Outbound						
US Department of Laboration	or - EBSA CE11 1410	Export Date: 10/15/20:	Export Date: 10/15/2014 8:53:08 PM			
<b>US Department of Lab</b>	oor					
Project #		Translations: yes	Verbatims: YES			
Practice: Customer	QBank Id: 9711	Field Date:	Quota:			
PA: TODD JENSEN		CS: DAWN ROYAL				
DESIGNER: TERI FISH	HER	PROGRAMMER: MARK PETERSON				

QID:120772

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**CASEID** 

QID:36526 I.D.#

CASEID(1-6)

**FVALIFON** 

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

FVALIFON(1161-1179)

CINTTIME 🖈

OID: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.)

**FRECCONS** 

*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:

SA(1931-1938)

SB

QID:134508 INQUIRY RECORD NUMBER (CONTROL ID):

(Programmer: Code from fone file)

SB(60-74)

SC

QID:134509 BENEFIT ADVISOR NUMBER/ID (STAFF):

(Programmer: Code from fone file)

SC(195-204)

SD

QID:134510 DATE CLOSED (CLOSING DATE):

(Programmer: Code from fone file)

SD(245-264)

SE

QID:45204 INQUIRER FIRST NAME (FIRST\_NAME):

(Programmer: Code from fone file)

SE(75-109)

SF

QID:3213 INQUIRER LAST NAME (LAST\_NAME):

(Programmer: Code from fone file)

SF(110-154)

SK

QID:47255 INQUIRER ZIP CODE (ZIP CODE):

(Programmer: Code from fone file)

SK(175-184)

## SL

QID:134511

# CLOSURE ANALYSIS (CLOSURE\_ANALYSIS):

(Programmer: Code from fone file)

# (Programmer: Allow 5 entries)

- 01 Benefit Claim Assistance (BCA)
- 02 Recovery (BVR)
- 03 Referral for Enforcement (BVE)
- 04 Secondary Lead (BVESL)
- 05 Referral as Abandoned Plan (BVADV)
- 06 Not Valid (BN)

# of Responses: 5

SL(401-402) SL\_1(516-517) SL\_2(518-519) SL\_3(520-521) SL\_4(522-523) SL\_5(524-525)

#### SM

#### OID:134512

# SUBJECT ENTRY CODE (SUBJECT):

## (Programmer: Code from fone file)

## (Programmer: Allow 5 entries)

- 001 NBI: Not Benefits Issue
- 002 NCP: Not Covered Pension
- 003 NCW: Not Covered Welfare
- 004 NTI: Not Title I Issue
- 005 PRE: Pre-ERISA
- 006 UNK: Unknown
- 007 GER: General EBSA Request
- 008 RD: Reporting & Disclosure
- 009 PDD: Disclosure Requirements
- 010 PDR: Reporting Requirements
- 011 JSQDRO: Joint & Survivor, QDRO
- 012 PJS: Joint and Survivor
- 013 PQD: Qualified Domestic Relations Order
- 014 PF: Fiduciary
- 015 PFB: Bankruptcy
- 016 PFC: Participant Contributions
- 017 PFE: Employer Contributions
- 018 PFN: Abandoned Plan
- 019 PFA: Administrative Fees
- 020 PFF: Fund Investment Fees
- 021 PFI: Investment of Funds
- 022 PFD: Default Investments
- 023 PFT: Prohibited Transaction
- 024 PGA: Plan General Administration
- 025 PB: Pension Benefits
- 026 PBE: Benefit Eligibility
- 027 PBD: Benefit Distributions
- 028 PBC: Pension Benefits, Can't Locate Plan
- 029 PBS: Pension Benefits, Social Security Notice
- 030 WRD: Reporting & Disclosure
- 031 WDD: Disclosure Requirements
- 032 WDR: Reporting Requirements
- 033 WF: Fiduciary
- 034 WFA: Administrative Fees
- 035 WFB: Bankruptcy
- 036 WFI: Paid Premiums/Insurance
  - Cancelled
- 037 WFS: Self-Insured, No Funds

