Form Approved

OMB No. 0990-0281

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Understanding Economic Risk for Low Income Families Survey

11/17/21

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-0281. The time required to complete this information collection is estimated to average 20 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

# PRE-VIGNETTE QUESTIONS

|  |
| --- |
| ALL |

A0. This survey is conducted by the U.S. Department of Health and Human Services (HHS). This survey is being collected by HHS under OMB XXXX-XXXX. This survey will take approximately 20 minutes to complete. Your participation is voluntary and you have the right to stop at any time.

We will ask you about your educational and employment history and collect some demographic data. We will also describe some different choices that people are trying to make and ask for your advice about what you think they will do.

Please take your time as you answer these questions. The information you provide will contribute to valuable research at HHS, and will help the federal government make policy decisions about how to serve people like you.

This survey is being run by VENDOR. The survey is hosted on a secure server. By proceeding, you give your consent to participate in this survey.

|  |
| --- |
| ALL |

A1. What state do you currently live in?

STATE

(STRING 100)

NO RESPONSE M

<PROGRAMMER – Use a drop-down menu of states and record value as a FIPS code>

|  |
| --- |
| SOFT CHECK: IF A1=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| All |

A2. What is your age?

YEARS OLD

(RANGE 0-99)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF A2 <18 or >65; **You said you are [FILL A2] years old. Please confirm that this is correct before continuing.** |
| SOFT CHECK: IF A2=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| all |

A3. How do you currently describe yourself?

*Select all that apply*

🔾 Male 1

🔾 Female 2

🔾 Transgender 3

🔾 Do not identify as female, male, or transgender 4

(STRING 500)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF A3=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| all |

**A4. Are you now married, partnered (but not married), widowed, divorced, separated, or have you never been married?**

NBS L8

🔾 Married 1

🔾 Unmarried but live with my partner 2

🔾 Widowed 3

🔾 Divorced or separated 4

🔾 Never married 5

🔾 NO RESPONSE M

|  |
| --- |
| All |

A5. Are you of Hispanic, Latino, or Spanish origin?

*Select one only*

🔾 No, not of Hispanic, Latino, or Spanish origin 1

🔾 Yes, Mexican, Mexican American, or Chicano 2

🔾 Yes, Cuban 3

🔾 Yes, another Hispanic, Latino, or Spanish origin 4

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| all |

A6. What is your race? Are you:

NBS L2

*Select all that apply*

🞏 Alaska Native or American Indian 1

🞏 Asian 2

🞏 Black or African American 3

🞏 Native Hawaiian or Other Pacific Islander, or 4

🞏 White 5

🞏 Some other race (SPECIFY) 5

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF A5=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| all |

A7. What is the highest year or grade you finished in school?

Adapted from NBS L3

*Select one only*

🔾 Did not complete high school or GED 1

🔾 High school degree, high school certificate of completion or GED 2

🔾 Some college or vocational courses 3

🔾 2-year or 3-year college degree (Associate’s degree) or vocational degree 4

🔾 4-year college degree (Bachelor’s degree) 5

🔾 Graduate or professional degree (e.g., MA, MBA, Ph.D., J.D., M.D.) 6

🔾 Never attended school 7

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF A7=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| ALL |

A8. How many adults 18 years of age or older live in your household, including yourself?

NBS L16

This includes all adults who usually live there, even if they are temporarily away on business, vacation, in a hospital, away at school or on military duty.

NUM ADULTS

(RANGE 0-99)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF A8 GT 9; **You entered [X] adults 18 years of age or older live in your household, including yourself. Please review your response and continue.** |
| SOFT CHECK: IF A8 = NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| ALL |

A8a. How many children under 18 years of age live in your household?

NBS L17

NUM CHILDREN

(RANGE 0-99)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF A8a GT 9; **You entered [X] adults under 18 years of age live in your household. Please review your response and continue.** |
| SOFT CHECK: IF A8a = NO RESPONSE; **Vendor’s default no-response message** |
| if a8a >0 |

A8b. How many of these children are your own? Please include biological, adopted, and step children.

NBS L19

OWN CHILDREN

(RANGE 0-99)

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF A8B LE A8A; **The number of your own children reported as living in your household is greater than the total number of children you said are living in your household. Please check your answers and change them so that the number of your own children is not bigger than the total number of children.** |
| SOFT CHECK: IF A8b=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| ALL |

A9. Overall, how would you rate your health during the past four weeks?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Excellent | Very good | Good | Fair | Poor | Very poor |
| 🔾 1 | 🔾 2 | 🔾 3 | 🔾 4 | 🔾 5 | 🔾 6 |

|  |
| --- |
| HARD CHECK: IF A9=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| if HH size > 1 |

A9a. Overall, how would you rate the health of the family members in your household during the past four weeks?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Excellent | Very good | Good | Fair | Poor | Very poor |
| 🔾 1 | 🔾 2 | 🔾 3 | 🔾 4 | 🔾 5 | 🔾 6 |

|  |
| --- |
| HARD CHECK: IF A9a =NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| ALL |

A10. These next questions are about your personal goals and your current work-related activities.

