

## Outbound

Export Date: 10/25/2010 10:37:04 AM	QBank Id: 4996
PROJECT REGISTRATION # 158527	
<b>US Department of Labor</b>	Translations: NO
	Verbatims: YES
City Center:	
US Department of Labor - EBSA CE11 1010	___ SURVEY DESIGN: JENNIFER PETERSON
TODD JENSEN/ALISON SIMON	
October, 2010	Quota: 6200

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**CASEID**

QID:36526 I.D.#

CASEID(1-6)

**FVALIFON**

QID:1528 \*\*AREA CODE AND TELEPHONE NUMBER:

FVALIFON(1161-1179)

**CINTTIME**

QID:963 \*\*INTERVIEW TIME:

CINTTIME(1716-1721)

**(Programmer: All interviews are recorded. The recording begins when the respondent answers the phone. This statement is read after the "Continue" response is entered after the Introduction and before the first question.)**

**FRECCON**

QID:98881 This interview will be recorded for internal quality assurance.

- 1 (Continue)
- 2 (Refused) - **(Thank and Terminate)**

FRECCONS(1984)

**SA**

QID:134507 DATE OF INTERVIEW:

**SB**

QID:134508 INQUIRY RECORD NUMBER (CONTROLID):  
**(Programmer: Code from fone file)**

**SC**

QID:134509 BENEFIT ADVISOR NAME/ID (STAFF\_NAME):  
**(Programmer: Code from fone file)**

**SD**

QID:134510 CLOSE DATE (CLOSE\_DATE):  
**(Programmer: Code from fone file)**

**SE**

QID:45204 INQUIRER FIRST NAME (FIRSTNAME):  
**(Programmer: Code from fone file)**

**SF**

QID:3213 INQUIRER LAST NAME (LASTNAME):  
**(Programmer: Code from fone file)**

**SG**

QID:133961 INQUIRER STREET ADDRESS 1 (ADDRESS):  
**(Programmer: Code from fone file)**

**SH**

QID:133962 INQUIRER STREET ADDRESS 2 (ADDRESS2):  
**(Programmer: Code from fone file)**

**SI**

QID:47254 INQUIRER CITY (CITY):  
**(Programmer: Code from fone file)**

**SJ**

QID:49149 INQUIRER STATE (STATE):  
**(Programmer: Code from fone file)**

**SK**

QID:47255 INQUIRER ZIP CODE (ZIPCODE 1):  
**(Programmer: Code from fone file)**

**SL**

QID:134511 CLOSURE ANALYSIS (CLOSE\_ANAL):  
**(Programmer: Code from fone file)**

- 01 Benefit Claim – Assistance (BCA)
- 02 Claim Valid
- 03 Enforcement Referral
- 04 Secondary Lead (BVESL)
- 05 Referral as Abandoned Plan (BVADV)
- 06 Referral to Advocate
- 07 AOA Counselor/Pension Rights Center (BVACP)
- 08 Pro-Bono Attorney Services (BVAS)
- 09 Patient Rights (BVPR)
- 10 Actuarial (BVAI)
- 11 Refer to Private Counsel (BVPC)
- 12 Claim-Not Valid (BN)

**SM**

QID:134512 SUBJECT ENTRY CODE (SUBJ\_INQ):  
**(Programmer: Code from fone file)**

- 001 Welfare-Other
- 002 COBRA
- 003 Health Reform
- 004 Pension
- 999 Other

**SN**

QID:134513 REGION (OFFICE):  
**(Programmer: Code from fone file)**

- 01 Atlanta and Miami (40 and 42)
- 02 Boston (31)
- 03 Chicago (50)
- 04 Cincinnati (43)
- 05 Dallas (63)
- 06 Kansas City (60)
- 07 Los Angeles (72)
- 08 New York (30)
- 09 Philadelphia and Washington DC (20 and 22)
- 10 San Francisco and Seattle (70 and 71)
- 11 National Office/OPA/DTAI (88)

