

Medical Expenditure Panel Survey
Insurance Component

2021 HEALTH INSURANCE COST STUDY Government Questionnaire



U.S. DEPARTMENT OF COMMERCE
U.S. CENSUS BUREAU
ACTING AS COLLECTING AGENT FOR
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGENCY FOR HEALTHCARE RESEARCH AND QUALITY

TO COMPLETE THIS SURVEY ONLINE

Visit: <https://portal.census.gov>

Authentication Code:

If completing paper form, please RETURN TO:

U.S. Census Bureau
1201 East 10th Street
Jeffersonville, IN 47132-0001 OR Fax to 1-800-447-4613

PLEASE RETURN ENTIRE CONTENTS OF THIS PACKAGE WITHIN

PLEASE DO NOT REMOVE THIS COVER SHEET

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INSTRUCTIONS

1. Please report for the government unit identified on the cover sheet, unless otherwise specified.
2. Please report data for the year **2021**.
3. Estimates are acceptable.
4. For an explanation of unfamiliar terms, refer to the MEPS-20(D) Health Insurance Cost Study definition sheet included with this package.
5. Unless otherwise specified, respond for ACTIVE employees.
6. Please retain a completed copy of this form for your records.
7. For assistance completing this survey, please log-in to your Census Bureau account at <https://portal.census.gov> and send us a secure message **OR** call the customer help line at 1-888-273-3878, Monday through Friday, 8:30 a.m. to 5:00 p.m. Eastern Time.

We are conducting this study under the authority of Section 913 of the Public Health Service Act (Title 42, United States Code (U.S.C.), Section 299b-2). Sections 924c and 308d of that Act (42 U.S.C. Section 299c-3(c) and 42 U.S.C. Section 242m, respectively) ensure the confidentiality of your responses will be maintained. It may be seen only by individuals sworn to uphold U.S. Census Bureau confidentiality and may be used only for statistical purposes.

Paperwork Reduction Act and Burden Statements

We estimate this survey will take 45 minutes, on average, to complete, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you offered more than two plans, we estimate an extra 11 minutes per additional plan. You may send any comments regarding this burden estimate or any other aspect of the collection of information, including suggestions for reducing burden, to the following address: Director, Center for Financing, Access and Cost Trends, Paperwork Reduction Project 0935-0110, Agency for Healthcare Research and Quality, 5600 Fishers Lane, Mailstop 07W41A, Rockville, MD 20857. Please **do not** mail questionnaires to this address as it will delay data processing. If the enclosed mailing envelope has been misplaced, please send questionnaire to the address printed on the front page of this form.



NUMBER OF PLANS

Respond for **ACTIVE** employees only.

1 In 2021, did your government unit offer any health insurance plans to its **ACTIVE** employees?

001

1 Yes – Continue with **2**

2 No – **SKIP** to **3**

For this survey, a health insurance plan is defined as a plan where hospital and/or physician coverage is made available to employees.

2 During the 2021 plan year, how many different health insurance plan choices did your government unit offer to its **ACTIVE** employees?

003

Health insurance plan choices

Do not count single service plans (optional plans) such as dental or vision.

- Single, employee-plus-one, and family coverage providing the same level of benefits from the same insurance company count as ONE plan.
- High and standard options count as TWO plans.
- An HMO and a PPO from the same insurance company count as TWO plans.

PRIOR YEAR

3 In 2020, did your government unit offer any health insurance plans to its **ACTIVE** employees?

760

1 Yes – Offered

2 No – Not offered

3 Don't know

4 In 2020, did your government unit have a net change in the number of active employees in response to the Coronavirus pandemic or related economic conditions?

798

1 Yes, net increase

2 Yes, net decrease

3 No net change in number of active employees

4 Don't know

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Continue with **5a**

EMPLOYMENT CHARACTERISTICS

Estimates are acceptable for all employment, eligibility, and enrollment figures.

For Questions 5a through 10b, if the answer is **NONE**, please enter "0".

Include:

- Employees on the payroll for your government unit, including those who work off-site
- Full-time and part-time employees
- Temporary and seasonal employees

Exclude:

- Former employees
- Leased or contract workers
- Retirees

5 a. In 2021, how many employees were on your government unit's payroll for a typical pay period?

