Summary of Benefits and Coverage and the Uniform Glossary Required Under the Affordable Care Act

OMB Number 1210-0147 December 2019

Justification for No material/Nonsubstantive Change

The Department is submitting a no material/non-substantive change request for the Summary of Benefits and Coverage and the Uniform Glossary Required Under the Affordable Care Act (OMB Control Number 1210-0147, which currently is scheduled to expire on May 31, 2022). As further discussed below, the Department is not making any program changes to the forms and instructions at this time.

The Department of Health and Human Services (HHS), the Department of Labor (DOL), and the Department of the Treasury, in consultation with the National Association of Insurance Commissioners (NAIC) and a working group comprised of stakeholders, developed standards for use by a group health plan and a health insurance issuer in compiling and providing to applicants, enrollees, policyholders, and certificate holders a summary of benefits and coverage (SBC) explanation that accurately describes the benefits and coverage under the applicable plan or coverage.

Document Filename	Change
SBC-Template- Standard-Form-11- 2019-v2 (DOCX)	"Skilled nursing center" to "Skilled nursing care"
SBC-Template- Accessible-Format- 11-2019-v2 (PDF)	"Skilled nursing center" to "Skilled nursing care"
Sample-Completed- SBC-Standard- Format-11-2019-v2 (DOCX)	"Skilled nursing center" to "Skilled nursing care"
Sample-Completed- SBC-Accessible- Format-11-2019-v2 (PDF)	"Skilled nursing center" to "Skilled nursing care"
AIAN Limited Cost Sharing-11-2019-v2 (PDF)	"Skilled nursing center" to "Skilled nursing care"
AIAN-Zero-Cost- Sharing-11-2019-v2 (PDF)	"Skilled nursing center" to "Skilled nursing care"
• Uniform Glossary-11- 2019-v2 (PDF)	 Corrected a spelling error to the term "non-participating" in the definition for Out-of-network Provider (Non-Preferred Provider) Corrected a couple minor formatting errors: The second and third bullets at the top of the first page rendered incorrectly (as boxes instead of bullets), so we changed the boxes back to bullets. A line of text was hidden in the "Out-of-pocket Limit" definition at the top of pg. 4. We fixed this so that the hidden text now appears and says: "After you meet this

The Departments are making the following edits and corrections to the forms:

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	limit the plan will usually pay 100% of the allowed amount."

The Department notes that this change will affect approximately 2.3 million health plans and 72.8 million policy holders who would receive the SBCs. This change is non-material and will not affect the hour or cost burden associated with the annual information collection.