# Department of Labor Employment and Benefits Security Administration Tree Testing Baseline Survey 11/21/2022

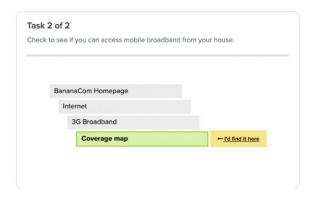
**Purpose:** The purpose of the baseline Tree Testing survey is to gather baseline data on how easily people can find information on the current DOL EBSA website based on the current wording, organizational structure, and hierarchy of the website. The results will be compared to additional Tree Tests conducted after web enhancements are made to see if there is an improvement in correctly finding information in the designated places on the website.

Target Audience: Multicultural workforce or their beneficiaries

- Age range: 18-67 years
- Has employer-based health insurance and/or employer-based retirement plan OR is a beneficiary of an individual who has them
- Works at a company with more than 100 employees
- Does not have coverage through programs such as Medicare, Medicaid, Indian Health Services, Veterans Affairs Health Care, or TRICARE
- Ensure diversity in race/ethnicity, geographic location, income levels, ability levels (including visual disabilities), and those who lack access to resources

**Methodology:** CMRignite will program these questions into a Tree Testing platform, called Treejack, accessible by respondents via a survey link. We will work with a sample provider, Optimal Workshop Panel, to recruit 30 participants that fit the target audience criteria.

**Information about the Survey Questions:** Respondents will asked to complete a task related to finding information on a particular web page. They won't visit the web page, but they will see a list of topics (links) currently on the page. The gold box represents the first set of topics that all respondents will see, and they will be asked to choose one topic indicating where they would click first to complete the task. The green box represents the second set of topics respondents will choose after clicking an option from the first set of choices in the gold box (depending on what topic they click). Once a respondent has made their final decision on where they would expect to find the information, they will be shown a "I'd find it here button" (depicted below) which they will select. Note, the highlighted response options are the paths the respondent should take to find the information based on the current configuration of the website.



The OMB control number for this collection is 1225-0093 and expires on 02/29/2024. According to the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless such collection displays a valid OMB control number. Collection of this information is authorized by OMB. The obligation to respond to this collection is voluntary. We estimate it takes about 30 minutes to complete.

### **Screening Questions**

Please answer a few questions to see if you qualify for the survey.

1) What is your age group? (Select one)

Less than 18 years old [Disqualify and end survey]
18-24
25-34
35-44
45-54
55-64
65-67

68 years old or older [Disqualify and end survey]

Disqualify/End Survey Message: We're sorry. Based on your answers, you don't match the specific profile for the survey. We greatly appreciate your time and interest. You may close your browser.

2) Where do you live? [Drop-down list of states] (Select one)

I do not live in the United States. [Disqualify and end survey]

3) Do you have job-based health insurance or a job-based retirement plan? (Select one)

Yes No I don't know

3a) [If No on previous question] Do you receive benefits from a family member who has job-based health insurance or a job-based retirement plan? (Select one)

```
Yes
No [Disqualify and end survey]
```

4) Does the company/organization you work for (or the insured family member works for) have more than 100 employees? (Select one)

```
Yes
No [Disqualify and end survey]
I don't know [Disqualify and end survey]
```

5) Do you have coverage through any of these programs: Medicare, Medicaid, Indian Health Services, Veterans Affairs Health Care, or TRICARE? (Select one)

Yes [Disqualify and end survey]
No

I don't know [Disqualify and end survey]

The OMB control number for this collection is 1225-0093 and expires on 02/29/2024. According to the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless such collection displays a valid OMB control number. Collection of this information is authorized by OMB. The obligation to respond to this collection is voluntary. We estimate it takes about 30 minutes to complete.

You have qualified for the study. Please complete the following 6 tasks by choosing the topics you would click on to find the information. Your responses combined with others help to guide the layout and grouping of topics on websites for people to learn about benefits related to job-based health insurance and retirement plans.