NBS B24

Are you currently working at a job or business for pay or profit?

*Working includes being a student on paid work-study, self-employed and did not get paid that week, on vacation from work, traveling while employed, on personal leave, paid sick leave, or other temporary leave.*

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF A10=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| A10=0 (not currently working) |

A10a. Have you been looking for paid work during the last four weeks?

NBS B28

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF A10a=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| A10=0 (not currently working) |

A11. Have you worked for pay at any time since [TWO YEARS AGO]?

CSPED

*We are interested in both full-time and part-time work for pay or profit.*

🔾 Yes 1

🔾 No 0 GO TO C4

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF A11=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| **PROGRAMMER NOTE**  Exclude long-term unemployed IF A11 = 0 🡪 C4 |

|  |
| --- |
| A10=1 OR A11=1 |
| FILL LAST YEAR |

A12. What was your total household income in [YEAR] before taxes or other deductions? Please include wages, salary, commissions, bonuses, or tips from all jobs, for all members of your household.

ACS 43a and NBS L23amt

Your best guess is fine.

WAGES

(RANGE 0-999)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF A12 GT 100,000; **You reported that your household income was [FILL A12]. Please confirm that this is correct before continuing.** |
| HARD CHECK: IF A12=NO RESPONSE; **Vendor’s default no-response message** |

If >$40,000 [or potentially another dollar amount, if recommended by the contractor, such as $50,000], the respondent will be screened out

|  |
| --- |
| ALL |
| MEDICAID PROGRAM NAME  IF A1 = 4, FILL “Arizona Health Care Cost Containment System (AHCCCS)”  IF A1 = 6, FILL “Medi-Cal”  IF A1 = 8, FILL “Health First Colorado”  IF A1 = 10, FILL “Delaware Medical Assistance Program (DMAP)”  IF A1 = 13, FILL “Georgia Medical Assistance”  IF A1 = 15, FILL “Med Quest”  IF A1 = 20, FILL “KanCare”  IF A1 = 22, FILL “Healthy Louisiana”  IF A1 = 23, FILL “MaineCare”  IF A1 = 25, FILL “MassHealth”  IF A1 = 27, FILL “Minnesota Medical Assistance”  IF A1 = 29, FILL “MO HealthNet”  IF A1 = 34, FILL “FamilyCare”  IF A1 = 40, FILL “SoonerCare”  IF A1 = 41, FILL “Oregon Health Plan”  IF A1 = 42, FILL “Medical Assistance”  IF A1 = 44, FILL “Rhode Island Medical Assistance”  IF A1 = 45, FILL “Healthy Connections”  IF A1 = 47, FILL “TennCare”  IF A1 = 50, FILL “Green Mountain Care”  IF A1 = 53, FILL “Apple Health”  IF A1 = 55, FILL “BadgerCare Plus”  IF A1 = 56, FILL “EqualityCare” |

A13. There is a government program called Medicaid that pays for health care for persons in need. [IF A1 = 4, 6, 8, 10, 13, 15, 20, 22, 23, 25, 27, 29 34, 40, 41, 42, 44, 45, 47, 50, 53, 55, 56: In your state, you may also hear it called [FILL MEDICAID PROGRAM NAME]. Are you [DISPLAY IF A2a >0 or any of your children] currently covered by Medicaid?

NBS J2

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF A13=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| A13=1 |

A13a. Have you or anyone in your household ever received Medicaid benefits? (yes/no)

SNAP E&T

[If no] Do you have a close friend or relative who has ever received Medicaid benefits? (yes/no)

If no, then screened out

|  |
| --- |
| ALL |

A14. Did you receive any SNAP benefits last month? You may know this as Food Stamps. Please include only food stamps you received for you and your family. Do not include food stamps received separately by other members of your household.

NBS K11

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF A14=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| A14=1 |

A14a. Have you or anyone in your household ever received SNAP benefits? (yes/no)

SNAP E&T

[If no] Do you have a close friend or relative who has ever received SNAP benefits? (yes/no)

