you?
- Do you think what the VA provides is “government health insurance?” Why or why not?
 - [If needed]: Do you pay a premium for this?
- Does the VA provide “health insurance,” “health care,” or “health coverage?”

Here is the second sentence of the item -- [Read the ‘include’ statement]. Does this sentence help clarify what the question is asking, or make it more confusing?

- Why?
- Which specific words or examples help to clarify what the question is getting at?
- Which specific words or examples make the question more confusing?

IF R's RESPONSE TO ITEM 15a WAS "NO":

*a) What do you do when you're sick or need to see a doctor? [If needed]: Do you pay for that?

[Find out if R has access to any type of health care.]

*b) Are you covered by Medicaid, sometimes called Medical Assistance, or any other type of government-assistance program?

*c) Have you ever used a VA hospital or clinic, or used or enrolled for VA health care of any kind?

**If R says "Yes" to probes a, b, or c:* I'm going to ask you to tell me what about the question led you to say "No." [Reread the question.] What is it about this question that made you say "No" the first time you went through it?

15b. What type of health insurance do you have? Mark [X] all that apply.

- ☐ Insurance through a current or former employer or union (of this person or another family member)
- ☐ Insurance purchased directly from an insurance company (by this person or another family member)
- ☐ Medicare, for people age 65 and older, or people with certain disabilities
- ☐ Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
- ☐ TRICARE, CHAMPUS or other military care
- ☐ VA or CHAMPVA (including those who have ever enrolled for or used VA health care)
- ☐ Indian Health Service
- ☐ Insurance that covers just one type of care (for example: dental, accident, nursing home care plans)
- ☐ Other-*Specify*

NOTE TO MODERATOR: Look at the value for R's TYPE variable in file – and monitor whether the R answers the probes in a manner consistent with that TYPE.

- Type 2 should NOT say they are TRICARE or VA (check!)
- Type 4 – 7: should say they are VA users

What came to mind when you were looking over this list of health insurance plans?

Why did you choose [answer R picked]?

- Tell me how you came to be covered by that type of insurance.
 - Did you sign up through your work, a family member's work, through a government agency, or something else?
 - Do you remember roughly when your coverage began, or how long you have had it?

Let's look at the listed types of insurance. Are you familiar with each of them?

[Reread each option and probe about each as needed.]

- In your own words, what does this mean?
- For Options 1 and 2:
 - What does the phrase "by this person or another family member" mean to you?

IF R PICKS "INSURANCE THROUGH A CURRENT OR FORMER EMPLOYER OR UNION" (Option 1):

- Before having that insurance, did you ever receive treatment at a VA hospital?
 - [If "Yes" and R did not mark the VA option]: Do you consider that to be coverage by the VA? Why or why not?

IF R PICKS "INSURANCE PURCHASED DIRECTLY" (Option 2):

- Tell me more about why you chose this option.
 - Do you pay the full cost of the premium or is the cost shared with some other organization (e.g., your employer)?

IF R PICKS "MEDICARE" or "MEDICAID" (Option 3):

- In your own words, what is [the one R picked]?
- How is that different from [the one not picked]?

IF R PICKS VA or CHAMPVA [Option 6]:

- Are you covered by CHAMPVA --Yes or No?

- Are you enrolled in VA health care -- Yes or No?
- Have you used VA health care -- Yes or No?

[INDICATE WITH ✓/ WHICH GROUP R FALLS INTO – What accounts for a Yes response]:

	<u>CHAMPVA</u>	<u>Enrolled in VA</u>	<u>Used VA</u>
_____	Yes	Yes	Yes
_____	Yes	Yes	No
_____	Yes	No	Yes
_____	Yes	No	No
_____	No	Yes	Yes
_____	No	Yes	No
_____	No	No	Yes

IF R PICKS MORE THAN ONE RESPONSE OPTION:

- How many different plans do you have?
- [If only one plan – but still more than one response option]: Tell me why you chose multiple options here to capture your one plan.

FINAL QUESTIONS:

Do you have any kind of health insurance that isn't listed here?

- Do you have any kind of coverage you haven't mentioned so far?

In your mind, is there a difference between “coverage” and “insurance”? If so, what is it?

21. Have you ever served on active duty in the U.S. Armed Forces? *Active duty does not include training for the Reserves or National Guard. Mark [X] one box.*

- ☐ Now on active duty, WITH a prior discharge
- ☐ Now on active duty, WITHOUT a prior discharge
- ☐ On active duty during the last 12 months, but not now
- ☐ On active duty in the past, but not during the last 12 months
- ☐ Training for Reserves or National Guard only-*Skip to question 23*
- ☐ Never served in the military-*Skip to questions for next person*

CHECK: IF R is TYPE = 2, s/he should say option 5 and skip to Item 23

If R is TYPE 1, should say option 1 or 2.