740

All employees

782

No employees - **SKIP to Page 10** to complete form.

If your government unit did not offer health insurance in 2021, **SKIP to 6a**.

b. How many of these employees were ELIGIBLE for at least one health plan through your government unit?

201

Eligible employees

c. How many of these employees were ENROLLED in any health plan through your government unit?

202

Enrolled employees

6 a. For the same TYPICAL pay period, how many employees reported in Question 5a worked part-time?

759

Part-time employees

If your government unit did not offer health insurance in 2021, **SKIP to 7**.

b. How many of these part-time employees were ELIGIBLE for at least one health plan through your government unit?

204

Eligible part-time employees

c. How many of these part-time employees were ENROLLED in any health plan through your government unit?

205

Enrolled part-time employees

7 How many of the employees reported in Question 5a worked fewer than 30 hours per week?

742

Employees worked fewer than 30 hours

743

No employees worked fewer than 30 hours.

If your government unit did not offer health insurance in 2021, **SKIP to 9a**.

8 What was the minimum number of hours per week that an employee had to work in order to be eligible for health insurance?

626

Minimum hours worked per week to be eligible

721

No minimum number of hours required.

EMPLOYMENT CHARACTERISTICS - Continued

Provide information for a TYPICAL pay period in 2021.
Estimates are acceptable.

9 a. Approximately what percentage of the employees at this government unit were union members?

018

 %

Union members

729

No union members

b. Approximately what percentage of the employees at this government unit were women?

016

 %

Women employees

c. Approximately what percentage of the employees at this government unit were 50 years old or older?

017

 %

Employees 50 years old or older

d. For the employees at this government unit, approximately what percentage earned:

Less than \$13.50 per hour?

022

Approximately \$28,080 a year or less.

 %

Earned less than \$13.50 per hour

Between \$13.50 and \$32.00 per hour?

023

Approximately \$28,080 to \$66,560 a year.

 %

Earned between \$13.50 and \$32.00 per hour

More than \$32.00 per hour?

024

Approximately \$66,560 a year or more.

 %

Earned more than \$32.00 per hour

1 0 0 %

e. For the employees at this government unit, how many earned more than \$50.50 per hour?

726

Approximately \$105,040 a year or more

Number of employees that earned more than \$50.50 per hour

10 a. For the employees at this government unit, what percentage are able to do their jobs by teleworking if necessary?

797

 %

Employees able to do their jobs by teleworking

Necessary - Due to pandemic, inclement weather or other circumstances that make it difficult or inadvisable to work in the office.

Estimates are acceptable. Include all position types.

b. For the employees at this government unit, what percentage telework on a regular basis?

796

For example, once a week, once a pay period, monthly, etc.

Estimates are acceptable. Include all position types.

 %

Teleworking employees

29181054



Continue with **11**

FRINGE BENEFITS CHARACTERISTICS

11 Did your government unit offer the following fringe benefits to its employees?

If Paid Time Off (PTO) is offered, mark (X) Yes for paid vacation AND paid sick leave.

	Yes (1)	No (2)	Don't know (3)
050 Paid vacation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
051 Paid sick leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
052 Life insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
053 Disability insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
795 Critical illness insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
054 Retirement/pension plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Critical illness insurance is a special form of insurance that pays the policyholder a lump-sum, tax-free payment if they suffer from serious illnesses, including but not limited to cancer, heart attack, kidney failure and stroke.

TAX-ADVANTAGED BENEFITS

12 Did your government unit offer any of these tax-advantaged benefits to its employees?

See the definition sheet MEPS-20(D) included with this package for an explanation of these benefits.

	Yes (1)	No (2)	Don't know (3)
627 Employee contributions to health insurance made on a pre-tax basis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
056 Flexible Spending Accounts (FSA) for healthcare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
057 Flexible Benefits Plans Full cafeteria plans that offer employees a set of benefits from which to choose.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If your government unit offered health insurance, continue with 13.
If your government unit DID NOT offer health insurance, SKIP to 19.

HEALTH INSURANCE EXCHANGES AND INSURANCE BROKERS

13 Did your government unit offer health insurance to active employees through a private exchange (also known as a corporate exchange)?