### [Tasks will be randomized]

### Task 1: Where would you go to see the goal/purpose of the Employee Benefits Security Administration? [Tree Test for About Us page]

Select the topic you would click first. [Based on the respondent's selection from the list below, the respondents will see the Tree for that link; highlighted responses include the correct navigation]

### What We Do

Our Organization

Find Your Regional Office

Our Mission

**ERISA Advisory Council** 

State All Payer Claims Databases Advisory Committee (SAPCDAC)

### Select the topic you would click next.

### [PN Tree for What We Do]

Agency Enforcement Results | News Release

Agency Enforcement Archive

**EBSA Non-Retaliation Policy** 

History of EBSA and ERISA

Children's Health Insurance Program Working Group

**Consumer Complaints** 

Our Organization

Find Your Regional Office

### **Our Mission**

**ERISA Advisory Council** 

www.askebsa.dol.gov

### [PN Tree for Our Organization]

### No further tree needed

### [PN Tree for Find Your Regional Office]

No further tree needed

### [PN Tree for Our Mission]

No further tree needed

### [PN Tree for ERISA Advisory Council]

Agenda

Register to Attend

Federal Registrar Notice

**ERISA Advisor Council Reports** 

**Appointment Process** 

**Executive Summary** 

Working Process of the Advisory Council

2022 ERISA Advisory Council Members

2022 ERISA Advisory Council Issue Statements

2022 Witness Statements

### [PN Tree for SAPCDAC]

Introduction

**Appointment Process** 

**Advisory Committee Members** 

Charter and Other Committee Advisory Materials

Final Report and Recommendations

## Task 2: You lost your job. Where do you go to see what to do about your job-based health insurance and retirement benefits? [Tree Test for Ask EBSA page]

Select the topic you would click first. [Based on the respondent's selection from the list below the respondents will see the Tree for that link]

### **Common Questions**

Resources

**Publications** 

Ask a question, submit a complaint, report a problem

Select the topic you would click next.

### [PN Tree for Common Questions]

Can the Department of Labor assist me with my health, disability, or other ERISA welfare benefit issue, if my benefit is being denied by my plan?

Am i eligible for COBRA?

If I lose my job can I enroll in my spouse's health plan immediately? Can I enroll my adult child in my health plan?

How do I file a claim for my health benefits?

Where can I find information on the Affordable Care Act?

What do I do if my Multiple Employer Welfare Arrangement (MEWA) can no longer pay health benefits?

Can the Department of Labor assist me with my pension, 401(k), profit sharing, or other retirement issue, if my benefit is lost, stolen, or being denied by my plan?

I received a notice from the Social Security Administration that I may have a private retirement benefit. Can you help me?

How do I file a claim for retirement benefits?

I lost my job. How do I protect my health and retirement benefits?

What about fees and expenses in 401(k) plans?

### [PN Tree for Resources]

Frequently Asked Questions
Fact Sheets
Health Benefits Advisor
Abandoned Plan Search
Videos
Find your plan's annual 5500 reports
Find a Form M-1

### [PN Tree for Publications]

What You Should Know About Your Retirement Plan

Savings Fitness: A Guide to Your Money and Your Financial Future Taking the Mystery out of Retirement Planning Your Rights After A Mastectomy...Women's Health & Cancer Rights Act of 1998 Order publications electronically

### [PN Tree for Ask Questions]

Request assistance online EBSA Office Read more about what we do Email our webmaster Email us to suggest improvements

## Task 3: You want to know what your rights are related to your retirement benefits. [Tree Test for Resources including outreach events]

Select the topic you would click first. [Based on the respondent's selection from the list below, the respondents will see the Tree for that link]

Advisory Opinions Amicus Briefs

Compliance Assistance Releases

**Fact Sheets** 

**FAQs** 

**Forms** 

Information Letters

**Publications** 

Reports

Research Papers

**Research Bulletins** 

Seminars and Webcasts

Videos

Related Resources

Select the topic you would click next. [Based on the respondent's selection from the list below, the respondents will see the Tree for that link]

### [PN Tree for Advisory Options]

Office of Regulations and Interpretations

**ERSIA Procedure 76-1** 

**Data Dictionary** 

### [PN Tree for Amicus Briefs]

Additional Amicus Briefs

List of years from 2000 to 2019

### [PN Tree for Compliance Assistant Releases]

2022

2021

### [PN Tree for Fact Sheets]

Health

Retirement

Program

### [PN Tree for FAQs]

### Retirement

Health

**Voluntary Correction Programs** 

Reporting and Disclosure

### [PN Tree for Forms]

Form 5500 Series Form PR Form M-1 Annual Report Notices for Apprenticeship and Training Plans and Top Hat Plan Statements Health and Retirement Form 5500/Form 5500-SF Filing Search

