2023 DOL/EBSA - Quantitative UX Survey

Start of Block: Screener

Consent OMB Control No. 1225-0093 Expiration Date: 02/29/2024

Informed Consent for Research Participation:

Thanks for taking the time to complete the survey. Please read the statements below and sign where indicated.

By submitting this form you are indicating that you have read the description of the study and that you agree to the terms as described.

If you have any questions, or would like a copy of this consent form, please contact <u>surveys@cmrignite.com</u>.

What this study is about

This survey is being conducted by the CMRignite on behalf of the Department of Labor, Employment and Benefits Security Administration (EBSA). This survey is about enhancing the information and resources provided by EBSA on the website and improving the website user experience. You were asked to participate by M-S-G, a third-party sample provider.

Your Involvement in the Study

We will ask you a series of questions about your awareness of EBSA, awareness of various rights related to job-based health benefit and retirement benefit plans, and your opinions about the EBSA website. The survey should take a maximum of 20 minutes total.

Your Participation is Voluntary

Participation is completely voluntary. You may refuse to answer any questions or end participation at any time.

Confidentiality

We will take necessary and appropriate precautions to keep what you tell us confidential. We may develop and present research reports that summarize the results of all the participants who complete the survey. The reports are for internal use only. We will not use your real name in any of our materials.

Storage of Personal Information and Session Data

We will securely store and process your personal information and session data until we deem

the content no longer necessary for the research purposes outlined above. This data can include your name, email address, and phone number.

Statement of Consent

I have read the above information and received answers to any questions I have asked. I consent to take part in this survey and to have any information I provide be used in the manner described above. I understand that my name will not be used in connection to survey responses. I expressly release CMRignite from and against any and all claims that I have or may have for invasion of privacy, defamation, or any other cause of action arising out of the production, distribution, display, or publication of the results of the project, so long as the conditions of use described above are met.

O By clicking here, you agree to participate in this study

Page Break

Intro Please answer a few questions to see if you qualify for the survey. These questions help us combine your responses with others like you. Your answers provided will be kept confidential and not shared outside the project team.

Page Break —

Q1 What is your age group? (Select one)

\bigcirc Less than 18 years	s old	
0 18-24		
25-34		
35-44		
0 45-54		
55-64		
65-67		
68+		
Page Break		

End of Block: Screener

Start of Block: State

Q2 Where do you live? (Select one)

▼ Alabama ... I do not live in the United States

[Disqualify and end survey]" if potential respondents were younger than 18, over 68, and live outside the U.S.

Page Break -----

End of Block: State

Start of Block: Main Questions

Intro 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 20 minutes to complete.

Thank you for answering these questions. You qualify to take part in the survey. Please answer the following questions about websites.

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Q3 What device do you typically use to find information online, such as websites? (Select the one you use the most)

O Computer/laptop	
◯ Tablet (iPad, Microsoft Surface, etc.)	
O Mobile phone	
Other (specify)	
O None of the above	
Page Break	

[X]

	Strongly disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly agree 5
You are familiar with the U.S. Department of					
Labor, Employee Benefits Security Administration	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
You would visit the U.S. Department of Labor, Employee Benefits Security Administration website in the next 6 months	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
You have seen information online (e.g., social media) related to or about the U.S. Department of Labor, Employee Benefits Security Administration, in the last 6 months	0	0	0	0	0
You are familiar with workers' rights related to job- based health benefit and retirement benefit plans.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Q4 What best reflects your level of agreement with the following statements?

I trust the U.S. Department of Labor, Employee Benefits Security Administration, to fulfill our country's commitment to people with job-based health benefit and retirement benefit plans.	0	0	0	0	0
Page Break —					

WebIntro Please take a moment to review the website <u>https://www.dol.gov/agencies/ebsa</u> and answer the following questions.

Page Break

Q5 Have you visited this website before? (Select one)

◯ Yes				
◯ No				
🔿 Don't ł	(now			
Page Break				

Q6 What best reflects your level of agreement with the following statements?