General probes:

How did you come up with your answer?

In your own words, what is the difference between active duty and the Reserves or National Guard?

Does active duty include basic training or not?

How easy or difficult was it to answer this question? Why?

Specific option probes:

What does the phrase “prior discharge” mean to you?

- Do you have a DD214?
- [If R is unsure of whether s/he has a prior discharge]: Tell me about the circumstances that make you not sure about that...

Options 3 and 4:

[If troubled about the 12 month period or had to decide between these two options]:

- How did you decide what your status was during the last 12 months?
- During what period were you on active duty – what month and year to what month and year? [Look at what s/he answered for Q 22 – the next item.]

IF R IS TYPE 3 (IN THE RESERVES OR NATIONAL GUARD):

- Were you federally activated? [Verify this.]

22. When did you serve on active duty in the U.S. Armed Forces? Mark [X] a box for EACH period in which you served, even if just for part of that period.

- September 2001 or later
- August 1990 to August 2001
- May 1975 to July 1990
- Vietnam Era (August 1964 to April 1975)
- February 1955 to July 1964
- Korean War (July 1950 to January 1955)
- January 1947 to June 1950

- World War II (December 1941 to December 1946)
- November 1941 or earlier

CHECK: Could get R's age from recruiting screener, to check on maximum age for checking a period.

Probes:

What do you think this question is asking?

Tell me how you came up with your answer of [_____].

- Did you serve for any other periods?

[If only one period is chosen, ask]: Were there any other periods in which you served on active duty, even if only for a short time?

How did you decide which period (or periods) of time to pick from this list?

During [each reported] period of time, were you in training only?

23a. Do you have a VA service-connected disability rating?

- Yes
- No- *Skip to questions for next person*

CHECK: if R's TYPE = 4, 5, 6, or 7, R should answer "Yes."

Probes:

What does the phrase "service-connected disability rating" mean to you?

How do you know whether or not you have a service-connected disability rating?

How did you come up with your answer to this question?

- Did you have any injuries that resulted in a disability?
- [If R has a rating]: Do you have a single service-connected disability or more than one service connected disability? CHECK: if R's TYPE = 4, R should say ONE CONDITION. If R's TYPE = 5, 6, or 7, R should say MORE THAN ONE CONDITION.

IF R HAS MORE THAN ONE SERVICE-CONNECTED CONDITION:

- What is the difference between a condition rating and a combined rating?

23b. What is your combined service-connected disability rating?

- 0 percent
- 10 or 20 percent
- 30 or 40 percent
- 50 or 60 percent
- 70 percent or higher

Probes:

What does the phrase “combined service-connected disability rating” mean to you?

- How was it calculated?

If these ranges of numbers were not given to you here, how would you answer the question?

- Did you need these percentages in order to understand what the question was getting at? Why or why not?

IF R HAS A SINGLE DISABILITY RATING:

- You answered [_____]. How did you come up with that answer? [Did R give the single rating?]
- If you don't think you have a combined rating, do you assume that you have a single rating – as a default?
- Is this something that you just know, or would you have to look it up somewhere?

IF R HAS A COMBINED DISABILITY RATING:

- How did you decide that your combined SC disability rating is [_____]?
- Is this something that you just know, or would you have to look it up somewhere?

23c. Do you currently receive monthly service-connected disability compensation payments from VA?

- Yes
- No

CHECK: If R's TYPE = 7a, b, or c, should say "No."

Probes:

How did you know to respond [Yes/No]?

IF R SAYS NO TO THIS ITEM:

- In question 23a, you said you have a disability rating. Do you receive any type of compensation for that disability?
 - [If no]: Do you receive any compensation from VA? What for?
 - Did you opt not to receive a compensation payment for a disability? [NOTE: vets may take pension rather than the disability payments.]

IF R SAYS "YES" TO THIS ITEM BUT HAS AN SC RATING OF 0%:

- Tell me more about these payments from the VA.

IF R SAYS "YES" TO THIS ITEM AND REPORTED A DISABILITY RATING ABOVE 0%:

- Did you report your actual rating or the rating you're compensated at -- or are they the same?
- Are you rated as "unemployable" and compensated at the 100% rating level? CHECK: IF R says "Yes" to this probe, R should be a TYPE = 6
 - [If "Yes"]: What is your actual disability rating? [Find out if it is really 100 or less than that.]
 - What does the term "individually un-employable" mean to you?

