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## Health Care Reform Act Delayed Effective Date for Summary of Benefits and Coverage

The U.S. Departments of Labor, Health and Human Services, and the Treasury (the “Departments”) previously issued proposed regulations that would have required group health plans to provide a Summary of Benefits and Coverage (SBC) beginning March 23, 2012. However, to give plan sponsors sufficient time to comply with the SBC content requirements, the Departments recently delayed the timeframe for providing the SBC until final regulations are issued.

**Summary of Benefits and Coverage in General.** The SBC is a new disclosure obligation under the Health Care Reform Act for all group health plans, other than excepted benefits like separately offered dental and vision benefits. It is a four page document that describes the group health plan benefits and coverage in twelve point or larger font. It is intended to help individuals compare health coverage options when enrolling in a group health plan.

For additional details of the current requirements of the SBC, click the following link to review an *HR Benefits Authority* explaining the SBC requirements under the proposed regulations:

<http://www.mcbenefitslaw.com/newsletters/2011/Newsletter-091911.pdf>

**Next Steps.** The final regulations and templates will likely differ from the proposed regulations and templates. In light of these expected changes, and the delayed effective date, it is a good idea for group health plans to wait until the final regulations are issued before completing the SBC.

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