

Recruitment Script – Study 2

Form Approved
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INTRODUCTION SCREEN. Hello, may I please speak with [NAME]? This is [RECRUITER NAME] calling on behalf of Westat about the special MEPS study.

Thank you for your ongoing participation in MEPS and for expressing interest in this special study. Let me remind you about what is involved in the study.

We will be asking you to participate in a two-part study: the first part is a Zoom interview that will take about 30 minutes. As a token of appreciation for your time, we will email you a \$25 electronic gift card after the interview. In that interview, the interviewer will ask you to respond to a short web survey and will ask you to share your feedback. All of the information you provide will be kept confidential

The second part is a focus group with other MEPS respondents and will last about 90 minutes. We will provide you with a \$75 electronic gift card after the focus group as a token of appreciation for your time. In that group discussion, participants will be asked about their experiences participating in MEPS and any ideas they have for how to improve MEPS.

This survey is authorized under 42 U.S.C. 299a. The confidentiality of your responses to this survey is protected by Sections 944(c) and 308(d) of the Public Health Service Act [42 U.S.C. 299c-3(c) and 42 U.S.C. 242m(d)]. Information that could identify you will not be disclosed unless you have consented to that disclosure. Your participation is voluntary and all of your answers will be kept confidential to the extent permitted by law. Public reporting burden for this collection of information is estimated to average 5 minutes per response, the estimated time required to complete the survey. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-0124) AHRQ, 540 Gaither Road, Room # 5036, Rockville, MD 20850.

INTEREST IN CURRENT STUDY

1. Are you interested in helping us with this study?
 - Yes
 - No **[THANK AND END CALL]**

ZOOM AND DEVICES

2. Great! I just want to confirm, do you have access to a computer (laptop or desktop) or mobile device (smartphone or tablet) with a webcam and audio that you can use to participate in the Zoom interviews?
 - Yes
 - No **[GO TO INELIGIBLE STATEMENT]**
 - Don't know **[GO TO INELIGIBLE STATEMENT]**
 - Refuse **[GO TO INELIGIBLE STATEMENT]**

INELIGIBLE STATEMENT.

Thank you very much for your interest and your time, but you are not eligible for this study.

3. Have you ever used Zoom before?
 - Yes **[GO TO #5]**
 - No
 - Don't know
 - Refuse
4. Are you willing to use Zoom for the current study?
 - Yes
 - No **[GO TO INELIGIBLE STATEMENT]**
 - Don't know **[GO TO INELIGIBLE STATEMENT]**
 - Refuse **[GO TO INELIGIBLE STATEMENT]**
5. Great! We would like to audio and video record the Zoom interviews. Is that ok with you?
 - Yes
 - No

SET UP DATE AND TIME

6. Great, let's set up a time and date for the first part of the study, which is the 30-minute Zoom interview.

Date _____
Time _____ Local time Zone (PT/MT/CT/ET) _____

CONTACT INFORMATION

I'd like to confirm your contact information. [\[REVIEW INFORMATION IN RECORD\]](#)

Name _____
Email _____
Phone _____

ENDING STATEMENT

Thanks for providing this information. I will send you a confirmation email with more information about the study and the link to log onto the Zoom session. After you've completed the first part of the study, we will coordinate the time for the 2nd part, which is the group discussion. Do you have any questions for me?