Cognitive Testing Version 2 Paper

Assumptions:

- A ‘think aloud’ approach will be used.
- Probe for obvious ‘issues’ (if there is a noticeable problem or response is ‘don’t know’) while completing the form/interview.
- Probes labeled “concurrent” should be asked while completing the form/interview.
- Majority of probing will be retrospective and asked after completion of the interview. Probes should be tailored to the respondent, and perhaps tailored to apply to more than one of the household members.

Probing Strategy:

- A ‘think aloud’ approach will be used including a practice think aloud exercise after the respondent signs the consent form
- Read questions as worded and follow appropriate skips. Fill in their answers and note any observations.
- Majority of probing will be retrospective - done AFTER all ACS items have been asked. Repeat the question (“One of the questions I asked you was.....”) along with the respondent’s answer. Then probe. As necessary, tailor probes to the respondent, and the person or situation for which the respondent is reporting.
- While completing the form/interview, probe IMMEDIATELY on obvious ‘issues’ – a noticeable problem such as respondent confusion, changing of answers, a very long pause, response is ‘don’t know,’ the respondent asks a question, or the cognitive interviewer needs some clarification on something the respondent said as part of the think aloud response. Example generic probes are:
 - *I noticed you hesitated before answering – can you tell me what you were thinking about?*
 - *Something seems to be confusing here – can you tell me about that?*
- Follow-up with more specific probes (e.g., those regarding specific phrases), as appropriate.
- Before dismissing respondent, ask if they have any additional comments on the questions asked in the interview.

Interview Flow:

Question text: **Bold**

Instructions: *Italics*

Skip instructions are color coded.

RETROSPECTIVE PROBES are in BLUE Arial font.

CONCURRENT PROBES FOR USE AS NEEDED ON ANY ITEM:
(If needed, use a specific retroactive probe listed with the item)

Respondent is obviously confused

- Something seems to be confusing here – what is it?
 - [If needed]: Is it the question, or the response options? Why?
 - [If question]: What do you think this question is trying to get at?
 - [If options]: Why are these options not right for you?
 - [If R does not like the options] What needs to be listed here so that you can easily give an answer?

Respondent changes answer

- What caused you to change your mind about that?
- What just occurred to you – that didn't come to you when you first read the question?

Respondent pauses for a long time

- You hesitated before answering – what are you thinking about?

Respondent says “I don't know”

- What do you think this question is asking?

Respondent asks a question

- What do you think?
- If you were filling this out at home alone, what would you do at this point?

Cognitive interviewer needs some clarification on something the respondent said as part of the think aloud response

- Tell me more about that...

ITEMS

15a. Are you CURRENTLY covered by any type of health insurance? *Include insurance obtained through a job or purchased directly from an insurance company, and government health insurance such as Medicare, Medicaid, VA and military programs.*

- ☐ Yes
- ☐ No-Skip to F

Probes:

[Pay attention to and note what words the R uses to describe health care coverage of veterans and people in the military! Do they call it health insurance, health care, or health coverage?]

In your own words, what is this question asking?

What does the phrase “CURRENTLY covered” mean to you?

What does the phrase “any type of health insurance” mean to you?

- What types of health plans would you include?
- [What types of health plans would you exclude?]

What do you think of the phrase “and government health insurance such as Medicare, Medicaid, VA, and military programs?”

- In your own words, what does “government health insurance” mean?
- Do you think what the VA provides is “government health insurance?”
Why or why not?
 - [If needed]: Do you pay a premium for this?

- Do you think the VA provides “health insurance,” “health care,” or “health coverage?”

Here is the second sentence of the item -- [Read italicized statement]. Does this sentence help clarify what the question is asking, or make it more confusing?

- Why?
- Which specific words or examples help to clarify what the question is getting at?
- Which specific words or examples make the question more confusing?

IF R's RESPONSE TO ITEM 15a WAS “NO”:

*a) What do you do when you're sick or need to see a doctor? [If needed]: Do you pay for that?

[Find out if R has access to any type of health care.]

*b) Are you covered by Medicaid, sometimes called Medical Assistance, or any other type of government-assistance program?

*c) Have you ever used a VA hospital or clinic, or used or enrolled for VA health care of any kind?

****If R says “Yes” to probes a, b, or c:*** I'm going to ask you to tell me what about the question led you to say “No.” [Reread the question.] What is it about this question that made you say “No” the first time you went through it?

15b. What type of health insurance do you have? Mark [X] all that apply.