38	WGA: Plan General Administration
039	WWB: Welfare Benefits
040	WBE: Benefit Eligibility/Participating
041	WBP: Benefit Payments
042	WRC: Retiree Health
043	WCOBRA: COBRA
044	WCE: COBRA Eligibility
045	WCU: COBRA Under 20 Employees
046	WCN: COBRA Notices
047	WCD: COBRA Duration Coverage
048	WCP: COBRA Premiums
049	WCS: COBRA Successor
	Plans/Employer
050	WCI: COBRA Conversion to Individual
	Coverage
051	COBRA_CPA: COBRA Premium
	Assistance
052	WCX: General ARRA Assistance
053	WCC: COBRA Subsidy Denial
054	WHIPAA: HIPAA
055	WHP: HIPAA Pre-Existing Conditions
056	WHC: HIPAA Certificates of Creditable
	Coverage
057	WHS: HIPAA Special Enrollment Rights
058	WHD: HIPAA Discrimination/Health
	Status
059	WHG: HIPAA Group to Individual Policy
060	WHM: Mental Health Parity
061	WHN: Newborns' & Mothers' Act
062	WHW: Women's Health & Cancer
	Rights Act
063	WRA: Health Reform Assistance
ე64	OTH: Other

# of Responses: 5

SM\_1(501-503) SM\_2(504-506) SM\_3(507-509) SM\_4(510-512) SM\_5(513-515)

#### SN **REGION:** QID:134513 (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) 80 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) SN(403-404) SQ OFFICE: QID:512331 (Programmer: Code from fone file) 01 Atlanta (40) 02 Boston (31) 03 Chicago (50) 04 Cincinnati (43) Dallas (63) 05 06 Kansas City (60) 07 Los Angeles (72) 80 Miami (42) 09 New York (30) 10 Philadelphia (20) 11 San Francisco (70) 12 Seattle (71) 13 Washington DC (22) SO METHOD OF INQUIRY (CORRESPONDENCE TYPE): QID:134979 (Programmer: Code from fone file) 01 Telephone (T) 02 Routine Mail (M)

SO(405-406)

03

Web site (W)

#### SP

QID:153217

INITIAL DATE OF INQUIRY (INQUIRY START DATE):

(Programmer: Code from fone file)

SP(300-309)

## (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 less than five minutes.

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 January 2016 under control number 1225-0059.

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

- 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

OID:134516

Do you recall [(If code 11 in SN, read:) sending a note to/(If code 01-10 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

health benefit claims.

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

S1(2011)

QID:135095

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

# (Interviewer: READ:)

QID:135096

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

# CE1 HC - DB.CE - DB

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(2101)

CE2 HC - DB,CE - DB

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.

Not at all likely
Not at all likely
Extremely likely
(Not applicable)
(DK)
(Refused)

CE2(2102)

CE3 HC - DB,CE - DB

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.

Not at all likely
Not at all likely
Extremely likely
(Not applicable)
(DK)
(Refused)

CE3(2103)