Form PR Filing Search

Form M-1 Online Filing Search

Apprenticeship and Training Plan Notice Searches and Top Hat Plan Statem and Searches

### [PN Tree for Reports]

List of years from 2000 to 2019

### [PN Tree for Research Papers]

Funded Retirement Research Papers 1998-2017 Funded Health and Welfare Research Papers 1999-2022

### [PN Tree for Research Bulletins]

Retirement

Health and Welfare

### [PN Tree for Seminars and Webcasts]

For Workers and Families

For Employers and Advisors

### [PN Tree for Videos]

A look at 401K Plan Fees

Choosing a Health Plan for Your Small Business

Choosing a Retirement Solution for Your Small Business

Health Care Coverage - Pay a Little to Save A Lot

Know Your Health Benefit Rights

Making Your Retirement Look Great

Protecting Health and Retirement Benefits After Job Loss

Questions? EBSA has Answers

**Saving Matters** 

Saving Fitness Financial Planning Series

What Do You Want Your Retirement to Look Like?

### [PN Tree for Related Resources]

**Public Sector Resources** 

Private Sector Resources

## Task 4: Your mental health benefits were denied by your job-based health insurance. Where would you go to see if you can appeal the claim? Tree Test for Mental Health Parity and Addiction Equity Act

Select the topic you would click first. [Based on the respondent's selection from the list below the respondents will see the Tree for that link]

### **FAQs**

### **Know Your Rights**

Learn how to use your employer-sponsored health plan.

Visit the Substance Abuse and Mental Health Services Administration website

### Regulations

Guidance

Related information

Publications and Videos Reports and research papers Other resources askebsa.dol.gov

Select the topic you would click next.

### [PN Tree for FAQs]

No Further Tree Needed

### [PN Tree for Know Your Rights]

No Further Tree Needed

### [PN Tree for Learn How to Use your employer-sponsored health plan]

No Further Tree Needed

### [PN Tree for Visit the Substance Abuse and Mental Health Services Administration website]

No Further Tree Needed

### [PN Tree for Regulations]

Final Regulation

[PN Tree for Guidance]

### **Frequently Asked Questions**

Mental Health Parity and Addiction Equity Act

Mental Health Parity Implementation (ACA FAQs Part V)

Mental Health Parity Implementation (ACA FAQs Part VII)

Mental Health Parity Implementation (ACA FAOs Part XVII)

Mental Health Parity Implementation (ACA FAQs Part XVIII)

Mental Health Parity Implementation (ACA FAQs Part XXIX)

Mental Health Parity Implementation (ACA FAQs Part 31)

Mental Health Parity Implementation (ACA FAQs Part 34)

Mental Health Parity Implementation (ACA FAQs Part 38)

**Draft MHPAEA Disclosure Template** 

**PRA Information Collection Request** 

**Public Comments** 

Mental Health Parity Implementation (ACA FAOs Part 39 - Proposed)

Revised Draft MHPAEA Disclosure Template (issued April 23, 2018)

PRA Information Request

PRA Appendix II: Crosswalk of Changes

Public Comments – Proposed MHPAEA FAOs Part 39

Public Comments – Revised Draft MHPAEA Disclosure Template

Mental Health Parity Implementation (ACA FAQs Part 39 - Final)

Final MHPAEA Disclosure Template

**Outpatient Benefit Sub-classifications** 

Understanding Implementation of MHPAEA

Mental Health Parity Implementation (ACA FAQs Part 45)

### [PN Tree for Related Information]

FY2021 MHPAEA Enforcement Fact Sheet

**Appendix** 

FY2020 MHPAEA Enforcement Fact Sheet

**Appendix** 

Introduction

FY2019 MHPAEA Enforcement Fact Sheet

Appendix

FY2018 MHPAEA Enforcement Fact Sheet

Appendix

Introduction

FY2017 MHPAEA Enforcement Fact Sheet

FY2016 MHPAEA Enforcement Fact Sheet

FY2015 Enforcement Fact Sheet

MHPAEA IFR Fact Sheet

Mental Health and Addiction Insurance Help

Standards Related to Essential Health Benefits, Actuarial Value, and Accreditation Application of MHPAEA to Medicaid MCOs, CHIP, and Alternative Benefit (Benchmark) Plans

