February ?, 2015

Office of Health Plan Standards and Compliance Assistance
Employee Benefits Security Administration
Room N-5653
U.S. Department of Labor
200 Constitution Avenue N.W.
Washington, DC 20210

Attention: Summary of Benefits and Coverage

To Whom it May Concern:

Thank you for the opportunity to comment on the proposed regulations on the Summary of Benefits and Coverage (SBC) and Uniform Glossary (79 Fed. Reg. 249, 78578 (Dec. 30, 2014), which includes a new set of proposed SBC templates, instructions, and an updated uniform glossary. We write as the chief insurance regulators of our respective states and members of the National Association of Insurance Commissioners (NAIC).

As you know, pursuant to the Patient Protection and Affordable Care Act (ACA), the NAIC was instrumental in the development of the original SBC and Uniform Glossary. The NAIC convened a subgroup consisting of state regulators, as well as, “representatives of health insurance-related consumer advocacy organizations, health insurance issuers, health care professionals, patient advocates including those representing individuals with limited English proficiency, and other qualified individuals,” as required by Section 2715 of the Public Health Service Act. The NAIC utilized a uniquely collaborative, open and thoughtful process, whereby varying viewpoints were heard and discussed. The final product was something that reflected the input of a diverse group of all stakeholders. Unfortunately, this proposed rule and revisions to the SBC templates, instructions and glossary were not developed with this input, and the final product, in our opinion, has suffered as a result.

In developing these comments, the NAIC reached out to the subgroup members and other interested parties in order to gather input from those who have been interacting with the SBC form and receiving feedback from consumers using the SBC. It is this “real world” feedback that needs to be gathered, debated and discussed before a determination can be made about revisions to the SBC and glossary. To this end, it is our strongest recommendation that all revisions to the SBC and uniform glossary utilize the NAIC subgroup and process that provided recommendations for the original SBC. To reiterate what we said in our December 2010 letter to the Secretaries of DOL and HHS, “we believe the [NAIC subgroup] is uniquely qualified to consider and facilitate future changes to the summary of benefits and coverage, as well as to the instructions. We propose that [the NAIC subgroup] be utilized to monitor issues identified by consumers, carriers, and employer health plans, as these documents are implemented. Further, we recommend that upon review and discussion of these issues, the [NAIC subgroup] may propose needed modifications or clarifications to the documents for your consideration.”

As a threshold matter, we are concerned with the proposed timeframe for implementation in the proposed rule. A 2016 implementation deadline for a revised SBC simply does not provide insurers or state regulators with enough time. Seemingly modest revisions require systemic changes to input the data into a new format, and time needs to be allowed for review by state insurance departments for plans both inside and outside the Exchange. Given the scope and breadth of the comments that we received highlighting areas where the information in the SBC could be improved, the Secretaries should take this opportunity to postpone implementation until 2018 and call on the NAIC to reconvene the subgroup to consider revisions to the SBC and glossary. Making interim changes at this point absent a more comprehensive review of the SBC would result in a product which will not benefit consumers and may, in fact, provide less meaningful information for consumers.

Pursuant to §1001 of the Patient Protection and Affordable Care Act (ACA) (adding § 2715 to the Public Health Service Act) the NAIC convened a working group comprised of state regulators and a diverse group of stakeholders to develop a summary of benefits and coverage document and uniform glossary. This working group met in open conference calls and in-person meetings that were open to the public to develop the original summary of benefits and coverage templates, instructions and uniform glossary. See www.naic.org/committees_b_consumer_information.htm.
In addition to the overarching concern about timing, we would like to direct your attention to the NAIC website where we have posted the comments that were submitted to the NAIC for us to consider including in our comment letter on the proposed rule. (See www.naic.org/committees_b_consumer_information.htm) The comments we received generally fall into three categories: practical challenges and issues with the proposed rule, data deficiencies—both in existing SBC and the revised version—and additional information to include in a revised SBC. After discussing the proposed changes on an open conference call and reviewing all of these comments, we quickly concluded that additional discussion is essential. We trust you will reach this same conclusion and remain at your service to facilitate a thorough review of the SBC and uniform glossary to come up with revisions that reflect the experiences interested parties have had to date with the SBC, are practical, and provide essential information to consumers.

In addition to revising the SBC form and uniform glossary for the 2018 plan year, there are improvements that could be achieved for consumers relative to the SBC and uniform glossary before then. Consumer education efforts and overview of the SBCs to ensure they are accurately filled out will go a long way. Additionally, clarifications and updates to the information that populates the SBC could be achieved through improved instructions. The NAIC subgroup would be willing to commit to developing suggestions for improvements to the instructions within a shorter timeframe than can be achieved for a full scale revision of the SBC form and glossary.

We look forward to hearing from you.

Sincerely,