- ☐ Insurance through a current or former employer or union (of this person or another family member)
- ☐ Insurance purchased directly from an insurance company (by this person or another family member)
- ☐ Medicare, for people age 65 and older, or people with certain disabilities
- ☐ Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
- ☐ TRICARE, CHAMPUS or other military care
- ☐ VA or CHAMPVA (including those who have ever enrolled for or used VA health care)
- ☐ Indian Health Service
- ☐ Insurance that covers just one type of care (for example: dental, accident, nursing home care plans)
- ☐ Other-*Specify*

NOTE TO MODERATOR: Look at the value for R's TYPE variable in file – and monitor whether the R answers the probes in a manner consistent with that TYPE.

- Type 2 should NOT say they are TRICARE or VA (check!)
- Type 4 – 7: should say they are VA users

What came to mind when you were looking over this list of health insurance plans?

Why did you choose [answer R picked]?

- Tell me how you came to be covered by that type of insurance.
 - ☐ Did you sign up through your work, a family member's work, through a government agency, or something else?
 - ☐ Do you remember roughly when your coverage began, or how long you have had it?

Let's look at the listed types of insurance. Are you familiar with each of them?
[Reread each option and probe about each as needed.]

- In your own words, what does this mean?
- For Options 1 and 2:
 - What does the phrase “by this person or another family member” mean to you?

IF R PICKS “INSURANCE THROUGH A CURRENT OR FORMER EMPLOYER OR UNION” (Option 1):

- Before having that insurance, did you ever receive treatment at a VA hospital?
 - [If “Yes” and R did not mark the VA option]: Do you consider that to be coverage by the VA? Why or why not?

IF R PICKS “INSURANCE PURCHASED DIRECTLY” (Option 2):

- Tell me more about why you chose this option.
 - Do you pay the full cost of the premium or is the cost shared with some other organization (e.g., your employer)?

IF R PICKS “MEDICARE” or “MEDICAID” (Options 3 or 4):

- In your own words, what is [the one R picked]?
- How is that different from [the one not picked]?

IF R PICKS VA or CHAMPVA [Option 6]:

- Are you covered by CHAMPVA -- Yes or No?
- Are you enrolled in VA health care -- Yes or No?
- Have you used VA health care -- Yes or No?

[INDICATE WITH √ WHICH GROUP R FALLS INTO – What accounts for a Yes response]:

	<u>CHAMPVA</u>	<u>Enrolled in VA</u>	<u>Used VA</u>
_____	Yes	Yes	Yes
_____	Yes	Yes	No
_____	Yes	No	Yes
_____	Yes	No	No
_____	No	Yes	Yes
_____	No	Yes	No
_____	No	No	Yes

IF R PICKS MORE THAN ONE RESPONSE OPTION:

- How many different plans do you have?
- [If only one plan – but still more than one response option]: Tell me why you chose multiple options here to capture your one plan.

FINAL QUESTIONS:

Do you have any kind of health insurance that isn't listed here?

- Do you have any kind of coverage you haven't mentioned so far?

In your mind, is there a difference between “coverage” and “insurance”? If so, what is it?

21a. Has this person ever served on active duty in the U.S. Armed Forces? *Active duty does not include training for the Reserves or National Guard.*

- ☐ Yes
- ☐ No, Reserves or National Guard training only-*Skip to question 23*
- ☐ No, never served in the military-*Skip to next person*

CHECK: TYPE = 2 should answer “No” -- not a veteran and skip to Item 23

Probes:

How did you come up with your answer?

In your own words, what is the difference between active duty and the Reserves or National Guard?

Does active duty include basic training or not?

How easy or difficult was it to answer this question? Why?

IF R IS TYPE 3 (IN THE RESERVES OR NATIONAL GUARD):

- Were you federally activated? *[Verify this.]*

21b. This person’s active duty status is:

- ☐ Currently active WITH a prior discharge
- ☐ Currently active WITHOUT a prior discharge
- ☐ On active duty in the last 12 months, but not now
- ☐ On active duty in the past, but not in the last 12 months

What does the phrase “prior discharge” mean to you?

- Do you have a DD214?
- [If R is unsure of whether s/he has a prior discharge]: Tell me about the circumstances that make you not sure about that...

Options 3 and 4:

[If troubled about the 12 month period or had to decide between these two options]:

- How did you decide what your status was during the last 12 months?
- During what period were you on active duty – what month and year to what month and year? [Look ahead to see how they answered Item 22—the next item.]

22. When did you serve on active duty in the U.S. Armed Forces? *Mark [X] a box for EACH period in which you served, even if just for part of that period.*

- September 2001 or later
- August 1990 to August 2001
- May 1975 to July 1990
- Vietnam Era (August 1964 to April 1975)
- February 1955 to July 1964
- Korean War (July 1950 to January 1955)
- January 1947 to June 1950
- World War II (December 1941 to December 1946)
- November 1941 or earlier

Probes:

What do you think this question is asking?

