

To: XXXXX
Office of Information and Regulatory Affairs (OIRA)
Office of Management and Budget (OMB)

From: Leslie Wagstaffe
Consumer Support Group (CSG)
Center for Consumer Information and Insurance Oversight (CCIIO)
Centers for Medicare and Medicaid Services (CMS)

Date: February XX, 2025

Subject: Non-Substantive Change Request – Summary of Benefits and Coverage and Uniform Glossary (CMS-10407/OMB control number 0938-1146)

This memo requests approval of a non-substantive change to the approved information collection under Summary of Benefits and Coverage and Uniform Glossary (CMS-10407/OMB control number 0938-1146).

BACKGROUND

Sections 2715 and 2719 of the Public Health Service (PHS) Act require group health plans and health insurance issuers offering group or individual health insurance coverage (plans and issuers) to provide the summary of benefits and coverage (SBC) and internal claims and appeals and external review notices, in a culturally and linguistically appropriate manner. To meet this requirement, regulations implementing sections 2715 and 2719 of the PHS Act specify that plans and issuers must provide the following in any applicable non-English language: (1) oral language services; (2) translated notices and SBCs upon request; and (3) taglines on notices and SBCs indicating how to access the language services provided by the plan or issuer.¹ These regulations specify that a non-English language is an applicable non-English language, with respect to an address in any United States county to which a notice is sent, if ten percent or more of the population residing in the county is literate only in the same non-English language, as determined in guidance published by the Secretary of Health and Human Services.

In January 2016, the Departments of Labor, Health and Human Services, and the Treasury (the Departments) published guidance² identifying Spanish, Chinese, Tagalog, and Navajo as applicable non-English languages that meet the ten percent threshold in a U.S. county.³ In

¹ 26 CFR 54.9815-2715(a)(5), 29 CFR 2590.715-2715(a)(5), and 45 CFR 147.200(a)(5); 26 CFR 54.9815-2719(e), 29 CFR 2590.715-2719(e), and 45 CFR 147.136(e).

² CLAS County Data (January 2016), available at <https://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/Downloads/CLAS-County-Data-Jan-2016-update-FINAL.pdf>.

³ See FAQs about Affordable Care Act and Consolidated Appropriations Act, 2021 Implementation Part 63 (November 28, 2023), available at <https://www.cms.gov/files/document/faqs-part-63.pdf>.

November 2023, the Departments published updated this guidance⁴ and identified four additional applicable non-English languages (Pennsylvania Dutch, Samoan, Carolinian, and Chamorro) that meet the ten percent threshold based on recent U.S. Census data.⁵

To help plans and issuers meet this requirement, CMS previously included instruments translated into each of these languages (Spanish, Chinese, Tagalog, Navajo, Pennsylvania Dutch, Samoan, Carolinian, and Chamorro). For consumer-facing instruments, CMS also included taglines in each of these languages in the SBC PRA package (CMS-10407). This guidance is applicable beginning with plan years (in the individual market, policy years) beginning on or after January 1, 2025.⁶

OVERVIEW OF REQUESTED CHANGES

To include translated public-facing SBC instruments and incorporate taglines in the four additional languages (Pennsylvania Dutch, Samoan, Carolinian, and Chamorro) identified in the updated CLAS guidance,⁷ CMS made a non-substantive change to the SBC PRA package (CMS-10407), which was approved by OMB on January 3, 2025.

However, CMS identified formatting issues in the following public-facing SBC documents (both Word and PDF) that do not align with the SBC Instruction Guide for Group⁸ and Individual⁹ Health Coverage. To address this, CMS is requesting to replace the previously submitted documents with the corrected versions:

- English Sample Completed SBC
- English AIAN Limited Cost Sharing SBC
- English AIAN Zero Cost Sharing SBC
- Chinese Standard SBC Template
- Chamorro Standard SBC Template
- Navajo Standard SBC Template

Since this request only involves replacing incorrectly formatted SBC documents with the correct versions, it does not impact any burden descriptions or estimates in the SBC PRA package.

⁴ County Data for Culturally and Linguistically Appropriate Services (CLAS County Data), November 2023, available at <https://www.cms.gov/files/document/clas-county-data-2023.pdf>.

⁵ See FAQs about Affordable Care Act and Consolidated Appropriations Act, 2021 Implementation Part 63 (November 28, 2023), available at <https://www.cms.gov/files/document/faqs-part-63.pdf>.

⁶ County Data for Culturally and Linguistically Appropriate Services (CLAS County Data), November 2023, available at <https://www.cms.gov/files/document/clas-county-data-2023.pdf>

⁷ County Data for Culturally and Linguistically Appropriate Services (CLAS County Data), November 2023, available at <https://www.cms.gov/files/document/clas-county-data-2023.pdf>

⁸ Summary of Benefits and Coverage: Instruction Guide for Group Health Insurance Coverage, available at <https://www.cms.gov/files/document/group-instructions-060723.pdf>.

⁹ Summary of Benefits and Coverage: Instruction Guide for Individual Health Insurance Coverage, available at <https://www.cms.gov/files/document/individual-instructions-060723.pdf>

We believe this non-substantive change will help ensure that plans and issuers comply with SBC formatting guidelines, promote consistency across all public-facing SBC documents, and support standardization of SBC materials.

Time Sensitivities

Plans and issuers must begin providing revised SBC notices for plan years (in the individual market, policy years) beginning on or after January 1, 2025. Therefore, we request that OMB approve this change as soon as possible to allow plans and issuers to implement the standardized SBC documents across all translated materials.