Internal Claims and Appeals and External Review

Mental Health Parity Act Model Forms

### [PN Tree for Publications and Videos]

Disclosure Guide: Making the Most of Your Mental Health and Substance Use Disorder Benefits

Know Your Rights: Parity for Mental Health and Substance Use Disorder Benefits Parity of Mental Health and Substance Use Benefits with Other Benefits: Using Your

Employer-Sponsored Health Plan to Cover Services

Understanding Parity: A Guide to Resources for Families and Caregivers

Top Ten Ways to Make Your Health Benefits Work for You

elaws Health Benefits Advisor

Questions? EBSA Has the Answers | in Spanish

### [PN Tree for Reports and Research Papers]

2022 Report to Congress: Realizing Parity, Reducing Stigma, and Raising Awareness

DOL 2020 Report to Congress: Parity Partnerships: Working Together

DOL 2018 Report to Congress: Pathway to Full Parity

**HHS Action Plan** 

DOL 2016 Report to Congress: Improving Health Coverage for Mental Health and Substance Use Disorder Patients

DOL 2014 Report to Congress: Compliance With the Mental Health Parity and Addiction Equity Act of 2008

DOL 2012 Report to Congress: Compliance With the Mental Health Parity and Addiction Equity Act of 2008

HHS Study: Consistency of Large Employer and Group Health Plan Benefits with Requirements of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008

HHS Study: Short-Term Analysis to Support Mental Health and Substance Use Disorder Parity Implementation

### [PN Tree for Other Resources]

SAMHSA Home Page

SAMHSA Health Reform - Mental Health Parity

SAMHSA - Caring for Every Child's Mental Health

SAMHSA - National Center on Substance Abuse and Child Welfare

SAMHSA - National Prevention Week

National Institute of Mental Health

National Institute on Drug Abuse

Department of Defense Centers of Excellence

Children's Mental Health Network

National Association of Insurance Commissioners

National Council for Community Behavioral Healthcare

National Alliance on Mental Illness

Health Law Advocates

National Association of State Mental Health Program Directors

National Association of State Alcohol and Drug Abuse Directors, Inc.

**Community Catalyst** 

Legal Action Center

The College for Behavioral Health Leadership

## Task 5: You have questions on the rising cost of medical care and what is being done to prevent your job-based health insurance from increasing prices unfairly if you need to go to the ER. [Tree Test for Surprise Billing (Consolidated Appropriations Act, 2021)]

Select the topic you would click first. [Based on the respondent's selection from the list below, the respondents will see the Tree for that link]

### Laws

Statutes (United States code)

**Executive Orders** 

Select the topic you would click next.

### [PN Laws]

Affordable Care Act (ACA)

American Rescue Plan Act (ARP)

Consolidated Omnibus Budget Reconciliation Act (COBRA)

Employee Retirement Income Security Act (ERISA)

Health Insurance Portability and Accountability Act (HIPAA)

Mental Health Parity and Addiction Equity Act (MHPAEA) of 2008

### No Surprises Act

Pension Protection Act (PPA)

Setting Every Community Up for Retirement Enhancement Act of 2019 (SECURE Act)

Children's Health Insurance Program Reauthorization Act (CHIPRA)

Canatic Information Nondiscrimination Act (CINA)

Newborns' and Mothers' Health Protection Act (NMHPA)

Women's Health and Cancer Rights Act (WHCRA)

### [PN Tree for Statutes (United States code)]

ERISA Title 29 Chapter 18 Public Law No. 93-406

### [PN Tree for Executive Orders]

Reorganization Plan No. 4 of 1978 ERISA Transfers of Authority

## Task 6: You have questions about your benefits and want to contact EBSA. [Tree Test for Ask EBSA form]

Select the topic you would click first. [Based on the respondent's selection from the list below, the respondents will see the Tree for that link]

**Common Questions** 

### Resources

**Publications** 

Ask a question, submit a complaint, report a problem

Select the topic you would click next.

### [PN Tree for Common Questions]

Can the Department of Labor assist me with my health, disability, or other ERISA welfare benefit issue, if my benefit is being denied by my plan?