If no, then screened out

|  |
| --- |
| A8b GE 1 |
| IF A8B = 1 FILL “child’s”  IF A8B > 1 FILL “children’s”  **CCDF Program**  IF A1 = 4 FILL "Care 4 Kids"  IF A1 = 5 FILL "Employment-Related Day Care (ERDC)"  IF A1 = 7 FILL "Colorado Child Care Assistance Program (CCCAP)"  IF A1 = 8 FILL "Child Care"  IF A1 = 9 FILL "Childcare and Parent Services (CAPS)"  IF A1 = 10 FILL "Child Care Assistance Program"  IF A1 = 11 FILL "CCDF Program"  IF A1 = 12 FILL "Idaho Child Care Program (ICCP)"  IF A1 = 13 FILL "Child Care Assistance (CCA)"  IF A1 = 14 FILL "Best Beginnings Child Care Scholarship Program"  IF A1 = 18 FILL "California Alternative Payment Programs"  IF A1 = 19 FILL "Child Care Certificate Program"  IF A1 = 21 FILL "Child Care Program"  IF A1 = 23 FILL "Purchase of Care"  IF A1 = 24 FILL "NH Child Care Scholarship"  IF A1 = 26 FILL "Child Care Assistance"  IF A1 = 27 FILL "Early Education and Care Financial Assistance"  IF A1 = 28 FILL "ABC Child Care Program"  IF A1 = 29 FILL "Child Development and Care (CDC)"  IF A1 = 30 FILL "Wisconsin Shares Child Care"  IF A1 = 31 FILL "Child Care Services"  IF A1 = 32 FILL "Working Connections Child Care (WCCC)"  IF A1 = 33 FILL "School Readiness"  IF A1 = 34 FILL "Workforce Solutions Child Care"  IF A1 = 35 FILL "Publicly Funded Child Care"  IF A1 = 36 FILL "Child Care Financial Assistance Program"  IF A1 = 37 FILL "Child Care and Development Block Grant Program"  IF A1 = 38 FILL "Child Care and Development Program"  IF A1 = 40 FILL "Child Care Works Subsidized Child Care"  IF A1 = 41 FILL "Child Care Connection Hawaii"  IF A1 = 43 FILL "Child Care Payment Program"  IF A1 = 44 FILL "DCCA Child Care and Development Fund Program"  IF A1 = 45 FILL "Subsidy, Resource & Referral Program"  IF A1 = 46 FILL "Employment Related Day Care (ERDC)"  IF A1 = 47 FILL "SC Voucher Program"  IF A1 = 48 FILL "Wisconsin Shares Child Care Subsidy Program"  IF A1 = 49 FILL "Subsidized Child Care Assistance (SCCA) Program" |

A15. As far as you know, do you receive any help from a child care subsidy or voucher program to pay for your [child’s/children’s] care? [DISPLAY IF A1 NE 2, 3, 6, 15, 16, 17, 20, 22, 25, 39, 42 In your state, you may also hear it called [FILL CCDF PROGRAM]]

Adapted from National Survey of Early Care and Education

J8B-E2B

*Select all that apply*

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF A15=NO RESPONSE; **Vendor’s default no-response message** |

A15a. Have you ever received help from a child care subsidy or voucher program (yes/no)

[If no] Do you have a close friend or relative who has ever received help from a child care subsidy or voucher program? (yes/no)

If no, then screened out

|  |
| --- |
| PROGRAMMER NOTE  Exclude those who have never received any benefits, and do not have any close friends or relatives who have received any benefits, from the survey. |

# VIGNETTE FILLS AND RANDOM ASSIGNMENT

In this section participants will be shown 5 vignettes selected from vignettes V1 through V6. Randomize the order in which vignettes are displayed. For each vignette, display the vignette at the top of the screen while looping through the vignette follow-up questions (DV1 through DV5) beneath it.

The vignettes have several fills. Some vary between individuals but remain constant across vignettes. Other fills vary across the displayed vignettes.

## FILLS THAT VARY BY PERSON

1. **Fills based on participant age and gender**

|  |
| --- |
| PRONOUNS  IF A3 = 1, FILL “he” and “his” and “him”  IF A3 = 2, FILL “she” and “her”  IF A3= 4 or M FILL “they” and “their”  AGE  IF A2 = 18 TO 29, FILL “In [his/her] twenties”  IF A2 = 30 TO 39, FILL “In [his/her] thirties”  IF A2 = 40 OR MORE, FILL “In [his/her] forties”  MARITAL STATUS  IF A4 LE 2. FILL “married”  IF A4 GE 3 FILL “unmarried” |

1. **Fills based on participant benefit type**

**Define BENEFT BEN\_NAME BEN\_TOT BEN\_AMT1 and BEN\_AMT2**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **CONDITION** | **BENEFIT** | **BEN\_NAME** | **BEN\_TOT** | **BEN\_AMT1** | **BEN\_AMT2** | | IF A15 = 1 ELSE | 1 | child care subsidies | 240 |  |  | | IF A13 = 1 and A14 = 1 ELSE | 2 | ROTATE between Medicaid (1-2 scenarios), SNAP (1-2 scenarios), and Medicaid and SNAP (2 scenarios)\* | 240 | 90 | 150 | | IF A13 = 1 ELSE | 3 | Medicaid | 240 |  |  | | ALL OTHER CASES | 4 | SNAP | 240 |  |  | |

**\*** For participants receiving both Medicaid and SNAP, randomly rotate the vignette scenarios to display either “SNAP,” “Medicaid,” or “Medicaid and SNAP.” Of the 5 fielded vignettes, ensure that two of the scenarios presented display “Medicaid and SNAP” and the other 3 scenarios randomly select either “SNAP” or “Medicaid.” Record the benefit scenario by person, by vignette, for analysis.