SO

QID:134979

METHOD OF INQUIRY (TYP\_INQUERY):  
**(Programmer: Code from fone file)**

- 01 Phone (T)
- 02 Routine Mail (M)
- 03 Web-based (W)

**(Interviewer: ASK TO SPEAK TO INQUIRER NAME FROM FONE FILE:)**

INTRO1

QID:120821

Hello, this is \_\_\_\_\_, from The Gallup Poll. We are calling on behalf of the Employee Benefits Security Administration or EBSA (**say: E-B-S-A**) of the U.S. Department of Labor. Our records indicate that you recently contacted EBSA concerning a pension or health benefits issue. We are conducting a very short poll about your interaction with this agency. It should take **about eight minutes, less than five minutes.**

I want to assure you that Gallup and EBSA will protect your confidentiality and privacy. Your voluntary cooperation is requested to make the results of this study complete and accurate. Gallup will not share your specific responses with anyone (including EBSA), and your data will only be used in aggregate with responses of others like you.

By law, I must inform you that the Paperwork Reduction Act requires Federal agencies to obtain Office of Management and Budget authorization before conducting any information collection, and persons are not required to respond to an information collection that is not currently approved. The Office of Management and Budget has authorized this survey for use through November 2012 under control number 1220-0059.

- 1 Respondent available - **(Continue)**
- 4 No such person - **(Thank and Terminate)**
- 7 Respondent not available - **(Set time to call back)**
- 8 (Soft Refusal)
- 9 (Hard Refusal) - **(Thank and Terminate)**

INTRO1(2001)

**S1**

QID:134516

Do you recall [(If code 11 in SN, read:)] sending a note to/[(If code1-10 in SN, read:)] contacting] the Employee Benefits Security Administration or EBSA? This probably would have occurred within the past few weeks. **(If necessary, read:)** Again, this agency is part of the Department of Labor and provides assistance to employees and beneficiaries regarding employee retirement, pension or 401k benefits, and health benefits such as COBRA **(say: CO-bruh)** and HIPAA **(say: HIP-uh)**.

- 1 Yes
- 2 No
- 3 (DK)
- 4 (Refused)

QID:134517

**Skip: (If code 1 in S1, Continue; Otherwise, Thank and Terminate)**

**(Interviewer: READ:)**

QID:134518

Throughout the remainder of the survey, we will refer to the Employee Benefits Security Administration as EBSA.

**CE1**

QID:21495

Taking into account all the information, products, and services you receive from them, how satisfied are you with EBSA overall? Please use a five-point scale, where 5 means you are extremely satisfied and 1 means you are not at all satisfied. You may use any of the numbers 1, 2, 3, 4, or 5 for your rating.

- 1 Not at all satisfied
- 2
- 3
- 4
- 5 Extremely satisfied
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

CE1(2301)

**CE2**

QID:21496

If you had a similar need for information or assistance in the future, how likely would you be to contact EBSA again? Please use a five-point scale, where 5 means extremely likely and 1 means not at all likely. You may use any of the numbers 1, 2, 3, 4, or 5.

- 1 Not at all likely
- 2
- 3
- 4
- 5 Extremely likely
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

CE2(2302)

**CE3**

QID:21497

If a friend or a colleague had a similar need for information or assistance, how likely would you be to recommend EBSA? Please use a five-point scale, where 5 means extremely likely and 1 means not at all likely. You may use any of the numbers 1, 2, 3, 4, or 5.

- 1 Not at all likely
- 2
- 3
- 4
- 5 Extremely likely
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

CE3(2303)

**(Interviewer: READ:)**

QID:134980

Now, I am going to read a number of statements. Using a five-point scale, where 5 means you strongly agree and 1 means you strongly disagree, please tell me how much you agree or disagree with each statement as it applies to EBSA. You may use any of the numbers 1, 2, 3, 4, or 5 for your rating. How about **(read CE4-CE9A)?**

**CE4**

QID:21499

EBSA is a name I can always trust.

