



CMS NEWS

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Departments Finalize New Version of the Summary of Benefits and Coverage *Helping Consumers Better Understand their Health Coverage*

Today, the Department of Health and Human Services (HHS), the Department of Labor (DOL) and the Department of the Treasury announced key enhancements to the Summary of Benefits and Coverage (SBC) template and Uniform Glossary. The improvements include an additional coverage example and language and terms to improve consumers' understanding of their health coverage.

Under the Affordable Care Act, issuers and health plans are required to provide a brief summary of what the plan covers and the cost sharing responsibility of the consumer, in order to help individuals make more informed choices among health plan options and better understand their coverage. Plans and issuers are also required to provide a comprehensive uniform glossary of commonly used health coverage and medical terms.

“Only when a consumer has a clear understanding of what their plan can do for them as well as what they are responsible for can they feel completely confident in their health plan choice,” says Marketplace CEO Kevin Counihan. “That is why we continue to improve upon the SBC requirements in order to provide that peace of mind to our consumers.”

The SBC includes coverage examples that demonstrate the cost sharing amounts an individual might be responsible for in three common medical situations. In addition to the current coverage examples that address diabetes care and childbirth, the updated template has a new coverage example that addresses coverage for a foot fracture so that a consumer understands what a plan covers in an emergency scenario.

Changes have also been made to the SBC to improve readability for consumers. The new templates include more information about cost sharing, such as enhanced language to explain deductibles and a requirement that plans address individual and overall out-of-pocket limits in the SBC. These improvements reflect input from consumer groups, the National Association of Insurance Commissioners, and other stakeholders. Health plans and issuers will use this final SBC template beginning on the first day of the first open enrollment period that begins on or after April 1, 2017.

The SBC is available for every Marketplace plan and most non-Marketplace plans.

Further information regarding the SBC and supporting materials can be found here: <https://www.cms.gov/cciio/Resources/Forms-Reports-and-Other-Resources/index.html#Summary%20of%20Benefits%20and%20Coverage%20and%20Uniform%20Glossary>