The Affordable Care Act:
Summary of Benefits and Coverage

Under the Affordable Care Act, all health insurers and group health plans are required to provide consumers with a Summary of Benefits and Coverage (SBC). The SBC is a description of the benefits and health coverage offered by a particular plan.

Accordingly, as outlined in the attached Summary of Benefits and Coverage Notice to Policyholder, beginning on the first day of the open enrollment period for the Policy Renewal Date, Blue Cross and Blue Shield of Texas will provide the SBC to employer groups so that they are able to promptly distribute the SBC to participants and beneficiaries.

Brokers and Group Administrators can use the SBC Tool to search, download and email Standard Plan SBCs. Please see the back of this card for instructions.

Follow these steps to create a Summary of Benefits and Coverage (SBC):

1. Access the Standard Plan SBC Tool at:

   https://ben-sum-mgr.rrd.com//secure/login/?custName=HCSC

   a. Alternatively, this link can also be found in Blue Access for Employers℠ (BAE) or Blue Access for Producers℠ (BAP).

   - For BAE, click the **Account Summary** link on the left to expand. Afterward, select **Health Plans**, click **Display**, and select the **View Standard Plan SBC Tool** link.

     *Please note that this will still require logging in to the Tool.

   - For BAP, click **Products & Forms** on the left, click on the **Summary of Benefits and Coverage** link on the right, and then select the **View Standard Plan SBC Tool** link.

     *Please note that this will still require logging in to the Tool.

2. Log in to the Standard Plan SBC Tool with the following credentials:

   - Customer Name   =   HCSC
   - Username   =   HCSCgenID
   - Password   =   BlueSBC2017!

3. Upon log in, select the desired **Document Type** from the following options:

   - **Group – Group 2016-2017 Q1**

     – For any Group Open Enrollment **prior to** April 1, 2017

   - **Group – Group 2017 New**

     – For any Group Open Enrollment **on, or after,** April 1, 2017

     *Due to government mandates, any Group Open Enrollment that is on, or after, April 1, 2017 **must** utilize the new SBC template.

4. Follow these steps to find and customize a SBC:

   a. Select the appropriate **Plan Year** and **Corporate Entity** (both fields are required). Click the **Search** button to display available SBCs.

   b. To narrow search results, you can enter values in **Product Type, Plan ID, Plan Name** and/or **Language** fields.

   c. Select a SBC by clicking on its **Product Type** and click the **Next Step** button (below the **Product Type** column).

   d. Enter **Coverage Effective Date & Coverage Ending Date** using the following formats:

   - English: MM/DD/YYYY
   - Spanish: DD/MM/YYYY

   e. Click **Coverage For** and select appropriate value.

   f. Click **Generate Summary**.

   g. Proof your SBC.

   - If changes are required, click **Edit**. You will return to **Customize SBC** screen.

   - If changes are not required, click **Generate Final Copy**.

   h. For the final SBC, there are two options for distribution:

   - For a single recipient, the customized SBC can be emailed from the system. If applicable, remember to change the default email to the intended recipient's email and click **Send**.

   - For multiple recipients, the customized SBC should be saved to your hard drive and then emailed.

   i. To send the SBC to another recipient, clear the field and enter a new address and click **Send**.

5. To customize a different SBC, click **Return to Results**.

6. When completed, log out by clicking the red **X** at the top of the browser window.

Reminder – always create a new customized SBC for each request to ensure the most up-to-date material is being distributed.

Note: If the group health plan makes a plan change, an updated SBC can be retrieved using the same process.

Technical Assistance
If you need assistance while using the SBC Tool, please call (855) 756-4448.