A private exchange is created by a consulting company, insurance carrier, or other private organization and not by either a federal or state government. Private exchanges often allow employees to choose from several health insurance options offered on the exchange.

- 765
- 1 Yes
 - 2 No
 - 3 Don't know

If your government unit has more than 100 employees at all locations, SKIP to 15a. Otherwise, continue with 14.

14 Did your government unit use a third party, such as an insurance broker or agent, to help purchase the insurance plan(s)?

- 770
- 1 Yes
 - 2 No
 - 3 Don't know

Continue with 15a

29181062



GENERAL HEALTH COVERAGE CHARACTERISTICS

15 a. Did your government unit offer any of the listed optional coverage services at a premium SEPARATE from the comprehensive health plan to its active employees?

		Yes (1)	No (2)	Don't know (3)
192	Dental	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
193	Vision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
194	Prescription drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
195	Long-term care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
562	<input type="checkbox"/> No optional coverage – SKIP to 16			

*Report single service insurance plans only.
Do not include single services covered under a comprehensive health plan.
Long-term care insurance helps to cover the cost of institutional and home care required by the chronically ill or disabled.*

b. What was the total amount paid for optional coverage for all active employees during a TYPICAL MONTH?

720 Monthly total optional coverage cost

Include both government unit and employee contributions.

16 Did your government unit impose a waiting period before new employees could be covered by health insurance?

197

1 Yes

2 No

3 Don't know

17 Were employees' SPOUSES eligible for health insurance coverage through your government unit?

745

5 All spouses eligible, **HIGHER** employee contribution paid if spouse eligible through own employer.

6 All spouses eligible, **SAME** employee contribution.

7 All spouses eligible, don't know employee contribution.

2 Limited spouses eligible, only if not offered by own employer.

3 No spouses eligible.

4 Don't know

18 Did your government unit offer health insurance coverage to UNMARRIED domestic partners?

		Yes (1)	No (2)	Don't know (3)
730	Same sex domestic partners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
731	Opposite sex domestic partners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Continue with 19

RETIREE HEALTH COVERAGE CHARACTERISTICS

For Questions 20 through 21g, if the answer is **NONE**, please enter "0".

Exclude any retirees that have coverage through COBRA or state continuation-of-benefits laws. See the definition sheet MEPS-20(D) included with this package for an explanation of these terms.

19 Did your government unit or some other government unit provide health insurance coverage to any person who retired in 2021 OR BEFORE, or to any of their survivors?

If COBRA was the only coverage offered mark "No".

- 551 1 Yes – This government unit - Continue with **20**
- 4 Yes – Another government unit ↘

672

Name of other government unit

Continue with 20 if information is available. Otherwise, SKIP to Page 10 to complete form.

- 551 2 No
- 3 Don't know

SKIP to Page 10 to complete form.

20 In a typical month, how many retirees were enrolled in health insurance through your government unit?

513

Number of retirees enrolled

29181088



Continue with **21a**

RETIREE HEALTH COVERAGE CHARACTERISTICS – Continued

NEW RETIREES

For Questions 22a through 22c, NEW RETIREES refers only to persons who retired from your government unit in 2021. Exclude any retirees that have coverage through COBRA or state continuation-of-benefits laws.

22 a. Did your government unit offer health insurance to any NEW RETIREES?

- 630
- 1 Yes – Continue with **22b**
 - 2 No
 - 3 Don't know

SKIP to the bottom of this page to complete form.

b. Were NEW RETIREES under 65 years of age eligible for health insurance?

- 631
- 1 Yes
 - 2 No
 - 3 Don't know

c. Were NEW RETIREES age 65 or older eligible for health insurance?

- 632
- 1 Yes
 - 2 No
 - 3 Don't know

500 Remarks

PERSON COMPLETING THIS QUESTIONNAIRE

212 Name (Please print)

213 Title (Please print)

215 Area code Number 220 Extension
 - -

214 MM DD YYYY

217 Email

***** PLEASE NOTE *****

If your government unit offered health insurance, please complete the attached MEPS-11(S), Plan Information Questionnaire, for all plans offered. If your government unit DID NOT offer health insurance, you have completed the survey.

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS

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