1. **Fills based on household size**

**Define HOUSEHOLD\_SIZE**

|  |
| --- |
| Set HOUSEHOLD\_SIZE = 1  If A4 LE 2 AND A8b = 0 HOUSEHOLD\_SIZE = 2 *(married, no children)*  If A4 GE 3 AND A8b GE 1 HOUSEHOLD\_SIZE = 2 *(unmarried, has children)*  If A4 LE 2 AND A8b GE 1 HOUSEHOLD\_SIZE = 3. *(married, has children)* |

**Define EARNINGS LOWEARN LOWRAISE HIGHEARN and HIGHRAISE**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Household\_size** | **EARNINGS [placeholder values]** | **LOWEARN**  **[placeholder values]** | **LOWRAISE**  **[placeholder values]** | **HIGHEARN**  **[placeholder values]** | **HIGHRAISE**  **[placeholder values]** | | 1 | 1,300 | 1,640 | 340 | 1,980 | 680 | | 2 | 1,800 | 2,140 | 340 | 2,480 | 680 | | 3 | 2,300 | 2,640 | 340 | 3,080 | 680 | |

## FILLS THAT VARY BETWEEN VIGNETTES

For each of the five fielded vignette, randomly select a name without replacement from the following list:

**NAME**

|  |
| --- |
| 1 = Alex  2 = Angel  3 = Huan  4 = Jamie  5 = Jordan  6 = Sam |

For each vignette, randomly select a treatment arm without replacement from the following list:

**TREATMENT ARM**

|  |  |  |  |
| --- | --- | --- | --- |
| **Treatment Arm** | **Risk** | **Ease** | **Raise** |
| 1 | 0 | 0 | 1 |
| 2 | 0 | 0 | 2 |
| 3 | 1 | 0 | 1 |
| 4 | 1 | 0 | 2 |
| 5 | 0 | 1 | 1 |
| 6 | 0 | 1 | 2 |
| 7 | 1 | 1 | 1 |
| 8 | 1 | 1 | 2 |
| 9 | 0 | 2 | 1 |
| 10 | 0 | 2 | 2 |
| 11 | 1 | 2 | 1 |
| 12 | 1 | 2 | 2 |

# VIGNETTES

|  |
| --- |
| **NOTE**  We recommend fielding only five vignettes. All six pretested vignettes are displayed below in case ASPE would like to pilot test, or otherwise select the five vignettes to field. |

## VIGNETTE 1

V1. [NAME] is [FILL AGE] and is [FILL MARITAL STATUS]. [IF A8b GE 1 DISPLAY: [NAME] also has a young child to take care of].

[NAME] works as a prep cook at a restaurant, where [she earns/he earns/they earn] about $[FILL EARNINGS] per month. [NAME] also receives [FILL BEN\_NAME] from the government. [She is/He is/They are] the only person earning money in their household.

Recently, [NAME] was offered a new job at another restaurant. The job has the same hours but pays more and would increase [her/his/their] income by $[if RAISE = 1 LOWRAISE / IF RAISE = 2 HIGHRAISE] per month.

[IF EASE = 0] Thankfully, this increase in income will not affect [her/his/their] [BEN\_NAME] benefits. [NAME] could always go back to [his/her/their] old job if things didn’t work out.

[IF EASE GE 1 and BENEFIT = 1 FILL: The higher income would cause [NAME] to lose [BEN\_NAME], increasing her childcare bill by BEN\_TOT per month].

IF EASE GE 1 and BENEFIT = 2 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would lose all [her/his/their] food stamps, which are worth BEN\_AMT1, and would have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

[IF EASE GE 1 and BENEFIT = 3 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would then have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

IF EASE GE 1 and BENEFIT = 4 FILL: The higher income would cause [NAME] to lose all their food stamps, which is worth BEN\_TOT per month.

[IF EASE GE 1 DISPLAY: [NAME] could always go back to [his/her/their] old job if things didn’t work out. If this happened, [NAME] would] [IF EASE = 1 DISPLAY: automatically get [BEN\_NAME] back again thanks to a new policy in [his/her/their] state.] [IF EASE = 2 DISPLAY: have to go through the reapplication process for [BEN\_NAME] again, including filling out all the paperwork and waiting for approval.]

[NAME] is trying to decide whether to take the job. [IF RISK = 0: The restaurant has been around for a while and so it seems like a safe bet / IF RISK = 1: The restaurant is new and every time NAME has walked by it seemed pretty empty. If business doesn’t pick up the restaurant might not make it].

