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

OMB No. 0935-0110: Approval Expires 01/31/2026

2023 Medical Expenditure Panel Survey - Insurance Component

HEALTH INSURANCE COST STUDY

Location Worksheet

Start here

A FEW IMPORTANT INSTRUCTIONS

- *In this section, please report for the small sample of locations chosen to represent your company.*
- *In Column (c), mark "Yes" if the location listed in Column (b) is included in the corporate figures reported on the MEPS-15. Mark "No" if the location is not included in the corporate figures reported on the MEPS-15. Mark "NA" if the location is closed or no longer owned.*
- *In Column (d), enter the number of employees at the location listed in Column (b) for a typical pay period in 2023. Estimates are acceptable.*
- *In Columns (e), (f), and (g), please check the types of provider arrangements offered at the location specified in Column (b).*

CENSUS USE ONLY Location Identification Number (a)	Name of location (b)	Have you included this location in your response on the MEPS-15? 524 (c)	Number of employee(s) 200 (d)	Types of provider arrangements offered *(Mark (X) all that apply)* Exclusive 521 (e)	Any 522 (f)	Mixture 523 (g)
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐

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CENSUS USE ONLY Location Identification Number (a)	Name of location (b)	Have you included this location in your response on the MEPS-15? 524 (c)	Number of employee(s) 200 (d)	Types of provider arrangements offered *(Mark (X) all that apply)* Exclusive 521 (e)	Any 522 (f)	Mixture 523 (g)
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐
		1 ☐ Yes 2 ☐ No 3 ☐ NA		☐	☐	☐

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