- 1 Strongly disagree
- 2
- 3
- 4
- 5 Strongly agree
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

CE4(2304)

**CE5**

QID:21500

EBSA always delivers on what they promise.

- 1 Strongly disagree
- 2
- 3
- 4
- 5 Strongly agree
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

CE5(2305)

**CE6A**

QID:21501

EBSA always treats me fairly.

- 1 Strongly disagree
- 2
- 3
- 4
- 5 Strongly agree
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

CE6A(2306)

**CE7A**

QID:21502

If a problem arises, I can always count on EBSA to reach a fair and satisfactory resolution.

- 1 Strongly disagree
- 2
- 3
- 4
- 5 Strongly agree
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

CE7A(2307)

**CE9A**

QID:21504

EBSA always treats me with respect.

- 1 Strongly disagree
- 2
- 3
- 4
- 5 Strongly agree
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

CE9A(2309)



**Q1**

QID:134520

Again using a five-point scale, where 5 means you strongly agree and 1 means you strongly disagree, please tell me how much you agree or disagree with each statement as it applies to EBSA. How about **(read and rotate A-H)**?

- 1 Strongly disagree
- 2
- 3
- 4
- 5 Strongly agree
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

Q1A	QID:134521	EBSA treats me like a valued customer.
Q1B	QID:134522	EBSA is willing to work with me to make sure my needs are met.
Q1C	QID:134523	EBSA acts in a timely fashion.
Q1D	QID:134524	EBSA does what it says it will do.
Q1E	QID:134525	EBSA services are available when I need them.
Q1F	QID:134526	EBSA is easy to reach.
Q1G	QID:134527	The information I receive from EBSA is clear and easy to understand.
Q1H	QID:134528	EBSA does its best to help me out.

**Q2**

QID:134529

After your interaction with EBSA, did you feel **(read 3-1)**?

- 3 Much more knowledgeable about your benefits rights
- 2 Somewhat more knowledgeable about your benefits rights, or
- 1 Not any more knowledgeable about your benefits rights
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

**Q3**

QID:134530

Please rate your level of agreement with each of the following statements using a five-point scale, where 5 means you strongly agree and 1 means you strongly disagree. You may use any of the numbers 1, 2, 3, 4, or 5 for your rating. How about **(read A-B)**?

- 1 Strongly disagree
- 2
- 3
- 4
- 5 Strongly agree
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

**Q3A**

QID:134531

As a result of the interaction I had with EBSA, I feel better informed to protect my benefits in the future.

**Q3B**

QID:134532

As a result of the interaction I had with EBSA, I feel my benefits are more secure.

**Q4**

QID:134552

Compared to interactions you may have had with other government agencies, would you say your interaction with EBSA was better, worse, or about the same as what you've experienced elsewhere?

- 3 Better
- 2 About the same
- 1 Worse
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

**Q5**

QID:134557

Compared to interactions you may have had with businesses and non-governmental agencies, would you say your interaction with EBSA was better, worse, or about the same as what you've experienced elsewhere?

- 3 Better
- 2 About the same
- 1 Worse
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

**Q6**  
QID:134559 Did you share any of the information you obtained from EBSA with anyone else?

- 1 Yes
- 2 No
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

QID:134981 **Skip: (If code 1 in Q6, Continue; Otherwise, Skip Q7)**

**Q6A**  
QID:134562 Please tell me whether you shared this information with any of the following. **(Read and rotate A-C)**

- 1 Yes
- 2 No
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)

Q6AA	QID:134563	Coworkers
Q6AB	QID:134564	Family or friends
Q6AC	QID:134565	Your employer

**Q7**

QID:134580

Can you briefly tell me how you first found out about EBSA? (*Interviewer:* Open ended and code)

- 01 Other (list)
- 02 (DK)
- 03 (Refused)
- 04 HOLD
- 05 HOLD
- 06 Referred by another agency (IRS, Social Security Administration, Health and Human Services, State Department of Insurance, etc.)
- 07 Referred by a colleague
- 08 Referred by a lawyer or other professional
- 09 Found them on the Internet
- 10 Referred by employer or HR Department
- 11 Phone book
- 12 Congressperson
- 13 Received a publication
- 14 Media (newspaper article, press release, public service announcement, etc.)
- 15 Insurance company

List Other:Y

QID:134982

**Skip: (If code 11 in SN, Skip to Q8A; Otherwise, Continue)**

**Q8**

QID:134983

When you first contacted EBSA, did you speak with a benefits advisor right away, or did you leave a message to have someone return your call?