Below is a summary of how [NAME]’s situation might change if they take the new job.

|  |  |
| --- | --- |
| Feature | Difference between old job and new job |
| Monthly income increase | $[IF RAISE = 1 FILL LOWRAISE / IF RAISE =2 FILL HIGHRAISE |
| [IF EASE GE 1 DISPLAY ROW: Lost value of monthly [BEN\_NAME] benefits] | $[FILL BEN\_TOT] |
| Likelihood of losing the new job, and having to go back to his/her original, lower income | [IF RISK = 0 Not likely / IF RISK = 1 Likely] |
| [IF EASE GE 1 DISPLAY ROW: Getting [BEN\_NAME] back:] | [IF EASE = 1 Happens automatically / IF EASE = 2 Requires re-application] |

## VIGNETTE 2

V2. [NAME] is [FILL AGE] and is [FILL MARITAL STATUS]. [IF A8b GE 1 DISPLAY: [NAME] also has a young child to take care of].

[NAME] works at a landscaping company, where [she earns/he earns/they earn] about $[FILL EARNINGS] per month. [NAME] also receives [FILL BEN\_NAME] from the government. [She is/He is/They are] the only person earning money in their household.

Recently, [NAME] was offered a new job as a groundskeeper at a golf course. The job has the same hours but pays more and would increase [her/his/their] income by $[if RAISE = 1 LOWRAISE / IF RAISE = 2 HIGHRAISE] per month.

[IF EASE = 0] Thankfully, this increase in income will not affect [her/his/their] [BEN\_NAME] benefits. [NAME] could always go back to [his/her/their] old job if things didn’t work out.

[IF EASE GE 1 and BENEFIT = 1 FILL: The higher income would cause [NAME] to lose [BEN\_NAME], increasing [her/his/their] childcare bill by BEN\_TOT per month].

IF EASE GE 1 and BENEFIT = 2 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would lose all [her/his/their] food stamps, which are worth BEN\_AMT1, and would have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

[IF EASE GE 1 and BENEFIT = 3 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would then have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

IF EASE GE 1 and BENEFIT = 4 FILL: The higher income would cause [NAME] to lose all their food stamps, which is worth BEN\_TOT per month.

[IF EASE GE 1 DISPLAY: [NAME] could always go back to [his/her/their] old job if things didn’t work out. If this happened, [NAME] would] [IF EASE = 1 DISPLAY: automatically get [BEN\_NAME] back again thanks to a new policy in [his/her/their] state.] [IF EASE = 2 DISPLAY: have to go through the reapplication process for [BEN\_NAME] again, including filling out all the paperwork and waiting for approval.]

[NAME] is trying to decide whether to take the job. [IF RISK = 0: People who work there never seem to leave, and so the job seems pretty stable / IF RISK = 1: People who work there never seem to last long].

Below is a summary of how [NAME]’s situation might change if they take the new job.

|  |  |
| --- | --- |
| Feature | Difference between old job and new job |
| Monthly income increase | $[IF RAISE = 1 FILL LOWRAISE / IF RAISE =2 FILL HIGHRAISE |
| [IF EASE GE 1 DISPLAY ROW: Lost value of monthly [BEN\_NAME] benefits] | $[FILL BEN\_TOT] |
| Likelihood of losing the new job, and having to go back to his/her original, lower income | [IF RISK = 0 Not likely / IF RISK = 1 Likely] |
| [IF EASE GE 1 DISPLAY ROW: Getting [BEN\_NAME] back:] | [IF EASE = 1 Happens automatically / IF EASE = 2 Requires reapplication] |

## VIGNETTE 3

V3. [NAME] is [FILL AGE] and is [FILL MARITAL STATUS]. [IF A8b GE 1 DISPLAY: [NAME] also has a young child to take care of].

[NAME] is a cashier at a store, where [she earns/he earns/they earn] about $[FILL EARNINGS] per month. [NAME] also receives [FILL BEN\_NAME] from the government. [She is/He is/They are] the only person earning money in their household.

Recently, a shift lead went on long-term leave. The store manager asked [NAME] if [she/he/they] wanted to replace her. [NAME] would work the same hours but being a shift lead comes with some additional responsibilities and would increase [her/his/their] income by $[if RAISE = 1 LOWRAISE / IF RAISE = 2 HIGHRAISE] per month.

[IF EASE = 0] Thankfully, this increase in income will not affect [her/his/their] [BEN\_NAME] benefits. [NAME] could always go back to [his/her/their] old job if things didn’t work out.

[IF EASE GE 1 and BENEFIT = 1 FILL: The higher income would cause [NAME] to lose [BEN\_NAME], increasing [her/his/their] childcare bill by BEN\_TOT per month].

IF EASE GE 1 and BENEFIT = 2 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would lose all [her/his/their] food stamps, which are worth BEN\_AMT1, and would have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

[IF EASE GE 1 and BENEFIT = 3 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would then have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

IF EASE GE 1 and BENEFIT = 4 FILL: The higher income would cause [NAME] to lose all their food stamps, which is worth BEN\_TOT per month.

[IF EASE GE 1 DISPLAY: [NAME] could always go back to [his/her/their] old job if things didn’t work out. If this happened, [NAME] would] [IF EASE = 1 DISPLAY: automatically get [BEN\_NAME] back again thanks to a new policy in [his/her/their] state.] [IF EASE = 2 DISPLAY: have to go through the reapplication process for [BEN\_NAME] again, including filling out all the paperwork and waiting for approval.]

