

Quick Facts about SBCs

What is an SBC?

A Summary of Benefits and Coverage (SBC) is a document that helps members understand their benefits and coverage by using simple language and a consistent format. The Affordable Care Act requires that all members receive an SBC.

When are SBCs required to be provided to members?

The final regulations require that the SBC be provided in several instances:

- During the plan's open enrollment period or whenever open enrollment materials are distributed by the district.
- New hires or newly eligible employees.
- By the first day of coverage if there are any changes to the SBC that was provided upon application.
- Upon request, as soon as practicable, but no later than seven business days following receipt of the request.

Can SBCs be provided electronically?

An SBC may be provided electronically if:

- The format is readily accessible (such as in an html, MS Word, or pdf format);
- The SBC is provided in paper form free of charge upon request; and
- If the SBC is provided via an Internet posting, the district timely advises the members that the SBC is available on the Internet and provides the Internet address. The district may make this disclosure by email.

Are there any plans not required to have an SBC?

- Individual retiree plans.
- Standalone dental and vision plans
- Medicare products i.e. Kaiser Senior Advantage, Companion Care

For more detailed information regarding SBCs please refer to the following link: www.dol.gov, Depending on your internet browser, you may have to continue to the home page. In the search option type "SBC" for more information.