Tell me how you came up with your answer of [_____].

- Did you serve for any other periods?

How did you decide which period (or periods) of time to pick from this list?

During [read each reported] period of time, were you in training only?

23a. Do you have a VA service-connected disability rating? *If you have more than one service-connected disability, report the combined rating.*

○ Yes→ _____ %
RATING

○ No-Skip to next person

CHECK: if R's TYPE = 4, 5, 6, or 7, R should answer "Yes" and write in a percentage.

Probes:

What does the phrase "service-connected disability rating" mean to you?

What does the phrase "more than one service-connected disability" mean to you?

What does the phrase "combined service-connected disability rating" mean to you?

- How was it calculated?

How do you know whether or not you have a service-connected disability rating?

How did you come up with your answer to this question?

- Do you have a single disability rating or more than one service-connected disability? CHECK: if R's TYPE = 4, R should say ONE CONDITION. If R's TYPE = 5, 6, or 7, R should say MORE THAN ONE CONDITION.

IF R HAS A SINGLE DISABILITY RATING:

- You answered [_____]. How did you come up with that answer? [Did R give the single rating?]

- If you don't think you have a combined rating, do you assume that you have a single rating – as a default?
- Is this something that you just know, or would you have to look it up somewhere?

IF R HAS A COMBINED DISABILITY RATING:

- How did you know that your combined SC disability rating is []?
- Is this something that you just know, or would you have to look it up somewhere?

23b. Do you currently receive monthly service-connected disability compensation payments from VA?

- Yes
- No

CHECK: If R's TYPE = 7a, b, or c, should say "No."

Probes:

How did you come up with your answer?

IF R SAYS "YES" TO ITEM 23b:

- Is this a pension, or a compensation for a disability?
- Which agency does the check come from? [Find out if it is VA or DOD]

IF R HAS AN SC RATING OF 0% FOR 23a):

- Tell me more about these payments from the VA.

IF R HAS AN SC RATING ABOVE 0% for 23a:

- Did you report your actual rating or the rating you're compensated at, or are they the same?

- Are you rated as “unemployable” and compensated at the 100% rating level? CHECK: IF R says “Yes” to this probe, R should be a TYPE = 6
 - [If “Yes”]: What is your actual disability rating? [Find out if it is really 100 or less than that.]
- What does the term “individually un-employable” mean to you?

IF R SAYS “NO” TO ITEM 23b, BUT REPORTED A PERCENTAGE FOR 23a:

- In question 23a, you said you have a disability rating. Do you receive any type of compensation for that disability?
 - [If no]: Do you receive any compensation from VA? What for?
- Did you opt not to receive a compensation payment for a disability? [NOTE: vets may take pension rather than the disability payments.]

CATI VERSION

Assumptions:

- A ‘think aloud’ approach will be used
- Probe for obvious ‘issues’ (if there is a noticeable problem or response is ‘don’t know’) while completing the form/interview
- Probes labeled “concurrent” should be asked while completing the form/interview
- Majority of probing will be retrospective and asked after completion of the interview. Probes should be tailored to the respondent, and perhaps tailored to apply to more than one of the household members.

Probing Strategy:

- A ‘think aloud’ approach will be used including a practice think aloud exercise after the respondent signs the consent form
- Administer the ACS survey. Read questions as worded and follow appropriate skips. Fill in their answers and note any observations.
- Majority of probing will be retrospective - done AFTER all ACS items have been asked. Repeat the question (“One of the questions I asked you was.....”) along with the respondent’s answer. Then probe. As necessary, tailor probes to the respondent, and the person or situation for which the respondent is reporting.
- While completing the form/interview, probe IMMEDIATELY on obvious ‘issues’ – a noticeable problem such as respondent confusion, changing of answers, a very long pause, response is ‘don’t know,’ the respondent asks a question, or the cognitive interviewer needs some clarification on something the respondent said as part of the think aloud response. Example generic probes are:
 - *I noticed you hesitated before answering – can you tell me what you were thinking about?*
 - *Something seems to be confusing here – can you tell me about that?*
- Follow-up with more specific probes (e.g., those regarding specific phrases), as appropriate.
- Before dismissing respondent, ask if they have any additional comments on the questions asked in the interview.

Interview Flow:

Question text: **Bold**

Instructions: *Italics*

Skip instructions are color coded.

RETROSPECTIVE PROBES are in BLUE Arial font.