[NAME] is trying to decide whether to take the new position. [IF RISK = 0: The shift-lead had been talking about quitting, and there is a good chance she won’t come back / IF RISK = 1: The shift lead said she would be back in a few months but maybe she won’t come back].

Below is a summary of how [NAME]’s situation might change if they take the new job.

|  |  |
| --- | --- |
| Feature | Difference between old job and new job |
| Monthly income increase | $[IF RAISE = 1 FILL LOWRAISE / IF RAISE =2 FILL HIGHRAISE |
| [IF EASE GE 1 DISPLAY ROW: Lost value of monthly [BEN\_NAME] benefits] | $[FILL BEN\_TOT] |
| Likelihood of losing the new job, and having to go back to his/her original, lower income | [IF RISK = 0 Not likely / IF RISK = 1 Likely] |
| [IF EASE GE 1 DISPLAY ROW: Getting [BEN\_NAME] back:] | [IF EASE = 1 Happens automatically / IF EASE = 2 Requires reapplication] |

## VIGNETTE 4

V4. [[NAME] is [FILL AGE] and is [FILL MARITAL STATUS]. [IF A8b GE 1 DISPLAY: [NAME] also has a young child to take care of].

[NAME] works as a receptionist, where [she earns/he earns/they earn] about $[FILL EARNINGS] per month. [NAME] also receives [FILL BEN\_NAME] from the government. [She is/He is/They are] the only person earning money in their household.

Recently, [NAME]’s boss offered them a new position at the call center that pays more. [NAME] would work the same hours but would increase [her/his/their] income by $[if RAISE = 1 LOWRAISE / IF RAISE = 2 HIGHRAISE] per month.

[IF EASE = 0] Thankfully, this increase in income will not affect [her/his/their] [BEN\_NAME] benefits. [NAME] could always go back to [his/her/their] old job if things didn’t work out.

[IF EASE GE 1 and BENEFIT = 1 FILL: The higher income would cause [NAME] to lose [BEN\_NAME], increasing [her/his/their] childcare bill by BEN\_TOT per month].

[IF EASE GE 1 and BENEFIT = 2 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would lose all [her/his/their] food stamps, which are worth BEN\_AMT1, and would have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

[IF EASE GE 1 and BENEFIT = 3 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would then have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

IF EASE GE 1 and BENEFIT = 4 FILL: The higher income would cause [NAME] to lose all their food stamps, which is worth BEN\_TOT per month.

[IF EASE GE 1 DISPLAY: [NAME] could always go back to [his/her/their] old job if things didn’t work out. If this happened, [NAME] would] [IF EASE = 1 DISPLAY: automatically get [BEN\_NAME] back again thanks to a new policy in [his/her/their] state.] [IF EASE = 2 DISPLAY: have to go through the reapplication process for [BEN\_NAME] again, including filling out all the paperwork and waiting for approval.]

[NAME] is trying to decide whether to take the job. [IF RISK = 0: [NAME]’s friend works at the call center and said that she heard that they won some big new clients and a lot more work was coming / IF RISK = 1: [NAME]’s friend works at the call center and said that she heard that the company lost some big clients and that layoffs might be coming].

Below is a summary of how [NAME]’s situation might change if they take the new job.

|  |  |
| --- | --- |
| Feature | Difference between old job and new job |
| Monthly income increase | $[IF RAISE = 1 FILL LOWRAISE / IF RAISE =2 FILL HIGHRAISE |
| [IF EASE GE 1 DISPLAY ROW: Lost value of monthly [BEN\_NAME] benefits] | $[FILL BEN\_TOT] |
| Likelihood of losing the new job, and having to go back to his/her original, lower income | [IF RISK = 0 Not likely / IF RISK = 1 Likely] |
| [IF EASE GE 1 DISPLAY ROW: Getting [BEN\_NAME] back:] | [IF EASE = 1 Happens automatically / IF EASE = 2 Requires reapplication] |

## VIGNETTE 5

V5. [NAME] is [FILL AGE] and is [FILL MARITAL STATUS]. [IF A8b GE 1 DISPLAY: [NAME] also has a young child to take care of].

[NAME] works as a janitor at a factory, where [she earns/he earns/they earn] about $[FILL EARNINGS] per month. [NAME] also receives [FILL BEN\_NAME] from the government. [She is/He is/They are] the only person earning money in their household.

Recently, [NAME]’s boss offered them a new position on the assembly line that pays more. [NAME] would work the same hours but would increase [her/his/their] income by $[if RAISE = 1 LOWRAISE / IF RAISE = 2 HIGHRAISE] per month.

[IF EASE = 0] Thankfully, this increase in income will not affect [her/his/their] [BEN\_NAME] benefits. [NAME] could always go back to [his/her/their] old job if things didn’t work out.

[IF EASE GE 1 and BENEFIT = 1 FILL: The higher income would cause [NAME] to lose [BEN\_NAME], increasing [her/his/their] childcare bill by BEN\_TOT per month].