## (Interviewer: READ:)

QID:143535

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 ≠ ★ HC - DB,CE - DB
             EBSA is a name I can always trust.
QID:21499
             1
                    Strongly disagree
             2
             3
             4
             5
                   Strongly agree
             7
                   (Not applicable)
             8
                    (DK)
             9
                   (Refused)
                                                                                  CE4(2111)
CE5 ★ ★ HC - DB,CE - DB
             EBSA always delivers on what they promise.
QID:21500
                   Strongly disagree
             1
             2
             3
             4
             5
                   Strongly agree
             7
                   (Not applicable)
             8
                    (DK)
             9
                   (Refused)
                                                                                 CE5(2112)
CE6A ★ ★ HC - DB,CE - DB
             EBSA always treats me fairly.
QID:21501
             1
                   Strongly disagree
             2
             3
             4
             5
                   Strongly agree
             7
                   (Not applicable)
             8
                    (DK)
                   (Refused)
```

CE6A(2113)

CE7A \* THC - DB.CE - DB 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(2114) CE9A ★ ★ HC - DB.CE - DB 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(2115) (If code 1-4 in CE1 ask:) CE9B You gave EBSA a (response in CE1) overall satisfaction rating. What could EBSA QID:495717 have done differently for you to have been extremely satisfied? (Open ended and code) 01 Other (list) 02 (DK) 03 (Refused) 04 **HOLD** 05 HOLD

> CE9B(2117-2118) CE9B T(8004)

**List Other:**Y

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-J, then K)**:

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.	Q1A(2121)
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.	Q1C(2123)
Q1D	QID:134524	EBSA does what it says it will	,
		do.	Q1D(2124)
Q1F	QID:134526	EBSA is easy to reach.	Q1F(2126)
Q1G	QID:134527	The information I receive from	
		EBSA is clear and easy to	
	0.5 404500	understand.	Q1G(2127)
Q1H	QID:134528	EBSA does its best to help me	0.411/0.4.00\
041	0.15	out.	Q1H(2128)
Q1I	QID:	EBSA thoroughly answers all of	
011	0.10	my questions	
Q1J	QID:	EBSA is proactive in addressing	
011/	OID:	my question or issue	
Q1K	QID:	If you had a need to work with	
		EBSA again in the future you	
		would want to interact with this	
		same benefit advisor	

(If code 1-4 in Q1K, continue, otherwise skip to Q14a)

QID:xxx

What could have the benefits advisor (<u>if necessary read:</u> the person you talked with on the phone) have done differently to make you want to interact with them again if you needed help from EBSA?

## (Open ended and code)

- 01 Other (list)
- 02 (DK)
- 03 (Refused)
- 04 HOLD
- 05 HOLD

**List Other:**Y

Q13(xxxx-xxxx) Q13\_T(xxxx)

Were you referred to another person, agency or company for you to follow-up with to resolve your issue or question?

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

# Skip: (If code 02, 07, 08 OR 09 in Q14a, Skip to Q2; Otherwise, Continue)

Q14B Please tell me whether or not each of the following happened during your referral?

READ A-D

- 1 Yes
- 2 No
- 7 (Not applicable)
- 8 (DK)
- 9 (Refused)
- A. The referral phone number was a working number
- B. The EBSA representative made the call with you on the line
- C. The referral was to the right agency, organization or person
- D. The referral resulted in an answer to your question or a resolution to your issue?

*QID:135100* 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)

Q2(2141)

Q3B(2152)

## 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)**:

benefits are more secure.

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		
Q3B	QID:134532	in the future. As a result of the interaction I had with EBSA, I feel my	Q3A(2151)	

<b>Q6</b> <i>QID:134559</i>	Did you share any of the information you obtained from EBSA with anyone else?						
	1 2 7 8 9	Yes No (Not applica (DK) (Refused)	able)				
					Q6(2165)		
QID:134560	_	: (If code 1 ir erwise, Skip t	n Q6, Continue; no Q7)				
<b>Q6A</b> <i>QID:134562</i>		se tell me who se A-C)	ether you shared	this information with any of	the following. (Read and		
	1 2 7 8 9	Yes No (Not applica (DK) (Refused)	able)				
Q6AA Q6AB Q6AC			QID:134563 QID:134564 QID:134565	Coworkers Family or friends Your employer	Q6AA(2171) Q6AB(2172) Q6AC(2173)		

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
- O6 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

Q7(2181-2182) Q7\_T(8001)

QID:213175 Skip: (If code 02 OR 03 in SO, Skip to Q8A; Otherwise, Continue)

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)

(Skip: All in Q8, Skip to Q9)

Q8(2185)

## 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)

Q8A(2187)

Q15	Did yo 1 2	ou access the EE Yes No	3S/	A website at any point in your inquiry process?
	8 9	(DK) (Refused)		
Skip:	•	de 02, 08 OR 09 rwise, Continue		Q15, Skip to Q9;
Q15A	Did yo 1 2	ou access the we Before you calle During the time your inquiry	ed	
	8 9	(DK) (Refused)		
Skip: (If co		08 OR 09 in Q15 rwise, Continue		Skip to Q15C;
Q15B	Did yo 1 2 3 4	ou use the websi To look for a ph To try to answe To submit an in For some other	non er ye iqui	e number our question iry OR
	8 9	(DK) (Refused)		
Q15C		a scale from 1 to ul was the EBSA		with 1 being 'not at all helpful' and 5 being 'very helpful', howbsite?
		1 2 3 4		Not at all helpful
		5 7 8 9		Very helpful (Not applicable) (DK) (Refused)

QID:134594 In the future, would you prefer to contact EBSA

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

Q9(2189)

## 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)

Q10(2191)

QID:134990 Skip: (If code 2 in Q10, Continue; Otherwise, Skip to Q12)

# Q11 Why was EBSA not able to assist you with your question or problem? QID:134605 (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 07 There were limitations because of the plan rules 80 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 Q11(2193-2194) Q11 T(8002) (Deleted Q12) QID:495720 **DEMOGRAPHICS BEGIN HERE:** QID:68754 D1 💢 **GENDER:** OID:30962 (Interviewer: Code only; Do NOT ask) 1 Male 2 Female D1(2301) D3(2547) (Interviewer: VALIDATE PHONE NUMBER AND THANK RESPONDENT BY

# **SAYING:)**

Again, this is , with Gallup. I would like to thank you on behalf of EBSA and QID:229796 Gallup for your time. Our mission is to "help people be heard" and your opinions are important to Gallup in accomplishing this.

	//	

QID:98976 INTERVIEWER I.D. #:

FINTVID(1571-1574)