	Strongly disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly agree 5
The information is relevant to you or a loved one	0	0	0	0	0
It is easy to navigate	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The information is logically organized	\bigcirc	0	0	\bigcirc	0
The font is easy to read	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The colors work well	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The information is easy to understand	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The website design is user-friendly	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
It is inclusive and welcoming for all types of people	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
The information is trustworthy	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Page Break —

[X]

Q7 What would it take for you to consider visiting the website https://www.dol.gov/agencies/ebsa in the future? (Select all that apply)

	Advice from a coworker/Human Resource person
	Advice from a spouse/family member/friend
	Being able to speak to an agency representative
	A video/webinar about the agency
	A letter/flyer in the mail about the agency
	Ads about the agency
	Stories/examples from people who have used the website
retireme	If you need information about workers' rights related to health benefit or nt benefit plans
	Other (specify)
	Nothing would get me to consider visiting the website

Page Break -

Х,

Q8 How likely is it that you would recommend the website <u>https://www.dol.gov/agencies/ebsa</u> to a friend, family member, or someone you work with?

◯ 0 - Not at all likely	
○ 1	
○ 2	
○ 3	
○ 4	
○ 5	
○ 6	
○ 7	
0 8	
○ 9	
◯ 10 - Extremely likely	
O Don't know	
End of Block: Main Questions	

Start of Block: About Us Webpage

AboutUsIntro Please take a moment to review this web page <u>About Us</u>and answer the following questions.

Х,

	Strongly disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly agree 5
The information is relevant to you or a loved one	0	0	\bigcirc	0	0
The information is logically organized	0	\bigcirc	\bigcirc	\bigcirc	0
The information is easy to understand	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc
The information is trustworthy	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
You learned new information	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Page Break —					

Q9 What best reflects your level of agreement with the following statements?

End of Block: About Us Webpage

Start of Block: Ask EBSA

AskEBSAIntro Please take a moment to review this web page <u>Ask EBSA</u> and answer the following questions.

X,

Q10 What best reflects your level of agreement with the following statements?

The information is relevant to you or a loved one The information is logically organized The information is easy to understand The information is trustworthy You learned	ongly gree 5	agre	Agree 4	Neutral 3	Disagree 2	Strongly disagree 1	
information is logically organized The information is easy to understand The information is trustworthy You learned	0	(0	0	0	0	information is relevant to you or a
information is easy to understand The information is trustworthy You learned	\bigcirc	(0	0	0	0	information is logically
information is trustworthy You learned	\bigcirc	(\bigcirc	\bigcirc	\bigcirc	0	information is easy to
	\bigcirc	(\bigcirc	\bigcirc	\bigcirc	\bigcirc	information is
information	\bigcirc	(\bigcirc	\bigcirc	\bigcirc	0	new
Page Break							Paga Brook

End of Block: Ask EBSA

Start of Block: Resources

ResourcesIntro Please take a moment to review this web page <u>Resources</u> and answer the following questions.

X,

Q11 What best reflects your level of agreement with the following statements?

	Strongly disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly agree 5
The information is relevant to you or a loved one	0	0	0	0	0
The information is logically organized	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc
The information is easy to understand	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The information is trustworthy	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
You learned new information	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
Page Break —					

End of Block: Resources

Start of Block: MHPAEA

MHPAEAIntro Please take a moment to review this web page <u>MHPAEA - Mental Health Parity</u> and <u>Addiction Equity Act</u> and answer the following questions.

Х,

Q12 What best reflects your level of agreement with the following statements?

	Strongly disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly agree 5
The information is relevant to you or a loved one	0	0	0	0	0
The information is logically organized	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The information is easy to understand	\bigcirc	0	0	\bigcirc	0
The information is trustworthy	\bigcirc	0	\bigcirc	0	\bigcirc
You learned new information	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Page Break —					

End of Block: MHPAEA

Start of Block: Surprise Billing

BillingIntro Please take a moment to review this web page <u>Surprise Billing (Consolidated</u> <u>Appropriations Act, 2021)</u> and answer the following questions.

Х,

Q13 What best reflects your level of agreement with the following statements?

	Strongly disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly agree 5
The information is relevant to you or a loved one	0	0	0	0	0
The information is logically organized	0	\bigcirc	0	\bigcirc	\bigcirc
The information is easy to understand	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
The information is trustworthy	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
You learned new information	0	0	\bigcirc	\bigcirc	0
Dago Prook					

Page Break —

End of Block: Surprise Billing

Start of Block: Messaging



Q14 Where would you prefer to hear/see messages about the U.S. Department of Labor, Employee Benefits Security Administration? (Select all that apply)

	Digital/online ads (social media, online searches, websites, etc.)
	Billboards
	Radio ads
	Television
transporta	Ads at different locations (grocery stores, gyms, gas stations, public ation)
	Word of mouth/friends
	Other (specify)
	Oon't know/Unsure
	None of these
Page Break	



Q15 On what digital sources would you prefer to see ads about the U.S. Department of Labor, Employee Benefits Security Administration? *(Select all that apply)*

Facebook
Gather
Instagram
Twitter
Snapchat
TikTok
Reddit
Google search
YouTube
A website
Other (specify)
Oon't know/Unsure
None of these

Page Break —

End of Block: Messaging

Start of Block: Demographics

Page Break

Q16 **About You:** These questions help us combine your responses with others like you.