IF EASE GE 1 and BENEFIT = 2 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would lose all [her/his/their] food stamps, which are worth BEN\_AMT1, and would have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

[IF EASE GE 1 and BENEFIT = 3 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would then have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

IF EASE GE 1 and BENEFIT = 4 FILL: The higher income would cause [NAME] to lose all their food stamps, which is worth BEN\_TOT per month.

[IF EASE GE 1 DISPLAY: [NAME] could always go back to [his/her/their] old job if things didn’t work out. If this happened, [NAME] would] [IF EASE = 1 DISPLAY: automatically get [BEN\_NAME] back again thanks to a new policy in [his/her/their] state.] [IF EASE = 2 DISPLAY: have to go through the reapplication process for [BEN\_NAME] again, including filling out all the paperwork and waiting for approval.]

[NAME] is trying to decide whether to take the position. [IF RISK = 0: [NAME] has been at the factory for a while and thinks [he/she/they] would be good at it / IF RISK = 1: [NAME] has been at the factory for a while and knows that [he/she/they] won’t be able to stay on the line if [he/she/they] can’t make their numbers each day].

Below is a summary of how [NAME]’s situation might change if they take the new job.

|  |  |
| --- | --- |
| Feature | New job |
| Monthly income increase | $[IF RAISE = 1 FILL LOWRAISE / IF RAISE =2 FILL HIGHRAISE |
| [IF EASE GE 1 DISPLAY ROW: Lost value of monthly [BEN\_NAME] benefits] | $[FILL BEN\_TOT] |
| Likelihood of losing the new job, and having to go back to his/her original, lower income | [IF RISK = 0 Not likely / IF RISK = 1 Likely] |
| [IF EASE GE 1 DISPLAY ROW: Getting [BEN\_NAME] back:] | [IF EASE = 1 Happens automatically / IF EASE = 2 Requires reapplication] |

## VIGNETTE 6

V6. [NAME] is [FILL AGE] and is [FILL MARITAL STATUS]. [IF A8b GE 1 DISPLAY: [NAME] also has a young child to take care of].

[NAME] works as a personal home aid, where [she earns/he earns/they earn] about $[FILL EARNINGS] per month. [NAME] also receives [FILL BEN\_NAME] from the government. [She is/He is/They are] the only person earning money in their household.

Recently, [NAME] was offered a job as an orderly in a nursing home. [NAME] would work the same hours but would increase [her/his/their] income by $[if RAISE = 1 LOWRAISE / IF RAISE = 2 HIGHRAISE] per month.

[IF EASE = 0] Thankfully, this increase in income will not affect [her/his/their] [BEN\_NAME] benefits. [NAME] could always go back to [his/her/their] old job if things didn’t work out.

[IF EASE GE 1 and BENEFIT = 1 FILL: The higher income would cause [NAME] to lose [BEN\_NAME], increasing [her/his/their] childcare bill by BEN\_TOT per month].

IF EASE GE 1 and BENEFIT = 2 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would lose all [her/his/their] food stamps, which are worth BEN\_AMT1, and would have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

[IF EASE GE 1 and BENEFIT = 3 FILL: The higher income would cause [NAME] to lose [BEN\_NAME]. [She/He/They] would then have to purchase health insurance. [NAME] looked around and found a subsidized plan on healthcare.gov that costs BEN\_AMT2 per month [(for the premium), and with a deductible and copays that he does not have under Medicaid].

IF EASE GE 1 and BENEFIT = 4 FILL: The higher income would cause [NAME] to lose all their food stamps, which is worth BEN\_TOT per month.

[IF EASE GE 1 DISPLAY: [NAME] could always go back to [his/her/their] old job if things didn’t work out. If this happened, [NAME] would] [IF EASE = 1 DISPLAY: automatically get [BEN\_NAME] back again thanks to a new policy in [his/her/their] state.] [IF EASE = 2 DISPLAY: have to go through the reapplication process for [BEN\_NAME] again, including filling out all the paperwork and waiting for approval.]

[NAME] is trying to decide whether to take the job. [IF RISK = 0: She/He/They heard about the job from someone in his building who heard that people who work there stay for a long time / IF RISK = 1: She/He/They heard about the job from someone in his building who heard that they are always hiring but that people who work there never seem to last].

Below is a summary of how [NAME]’s situation might change if they take the new job.

|  |  |
| --- | --- |
| Feature | New job |
| Monthly income increase | $[IF RAISE = 1 FILL LOWRAISE / IF RAISE =2 FILL HIGHRAISE |
| Lost value of monthly [BEN\_NAME]benefits | $[FILL BEN\_TOT] |
| Likelihood of losing the new job, and having to go back to his/her original, lower income | [IF RISK = 0 Not likely / IF RISK = 1 Likely] |
| [IF EASE GE 1 Getting [BEN\_NAME] back:] | [IF EASE = 1 Happens automatically / IF EASE = 2 Requires reapplication] |

# POST-VIGNETTE QUESTIONS

|  |
| --- |
| **PROGRAMMER NOTE**  For each vignette, display the vignette at the top of the screen while looping through the vignette follow-up questions beneath it. DV1a, DV1b, DV1c, DV4, and DV6 should only be displayed with the first vignette. |

|  |
| --- |
| display for first vignette only |

DV1a. DISPLAY VIGNETTE HERE

At this new job, how much more will [NAME] earn per month?

