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Summary of Benefits and Coverage and Uniform Glossary

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One of the requirements from PPACA is a new Summary of Benefits and Coverage and a Uniform Glossary of commonly used terms such as deductible and copay. HHS was required to provide guidance and a template for compliance, and has done so as of August 18, 2011.

Both the Summary and the Glossary must be provided by health insurance issuers and group health plans beginning on March 23, 2012 upon request by a member (within 7 days), 30 days prior to a renewal, and 60 days prior to a renewal if there are “significant” changes to the coverage.

Who will ultimately prepare and provide this information will probably vary from carrier-to-carrier, and TPA-to-TPA. We recommend contacting your insurance carrier, TPA, or insurance broker or consultant to discuss your individual plans. Regardless of who ultimately prepares and distributes the Summary and Glossary, HHS has provided a template for compliance. The template can be found [here](#).

We anticipate additional regulatory and implementation guidance on the Summary of Benefits Coverage and Uniform Glossary of Terms, but employers should be aware of the requirement and make plans for compliance. For further information on this new requirement, see the related article on [Gary Kushner's Benefits Blog](#).

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