Were you born in the United States? (Select one)

◯ Yes		
◯ No		
◯ I prefer not to	answer	
Page Break		

Q17 What is the combined income of all members of your household for the past 12 months (before taxes and from all sources)? *(Select one)*

- Less than \$10,000
- \$10,000 to under \$25,000
- \$25,000 to under \$50,000
- \$50,000 to under \$75,000
- \$75,000 to under \$100,000
- \$100,000 to under \$150,000
- \$150,000 to under \$200,000
- \$200,000 or more
- O I prefer not to answer

Page Break —

Q18 Are you of Spanish, Hispanic, or Latino origin? (Select one)

◯ Yes
○ No
◯ I prefer not to answer
Page Break

X→

Q19 What race best describes you? (Select all that apply)

	American Indian or Alaska Native					
	Asian/Pacific Islander					
	Black/African American					
	White/Caucasian					
	Other (specify)					
	SI prefer not to answer					
Page Break						

 $X \rightarrow$

Q20 What is the highest level of school you completed? (Select one)

- \bigcirc No high school diploma or GED
- O High school diploma or GED
- Some college, no degree
- O College degree, or vocational training degree or certificate (2-year program)
- O College degree (4-year program)
- O Master's/Graduate degree or higher
- \bigcirc I prefer not to answer

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Page Break -

Q21 What was your gender at birth?

\bigcirc Male															
◯ Fema	le														
◯ Prefe	r not to a	nswer													
Page Break												 	 	 	

Q22 How do you describe your gender identity? (Select the best fit)

- O Woman, female, or feminine
- \bigcirc Man, male, or masculine
- O Transgender woman, female, or feminine
- O Transgender man, male, or masculine
- O Nonbinary, gender queer, or gender fluid
- Not listed here/I prefer to self-describe: (specify)

O I prefer not to answer

Page Break -

Q23 What is your marital status?

Currently married
 Other
 Page Break

Q24 Including yourself, how many individuals 18 to 67 are in this household?

○ One			
○ Тwo			
O Four or more			
Page Break			

Q25 Would you say that in general your health is:

	O Excellent 1
	○ Very good 2
	O Good 3
	O Fair 4
	O Poor 5
Pag	ge Break

Q26 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)
	SI prefer not to answer
Page Break	

				_	
007 Do	vouidantifu	with only	of the following	a ototomonto?	(Salaat all that apply)
QZI DU		with any		a statements ((Select all that apply)
	j j	·····			

	l wear gl	lasses.	
	l have di	ifficulty seeing small words or shapes.	
	l have di	ifficulty seeing certain colors. (Please	specify.)
	l have a	vision impairment. (Please specify.)	
	◯	efer not to answer.	
	Non	e of the above	
Page	Break		

Q28 Do you have job-based health insurance or a job-based retirement plan? (Select one)

◯ Yes						
◯ No						
🔘 l don't	know					
Page Break						

Display This Question:	
If Do you have job-based health insurance or a job-based retirement plan? (Select one) = No	
Or Do you have job-based health insurance or a job-based retirement plan? (Select one) = I don't	
know	ļ

Q29 Do you receive benefits from a family member who has job-based health insurance or a job-based retirement plan? *(Select one)*

◯ Yes				
◯ No				
Page Break	 	 	 	

Q30 Does the company/organization you work for (or the insured family member works for) have more than 100 employees? (*Select one*)

◯ Yes										
◯ No										
🔿 I don	't know									
Page Break										

Q31 Do you have coverage through any of these programs: Medicare, Medicaid, Indian Health Services, Veterans Affairs Health Care, or TRICARE? *(Select one)*

◯ Yes												
◯ No												
🔿 I don	't know											
		 	-									
Page Break								 	 		 	-

What do you do when you run into a website in a language you don't know? (Select all that apply)

- I use Google translate
- I use translation settings on my browser like Chrome, Safari, etc.
- I search for the language change on the website (i.e., translation options on the site)
- I avoid websites in languages that I don't know
- Other, please specify