Am I eligible for COBRA?

If I lose my job can I enroll in my spouse's health plan immediately?

Can I enroll my adult child in my health plan?

How do I file a claim for my health benefits?

Where can I find information on the Affordable Care Act?

What do I do if my Multiple Employer Welfare Arrangement (MEWA) can no longer pay health benefits?

Can the Department of Labor assist me with my pension, 401(k), profit sharing, or other retirement issue, if my benefit is lost, stolen, or being denied by my plan?

I received a notice from the Social Security Administration that I may have a private retirement benefit. Can you help me?

How do I file a claim for retirement benefits?

I lost my job. How do I protect my health and retirement benefits?

What about fees and expenses in 401(k) plans?

### [PN Tree for Resources]

### **Frequently Asked Questions**

Fact Sheets

Health Denefits Advisor

Abandoned Plan Search

Videos

Find your plan's annual 5500 reports

Find a Form M-1

### [PN Tree for Publications]

What You Should Know About Your Retirement Plan Savings Fitness: A Guide to Your Money and Your Financial Future Taking the Mystery out of Retirement Planning

Your Rights After A Mastectomy...Women's Health & Cancer Rights Act of 1998 Order publications electronically

### [PN Tree for Ask Questions]

Request assistance online EBSA Office Read more about what we do Email our webmaster Email us to suggest improvements

### **About You**

These questions help us combine your responses with others like you.

- 7) Were you born in the United States? (Select one)
  - o Yes
  - o No
  - o I prefer not to answer
- 8) What is the combined income of all members of your household for the past 12 months (before taxes and from all sources)? (Select one)
  - o Less than \$10,000
  - o \$10,000 to under \$25,000
  - o \$25,000 to under \$50,000
  - o \$50,000 to under \$75,000
  - o \$75,000 to under \$100,000
  - o \$100,000 to under \$150,000
  - o \$150,000 to under \$200,000
  - o \$200,000 or more

9) A	re you o	f Spanish, Hispanic, or Latino origin? (Select one)
	0	Yes
	0	No
	0	I prefer not to answer
10)	What ra	ace best describes you? (Select all that apply)
		American Indian or Alaska Native
		Asian/Pacific Islander
		Black/African American
		White/Caucasian
		Other (specify)
		I prefer not to answer
11)	What is	the highest level of school you completed? (Select one)
	0	No high school diploma or GED
	0	High school diploma or GED
	0	Some college, no degree
	0	College degree, or vocational training degree or certificate (2-year program)
	0	College degree (4-year program)
	0	Master's/Graduate degree or higher
	0	I prefer not to answer

0

I prefer not to answer

12) How do you describe your gender identity? (Select the best fit)				
O Woman, female, or feminine				
0	O Man, male, or masculine			
0	O Transgender woman, female, or feminine			
0	O Transgender man, male, or masculine			
0	O Nonbinary, gender queer, or gender fluid			
0	O Not listed here/I prefer to self-describe: (specify)			
0	O I prefer not to answer			
13) What language(s) do you speak? (Select all that apply)				
		English		
		Spanish		
		Chinese		
		Vietnamese		
		Korean		
		Haitian Creole		
		Polish		
		Tagalog		
		Arabic		
		Russian		
		Portuguese		
		French		
		Other (specify)		
		I prefer not to answer		

14) Do you identify with any of the following statements? (Select all that apply)				
□ I we	ear glasses.			
□ I ha	ve difficulty seeing small words or shapes.			
□ I ha	ve difficulty seeing certain colors. (Please specify.)			
□ I ha	ve a vision impairment. (Please specify.)			
☐ I pre	efer not to answer.			
□ Nor	ne of the above			
15) Would you like to participate in a virtual interview to share your opinions about organization and information that may be helpful? It will take about 40 minutes, there is no need to prepare, and all you need is a smartphone or device to join the call. After the interview, you will receive a \$75 electronic gift card as a thank you.  Yes No				
	ase provide your information below, and we will reach out to you to schedule rmation will be kept separate from your survey responses.			
Last name: Email addre Mobile pho	First name: Last name: Email address: Mobile phone (include area code): Days/times available for a 40-minute interview (include time zone):			
	##			
We thank you for your time spent taking this survey. Your response has been recorded.				