$ per month

(RANGE 0-9999)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK (once only): IF DV1a NE IF RAISE = 1 FILL LOWRAISE / IF RAISE =1 FILL HIGHRAISE **This answer is incorrect, please read the description of [NAME] new job and try again.** |

|  |
| --- |
| DV1A GE 0 Display for FIRST vignette only |

DV1b. DISPLAY VIGNETTE HERE

If [NAME] takes the new job, by how much will their benefits decrease?

$ per month

(RANGE 0-9999)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK (once only): IF DV1b NE BEN\_TOT **This answer is incorrect, please read the description of [NAME’s] new job and try again.** |

|  |
| --- |
| DV1A GE 0 Display for FIRST vignette only |

DV1c. DISPLAY VIGNETTE HERE

If [NAME] has to go back to their old job, how would they go about getting their [BEN\_NAME] benefits back?

🔾 [NAME] would get their [BEN\_NAME] benefits back automatically 0

🔾 {NAME} would have to reapply for [BEN\_NAME] benefits 1

🔾 {NAME} did not lose their [BEN\_NAME] benefits 2

NO RESPONSE M

|  |
| --- |
| DV1A GE 0 display for all vignettes |

DV2. DISPLAY VIGNETTE HERE

Do you think that [NAME] should take the new job?

🔾 [NAME] should take the new job 1

🔾 {NAME} should stay at their old job 0

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF DV2=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| DV1A GE 0 display for all vignettes |

DV3. DISPLAY VIGNETTE HERE

How certain are you that [NAME] should/should not take the new job?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Very  uncertain | Uncertain | Somewhat uncertain | Somewhat  certain | Certain | Very certain |
| 🔾 1 | 🔾 2 | 🔾 3 | 🔾 4 | 🔾 5 | 🔾 6 |

|  |
| --- |
| HARD CHECK: IF DV3=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| DV2 GE 0: Display for first vignette only |
| If V1c=1, FILL “should”  If V1c=0, FILL “should not” |

DV4. DISPLAY VIGNETTE HERE

Why do you think they [should/should not] take the new job?

REASON FOR CHOICE

(STRING 500)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF V1d=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| DV1A GE 0 Display for ALL VIGNETTES |

DV5. DISPLAY VIGNETTE HERE

If [NAME] has to go back to their old job, how easy or difficult do you think it is for [NAME] to get their benefits back?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Very  Difficult | Difficult | Somewhat  difficult | Somewhat  easy | Easy | Very easy |
| 🔾 1 | 🔾 2 | 🔾 3 | 🔾 4 | 🔾 5 | 🔾 6 |

|  |
| --- |
| DV2 GE 0: Display for first vignette only |

DV6. DISPLAY VIGNETTE HERE

How stable does [NAME]’s new job sound?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Very  unstable | Unstable | Somewhat  unstable | Somewhat  stable | Stable | Very stable |
| 🔾 1 | 🔾 2 | 🔾 3 | 🔾 4 | 🔾 5 | 🔾 6 |

|  |
| --- |
| **PROGRAMMER NOTE**  Loop above questions for each vignette fielded. |

|  |
| --- |
| **PROGRAMMER NOTE**  Display below questions after completing all fielded vignettes. |

|  |
| --- |
| V1A GE 0 |

B1. Some people tell us they have made certain life decisions in order to keep their [BEN\_NAME] benefits. In order to maintain my [BEN\_NAME] benefits, I have:

Roll & East

*Select all that apply*

🞏 Not taken a raise at my job 1

🞏 Not taken on additional hours at my job 2

🞏 Not taken a job offer 3

🞏 Not gotten married 4

🞏 Not accepted child support 5

🞏 Done something else to keep benefits 6

🞏 Have not made different life decisions in order to keep benefits 7

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B1=NO RESPONSE; **Vendor’s default no-response message** |

|  |
| --- |
| all |

C1. It is vital to our study that we only analyze responses from people that paid close attention to this study. In your honest opinion, should we include your data in our analyses?

Mead & Craig, 2012

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| all |

C2. OPTIONAL: Before you exit the survey, is there anything else you want to tell us?

PARTING THOUGHTS

(STRING 1000)

🔾 No 0

NO RESPONSE M

|  |
| --- |
| if complete |

C3. Thank you for completing this survey. HHS will use the information to inform future policy about benefits.

|  |
| --- |
| if screened out |

C4. Thank you for your interest in this survey. Unfortunately, you are not eligible to complete this survey.