CONCURRENT PROBES FOR USE AS NEEDED ON ANY ITEM:

(If needed, use a specific retroactive probe listed with the item)

Respondent is obviously confused

- Something seems to be confusing here – what is it?
 - [If needed]: Is it the question, or the response options? Why?
 - [If question]: What do you think this question is trying to get at?
 - [If options]: Why are these options not right for you?
 - [If R does not like the options] What needs to be listed here so that you can easily give an answer?

Respondent changes answer

- What caused you to change your mind about that?
- What just occurred to you – that didn't come to you when you first read the question?

Respondent pauses for a long time

- You hesitated before answering – what are you thinking about?

Respondent says “I don’t know”

- What do you think this question is asking?

Respondent asks a question

- What do you think?
- If you were filling this out at home alone, what would you do at this point?

Cognitive interviewer needs some clarification on something the respondent said as part of the think aloud response

- Tell me more about that...

17a. Is this person/Are you **CURRENTLY** covered by any type of health insurance? Include insurance obtained through a job or purchased directly from an insurance company, and government health insurance such as Medicare, Medicaid, VA and military programs.

Yes

No- **Skip to question 18a**

Probes:

[Pay attention to and note what words the R uses to describe health care coverage of veterans and people in the military! Do they call it health insurance or health care or health coverage?]

In your own words, what is this question asking?

What does the phrase "CURRENTLY covered" mean to you?

What does the phrase "any type of health insurance" mean to you?

- What types of health plans would you include?
- [What types of health plans would you exclude?]

What do you think of the phrase "and government health insurance such as Medicare, Medicaid, VA, and military programs?"

- In your own words, what does "government health insurance" mean?
- Do you think what the VA provides is "government health insurance?" Why or why not?
 - [If needed]: Do you pay a premium for this?
- Does the VA provide "health insurance," "health care," or "health coverage?"

Here is the second sentence of the item -- [Read the 'include' statement]. Does this sentence help clarify what the question is asking, or make it more confusing?

- Why?
- Which specific words or examples help to clarify what the question is getting at?
- Which specific words or examples make the question more confusing?

IF R's RESPONSE TO ITEM 15a WAS "NO":

*a) What do you do when you're sick or need to see a doctor? [If needed]: Do you pay for that?

[Find out if R has access to any type of health care.]

*b) Are you covered by Medicaid, sometimes called Medical Assistance, or any other type of government-assistance program?

*c) Have you ever used a VA hospital or clinic, or used or enrolled for VA health care of any kind?

***If R says "Yes" to probes a, b, or c:** I'm going to ask you to tell me what about the question led you to say "No."
[Reread the question.] What is it about this question that made you say "No" the first time you went through it?

17b. Do you have:

Read response options. Enter all that apply.

- 1 Insurance through a current or former employer or union (of this person or another family member)
- 2 Insurance purchased directly from an insurance company (by this person or another family member)
- 3 Medicare, for people 65 and older, or people with certain disabilities
- 4 Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
- 5 TRICARE, CHAMPUS or other military care
- 6 VA or CHAMPVA (including those who have ever enrolled for or used VA health care)
- 7 Indian Health Service
- 8 Insurance that covers just one type of care (for example: dental, accident, nursing home care plans)
- 9 Some other type of insurance-*Specify*

NOTE TO MODERATOR: Look at the value for R's TYPE variable in file – and monitor whether the R answers the probes in a manner consistent with that TYPE.

- Type 2 should NOT say they are TRICARE or VA (check!)
- Type 4 – 7: should say they are VA users

[NOTE WHETHER THIS CATI MODE (Y/N PER PART) YIELDS MORE MULTIPLE RESPONSES VS. PAPER ITEMS]

What came to mind when I read this list of health plans to you?

Tell me how you came to be covered by that type of insurance.

- [Did you sign up through your work, a family member's work, through a government agency, or something else?]
- Do you remember roughly when your coverage began, or how long you have had it?

I'm going to go over each type of insurance. Are you familiar with? [Reread each option and probe about each as needed.]

- In your own words, what does this mean?
- For Options 1 and 2:
 - What does the phrase "by this person or another family member" mean to you?

IF R PICKS "INSURANCE THROUGH A CURRENT OR FORMER EMPLOYER OR UNION" (Option 1):

- Before having that insurance, did you ever receive treatment at a VA hospital?
 - [If "Yes" and R did not mark the VA option]: Do you consider that to be coverage by the VA? Why or why not?

IF R PICKS "INSURANCE PURCHASED DIRECTLY" (Option 2) :

- Tell me more about why you chose this option.
 - Do you pay the full cost of the premium or is the cost shared with some other organization (e.g., your employer)?

