

Answer Questions 1 through 15 for each plan offered. Begin with the plan having the largest enrollment and proceed through to the plan with the smallest enrollment of ACTIVE employees. Use single column for each plan. Report for a **typical pay period** in 2021.

100 **FOR CENSUS USE ONLY**

012 Name of plan

1 a. TOTAL active employees enrolled in plan

125 □ □ □ □ □ □ Total

125  Total

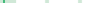
129  Single

129  Single

Include enrollment for both employee-plus-spouse and employee-plus-child coverage.

571  Employee-plus-one

571  Employee-plus-one

705  Family

705 □ □ □ □ □ □ Family

126  Former COBRA

126  Former COBRA

3 a. Single Coverage

552 2 ☐ Not offered - Skip to 4a

552 2 ☐ Not offered - Skip to **4a**

131 \$.00

131 \$.00

132 \$.00

132 \$.00

130 \$.00

130 \$.00

570 2 ☐ Not offered - Skip to 5a

570 2 ☐ Not offered - Skip to 5a

636 \$.00

636 \$.00

637 \$.00

637 \$.00

635 \$.00

635 \$.00



GENERAL PLAN INFORMATION - Continued					
	100	FOR CENSUS USE ONLY	100	FOR CENSUS USE ONLY	
	012	Name of plan	012	Name of plan	
2021 PREMIUMS - Continued					
5 a. Family Coverage <i>If premium varied by family size, report for a family of four</i>	137	2 ☐ Not offered - Skip to 6	137	2 ☐ Not offered - Skip to 6	
b. GOVERNMENT UNIT contribution for family premium	135	\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	135	\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	
c. EMPLOYEE contribution for family premium	136	\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	136	\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	
d. TOTAL family premium	134	\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	134	\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	
e. Did the TOTAL premium for family coverage vary depending on the number of family members covered by the plan?	752	1 ☐ Yes 2 ☐ No 3 ☐ Don't know	752	1 ☐ Yes 2 ☐ No 3 ☐ Don't know	
6 The amounts reported in the premium questions are based on which of the following time periods? Mark (X) only one.	133	1 ☐ Weekly 2 ☐ Every 2 weeks 3 ☐ Monthly 5 ☐ Quarterly 4 ☐ Yearly	133	1 ☐ Weekly 2 ☐ Every 2 weeks 3 ☐ Monthly 5 ☐ Quarterly 4 ☐ Yearly	
SELF-INSURED PLAN INFORMATION					
7 Was this plan purchased from an insurance underwriter, or was it self-insured? Purchased from an insurance underwriter - (Fully-insured) Coverage is purchased from an insurance company or other underwriter who assumes the risk for the enrollees' medical expenses. Self-insured - Your government unit assumes the risk for the enrollees' medical expenses and may charge a premium to employees. This plan may be administered by a third party and may employ supplemental stop-loss insurance to limit unanticipated losses.	105	1 ☐ Purchased - Skip to 9 2 ☐ Self-insured - Continue with 8a 3 ☐ Don't know - Skip to 9	105	1 ☐ Purchased - Skip to 9 2 ☐ Self-insured - Continue with 8a 3 ☐ Don't know - Skip to 9	

SELF-INSURED PLAN INFORMATION Continued

ACTUARIAL VALUE OR METAL LEVEL

PLAN INFORMATION

FORM **MEPS-11C(S)**

GENERAL PLAN INFORMATION – Continued

	100 FOR CENSUS USE ONLY	100 FOR CENSUS USE ONLY
012 Name of plan		012 Name of plan

HEALTH REIMBURSEMENT ARRANGEMENT (HRA)

14 Did your government unit contribute to a Health Reimbursement Arrangement (HRA) associated with this plan?

An employer can offer an HRA by setting up an account to reimburse employees for medical expenses not covered by health insurance.

HRAs are NOT Flexible Spending Accounts (FSAs) or Health Savings Accounts (HSAs). See definition sheet MEPS-20(D) for more information.

- 710
- 1 ☐ Yes, contributed to an HRA
- 2 ☐ No, did not contribute to an HRA
- 3 ☐ Don't know
- SKIP** to next plan or if there are no other plans, you are complete.

- 710
- 1 ☐ Yes, contributed to an HRA
- 2 ☐ No, did not contribute to an HRA
- 3 ☐ Don't know
- SKIP** to next plan or if there are no other plans, you are complete.

15 a. Up to what dollar amount did your government unit contribute ANNUALLY to a typical employee's HRA for single coverage for this plan?

This amount should NOT include the amount your government unit contributed toward the plan premium.

779

\$.00

Annual HRA contribution for single coverage

779

\$.00

Annual HRA contribution for single coverage

b. Up to what dollar amount did your government unit contribute ANNUALLY to a typical employee's HRA for employee-plus-one coverage for this plan?

This amount should NOT include the amount your government unit contributed toward the plan premium.

800

\$.00

Annual HRA contribution for employee-plus-one coverage

800

\$.00

Annual HRA contribution for employee-plus-one coverage

c. Up to what dollar amount did your government unit contribute ANNUALLY to a typical employee's HRA for family coverage for this plan?

This amount should NOT include the amount your government unit contributed toward the plan premium.

Report for a family of four.

780

\$.00

Annual HRA contribution for family coverage

780

\$.00

Annual HRA contribution for family coverage

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

Complete a MEPS-11C(S) column for each plan that was offered.

REMEMBER TO ENCLOSE A COPY OF THE SUMMARY OF BENEFITS AND COVERAGE OR THE BROCHURE WEBSITE ADDRESS WITH YOUR CONTACT INFORMATION ON THE MEPS-11C. PLEASE PROVIDE THE GENERAL USER INFORMATION IN THE REMARKS SECTION.

If you have any questions concerning this survey, please call 1-888-206-8023.