**PART A - APPENDIX D**

**IVR SCREENING QUESTIONNAIRE**

**IMPACT OF THE ARRA SUBSIDY ON COBRA TAKE-UP**
**PRE-SCREENER FOR IVR CALLERS**

## INTRODUCTION

(All)
S1.     **(PRE-RECORDED IVR VOICE)** Thank you for calling in for the study on health insurance needs and use being sponsored by the U.S. Department of Labor. To continue in English, press one. Para continuar en español, oprima dos. To see if you may be eligible to participate in this study, please answer a few questions using your telephone keypad. All of your answers will be kept private. If you wish to speak with an interviewer at any time, press the star key. If at any time you need to correct an entry, please press the pound key.

## SAMPLE MEMBER VERIFICATION

(All)
S2.     First, we need to get some information so that we will know who you are. Please enter the 8-digit personal identification number that was provided in your letter now.

        MATCH FOUND........................................................................ 01    (S3)
        NO MATCH FOUND ............................................................... 00    (S2a)

(S2=00)
S2a.    I'm sorry; we were unable to match your information. Please try again or press the star key to be connected to an interviewer.

(S2=01)
S3.     Now, please enter the last two digits of the year you were born.

        MATCH FOUND........................................................................ 01    (S4)
        NO MATCH FOUND ............................................................... 00    (S3a)

(S3=00)
S3a.    I'm sorry; we were unable to match your information. Please try again or press the star key to be connected to an interviewer.

(S3=01)
S4.     Please enter the last four digits of your social security number?

        MATCH FOUND........................................................................ 01    (S5)
        NO MATCH FOUND ............................................................... 00    (S4a)

(S4=00)
S4a.    I'm sorry; we were unable to match your information. Please try again or press the star key to be connected to an interviewer.

(S2, S3, and S4=01)
S5.     Thank you. We have located your record.

(All)
S6.     In case we get disconnected or need to call you back, please enter your 10-digit telephone number on which you can be reached, starting with the area code.

              10-DIGIT NUMBER ENTERED ............................................ 01   (S7)
              TOO FEW DIGITS ENTERED ............................................. 00   (S6a)

(S6=00)
S6a.    Please re-enter your telephone number starting with the area code.


## STUDY ELIGIBILITY

(All)
S7.     For the next questions, please think about the job you had just before you **first** filed for unemployment insurance benefits in [fill JOB SEPARATION DATE]. The name of that employer is included in your letter.

        Did you have health insurance **through your job** when that job ended in [fill JOB SEPARATION DATE]? Please press "1" for yes or "2" for no to record your response.

              YES ...................................................................................... 01   (S7a)
              NO ........................................................................................ 02   (S8)

(S7=01 confirm-yes)
S7a.    You have indicated that **you had** health insurance through your job when it ended in [fill JOB SEPARATION DATE]. Is that correct? Please press "1" for yes or "2" for no to confirm your response.

              YES ...................................................................................... 01   (S10)
              NO ........................................................................................ 02   (S7b)

(S7a=02)
S7b.    I will repeat the question. Please re-enter your response.

        **PROGRAMMER:  GO BACK TO S7 AND REPEAT THE QUESTION.**

(S7=02)
S8.     Even though you did not have health insurance through your job when it ended, did your employer **offer** health insurance to any of its employees at the time your job ended in [fill JOB SEPARATION DATE]? Please press "1" for yes, "2" for no, or "3 for don't know to record your response.

              YES ...................................................................................... 01   (S9)
              NO ........................................................................................ 02   (S8a)
              DON'T KNOW ....................................................................... 03   (S8b)

(S8=02 confirm-no)
S8a.    You have indicated that when your job ended in [fill JOB SEPARATION DATE], your employer did **not** offer health insurance to its employees. Is that correct? Please press "1" for yes or "2" for no to confirm your response.

              YES ...................................................................................... 01   (S9d)
              NO ........................................................................................ 02   (S8c)

(S8=03 confirm-dk)
S8b.      You have indicated that you don't know if your employer offered health insurance to its employees when your job ended in [fill JOB SEPARATION DATE]. Is that correct? Please press "1" for yes or "2" for no to confirm your response.

| | | |
|---|---|---|
| YES .................................................................................... | 01 | (S9d) |
| NO ..................................................................................... | 02 | (S8c) |

(S8a or S8b=02)
S8c.      I will repeat the question. Please re-enter your response.

**PROGRAMMER:  GO BACK TO S8 AND REPEAT THE QUESTION.**

(S8=01)
S9.      Even though you did not have health insurance through your job when it ended, were you **eligible** to enroll in your employer's health insurance plan at that time? Please press "1" for yes or "2" for no to record your response.

| | | |
|---|---|---|
| YES .................................................................................... | 01 | (S9a) |
| NO ..................................................................................... | 02 | (S9b) |

(S8 and S9=01 confirm-offered/eligible)
S9a.      You have indicated that even though you did not have health insurance through your job when it ended in [fill JOB SEPARATION DATE], you were **eligible** to enroll in your employer's health insurance plan at that time. Is that correct? Please press "1" for yes or "2" for no to confirm your response.

| | | |
|---|---|---|
| YES .................................................................................... | 01 | (S9d) |
| NO ..................................................................................... | 02 | (S9c) |

(S8=01 and S9=02 confirm- offered/not eligible)
S9b.      You have indicated that you were **not eligible** to enroll in your employer's health insurance plan when your job ended in [fill JOB SEPARATION DATE], is that correct? Please press "1" for yes or "2" for no to confirm your response.

| | | |
|---|---|---|
| YES .................................................................................... | 01 | (S9d) |
| NO ..................................................................................... | 02 | (S9c) |

(S9a or S9b=02)
S9c.      I will repeat the question. Please re-enter your response.

**PROGRAMMER:  GO BACK TO S9 AND REPEAT THE QUESTION.**

(S8a=01, S8b=01, S9a=01, or S9b=01)
S9d.      Thank you for completing our brief screening survey. You have not been selected to participate in the study. Thanks again for calling in and best wishes to you.

**PROGRAMMER:** DO NOT ALLOW THE RESPONDENT TO CORRECT ANY PREVIOUS ANSWERS AFTER S9d IS READ.

## INVITATION TO PARTICIPATE

(S7a=01)
S10.     Thank you. You **may be** eligible to participate in the study and receive $50 when you complete the survey. Please press the star key now to be connected to an interviewer at Mathematica who will ask a few additional questions to determine your eligibility. If you need to call back at another time, please call Mathematica toll free at 1-xxx-xxx-xxxx.