IF R PICKS "MEDICARE" or "MEDICAID" (Options 3 & 4):

- In your own words, what is [the one R picked]?
- How is that different from [the one not picked]?

IF R PICKS SOME TYPE OF PUBLIC COVERAGE [Options 3 - 7]:

- Tell me more about how you became familiar with that particular name of the plan.
 - Was it through an application process, a friend, a family member, or something else?
 - What would be the best term(s) to use here – to make sure that you'd pick the right answer(s) from this list?

IF R PICKS VA or CHAMPVA [Option 6]:

- Are you covered by CHAMPVA-- Yes or No?
- Are you enrolled in VA health care -- Yes or No?
- Have you used VA health care -- Yes or No?

[INDICATE WITH ✓ WHICH GROUP R FALLS INTO – What accounts for a Yes response]:

	<u>CHAMPVA</u>	<u>Enrolled in VA</u>	<u>Used VA</u>
_____	Yes	Yes	Yes
_____	Yes	Yes	No
_____	Yes	No	Yes
_____	Yes	No	No
_____	No	Yes	Yes
_____	No	Yes	No
_____	No	No	Yes

IF R PICKS MORE THAN ONE RESPONSE OPTION:

- How many different plans do you have?
- [If only one plan – but still more than one response option]: Tell me why you chose multiple options here to capture your one plan.

FINAL QUESTIONS:

Do you have any kind of coverage you haven't mentioned so far? Tell me about that....

In your mind, is there a difference between "coverage" and "insurance"? If so, what is it?

23a. Have you ever served on active duty in the U.S. Armed Forces?

Active duty does not include training in the Reserves or National Guard.

Yes-*Skip to 23b*
No

CHECK: Type 2 should answer "No."

CHECK: Everyone else should answer "Yes."

Probes:

[If needed]: How did you come up with your answer?

Does this statement: "Active duty does not include training in the Reserves or National Guard."
Help you to answer the questions? Why or why not?

[If needed]: In your own words, what is the difference between active duty and the Reserves
or National Guard?

Does active duty include basic training or not?

23a1. Did you ever train for the Reserves or National Guard?

Yes-*Skip to 25a*
No-*Skip to next person*

CHECK: TYPE 2s should be the only ones to get this question. The 2s should only respond
"Yes" for training only.

CHECK: We should only have "Yes" responses here. We should not have gotten names for
any people who would say "No" to this.

Probes:

How did you come up with your answer?

NOTE that Basic Training is not active duty.

23b. Are you currently on active duty?

Yes

No- *Skip to 23c*

CHECK: Type 1 should answer “Yes,” all others “No.”

Probes:

IF R ANSWERS “YES” TO 23b:

Why are you currently on active duty? Is it because...

- You are a member of the Reserve or National Guard, and only served on active duty for training purposes? Y / N (Note this is straight from a George email)
- You are a member of the Reserve or National Guard, serving as part of a Federal activation? Y / N
- You are a member of the regular armed forces? Y / N

23c. Did you have a prior discharge?

Yes- *Skip to 24a*

No- *Skip to 24a*

CHECK: Type = 1 (military veterans) should answer “Yes.”

Probes:

How did you come up with your answer?

What does the phrase “prior discharge” mean to you?

- Do you have a DD214?
- [If R is unsure of whether s/he has a prior discharge]: Tell me about the circumstances that make you not sure about that...

IF R ANSWERS “YES” TO 23c:

Why did you have a prior discharge? Is it because...

- As part of a re-enlistment process, you were discharged and immediately re-enlisted?
Y/N
 - [If No]: Please explain that.

23d. Have you been on active duty in the last 12 months?

Yes

No

Probes:

How did you come up with your answer?

How did you decide what your status was during the last 12 months?

During what period were you on active duty – what month and year to what month and year?

24a. Did you serve on active duty during:

Read each category. Enter all that apply even if the person served part of the period.

1. September 2001 or later
2. August 1990 to August 2001
3. May 1975 to July 1990
4. Vietnam Era (August 1964 to April 1975)
5. February 1955 to July 1964
6. Korean War (July 1950 to January 1955)
7. January 1947 to June 1950
8. World War II (December 1941 to December 1946)
9. November 1941 or earlier

CHECK: Could get R's age from recruiting screener, to check on maximum age for checking a period.

Probes:

What do you think this question is asking?

Tell me how you came up with your answer of [_____].

How did you decide which period of time to pick from the list I gave you?

25a. Do you have a VA service-connected disability rating?