- 1 Spoke with a benefits advisor right away
- 2 Left a message
- 3 (Left a message and no one called me back—I called again)
- 8 (DK)
- 9 (Refused)

QID:134985

**Skip: (If code 11 in SN, Continue; Otherwise, Skip to Q9)**

**Q8A**

QID:134988

When you first sent a note to EBSA, how long did it take them to respond?  
**(Interviewer: Open ended and code)**

- 1 Responded the same day
- 2 Responded within one day
- 3 Responded within two days
- 4 Responded within three or more days
- 7 (Have not yet responded)
- 8 (DK)
- 9 (Refused)

**Q9**

QID:134594

In the future, would you prefer to contact EBSA **(read and rotate 1-5)?**

- 1 By phone
- 2 By e-mail
- 3 By submitting an online form
- 4 Through live chat on the Internet, or
- 5 Through the mail
- 6 Other
- 7 (No preference)
- 8 (DK)
- 9 (Refused)

**Q10**

QID:134989

Was EBSA able to assist you with your questions, problem, or recovering the benefit?

- 1 Yes
- 2 No
- 3 Still working on it/not yet resolved
- 4 (DK)
- 5 (Refused)

QID:134990

**Skip: (If code 2 in Q10, Continue; Otherwise, Skip to Q12)**

**(Programmer: If code 2 in Q10, ask:)**

**Q11**

QID:134605

Why was EBSA not able to assist you with your question or problem?

**(Interviewer: Read 06-10, then read 01)**

- 01 Or some other reason (list)
- 02 (DK)
- 03 (Refused)
- 04 (No reason given)
- 05 HOLD
- 06 There were limitations because of the law
- 07 There were limitations because of the plan rules
- 08 The company has terminated the plan
- 09 The company went bankrupt
- 10 The EBSA representative did not understand your question or problem

**List Other:Y**

**Q12**

QID:134608

What ONE thing could EBSA do to better improve the service it provides?

**(Interviewer: Open ended)**

- 01 Other (list)
- 02 (DK)
- 03 (Refused)
- 04 Nothing
- 05 Everything

**List Other:Y**

QID:68754

**DEMOGRAPHICS BEGIN HERE:**

**D1**

QID:30962

GENDER:

**(Interviewer: Code only; Do NOT ask)**

- 1 Male
- 2 Female

D3(2547)

**(Interviewer: VALIDATE PHONE NUMBER AND THANK RESPONDENT BY SAYING:)**

QID:134610

Again, this is \_\_\_\_\_, with Gallup of \_\_\_\_\_. I would like to thank you on behalf of EBSA and Gallup for your time. Our mission is to "help people be heard" and your opinions are important to Gallup in accomplishing this.

FINTVID

QID:98976

INTERVIEWER I.D. #:

FINTVID(1571-1574)

**Questionnaire Workflow**

<b>Date</b>	<b>User</b>	<b>Status</b>	<b>Comments</b>
10/19/2010 8:49:37 AM	MEGHAN ORR	Survey Specialist - Questionnaire Creation	Copied from survey Stryker 2010 Endoscopy CE11 1010 (QID: 4955) by MEGHAN MCKERNAN.
10/19/2010 2:35:16 PM	MEGHAN ORR	Survey Design - Proofing	Survey is created and ready for proofing.
10/19/2010 3:15:24 PM	JEN PETERSON	Survey Specialist - Edits	Back to Meghan before proofing -- changes are coming in