Yes

No- *Skip to next person*

CHECK: if R's TYPE = 4, 5, 6, or 7, R should answer "Yes."

Probes:

What does the phrase "service-connected disability rating" mean to you?

How do you know whether or not you have a service-connected disability rating?

How did you come up with your answer to this question?

- Did you have any injuries that resulted in a disability?

IF R HAS A RATING:

Do you have a single service-connected disability or more than one service-connected disability? CHECK: if R's TYPE = 4, R should say ONE CONDITION. If R's TYPE = 5, 6, or 7, R should say MORE THAN ONE CONDITION.

IF R HAS MORE THAN ONE SERVICE-CONNECTED CONDITION:

- What is the difference between a condition rating and a combined rating?

25b. What is your service-connected disability rating? Report the combined rating if you have more than one service-connected disability.

Percent disability:

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Prompt with categories if necessary

- 0 percent
- 10 or 20 percent
- 30 or 40 percent
- 50 or 60 percent
- 70 percent or higher

What does the phrase “combined rating” mean to you?

How did you come up with your answer to this question?

- How did you know the rating you reported here?
- Is this rating something that you just know, or would you have to look it up somewhere?

IF R NEEDED TO BE PRMPTED WITH PERCENTAGE CATEGOREIS:

- Would this question be easier or more difficult if you were given ranges of percentages to pick from, instead of having to give a number?
 - Would percentages help you to understand what the question was getting at? Why or why not?

25c. Do you currently receive monthly service-connected disability compensation payments from VA?

Yes

No

CHECK: If R's TYPE = 7a, b, or c, should say "No."

Probes:

How did you come up with your answer?

IF R HAS AN SC DISABILITY RATING (Yes for 25a), BUT SAYS "NO" HERE:

- In a previous question, you said you have a disability rating. Do you receive any type of compensation for that disability?
 - [If no]: Do you receive any compensation from VA? What for?
- Did you opt not to receive a compensation payment for a disability? [NOTE: vets may take pension rather than the disability payments.]

IF R HAS AN SC RATING ("Yes" for 25a) AND REPORTED 0%:

- Tell me more about these payments from the VA. What is your payment for?

IF R SAID "YES" to 25c AND REPORTED ABOVE 0%:

- Did you report your actual rating or the rating you're compensated at?
- Are you rated as "unemployable" and compensated at the 100% rating level?

CHECK: IF R says "Yes" to this probe, R should be a TYPE 6

 - [If "Yes"]: What is your actual disability rating? [Find out if it is really 100 or less than that.]
 - What does the term "individually un-employable" mean to you?

Appendix F.

CAPI Findings for Version 2

The CAPI question for service-connected disability-rating status had an additional question (Q 22b) that followed the first question that was identical to the single question of Version 1 (shown in red in the box below). This second question was intended to capture correct data from respondents who, in answering that they did not have a rating in the first question, mistakenly assumed that their possession of a 0-percent rating meant that they did not have a rating at all. The second question gave them the opportunity to correct this reporting error.

The results suggest that this additional question did not work as intended (oppositely, in fact). It likely generated a large overestimate of veterans who were tabulated as having 0- percent disability rating, and through this error, of having a service-connected disability rating. This occurred, we think, because many respondents who did not have a rating incorrectly answered “yes” to the second question because they thought that having a 0-percent rating is the same as not having a rating. In this way, the Version 2 count of the number of veterans possessing a rating was grossly inflated.

Version 1 and Version 2 CAPI Questions

<u>Version 1 CAPI Question</u>	<u>Version 2 CAPI Question</u>
Q22a. Do you have a VA service-connected disability rating? <input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to question 23	Q22a. Do you have a VA service-connected disability rating? <input type="checkbox"/> Yes – SKIP to question 22c <input type="checkbox"/> No
Q22b. What is your service-connected disability rating? Is it: <input type="checkbox"/> 0 percent <input type="checkbox"/> 10 or 20 percent <input type="checkbox"/> 30 or 40 percent <input type="checkbox"/> 50 or 60 percent <input type="checkbox"/> 70 percent or higher	Q22b. Just to be sure, do you have a rating of 0%? <input type="checkbox"/> Yes - Skip to Q23 <input type="checkbox"/> No - Skip to Q23
	Q22c. What is your service-connected disability rating? Percent disability: _____ - Skip to Q23 If response is don't know then go to Q22d
	Q22d. Is your service-connected disability rating: <input type="checkbox"/> 0 percent <input type="checkbox"/> 10 or 20 percent <input type="checkbox"/> 30 or 40 percent <input type="checkbox"/> 50 or 60 percent <input type="checkbox"/> 70 percent or higher