

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Center for Consumer Information and Insurance Oversight
200 Independence Avenue SW
Washington, DC 20201



8/04/2025

VIA ELECTRONIC MAIL: Morgan.Winters@Illinois.gov

Morgan Winters
Director
Get Covered Illinois
115 S La Salle Street, 13th Floor
Chicago, IL 60603

Dear Director Winters,

I am pleased to inform you that the Centers for Medicare & Medicaid Services (CMS) has granted the State of Illinois ("Illinois" or "the State") conditional approval to establish a State-based Exchange (SBE) for plan year 2026. Congratulations to the Get Covered Illinois team on reaching this significant milestone on the path to establishing an SBE for the residents of Illinois.

The conditional approval reflects the progress Get Covered Illinois has made in demonstrating implementation of Federally-required Exchange functionality as necessary for an SBE to provide affordable, quality coverage for consumers beginning for plan year 2026 (PY26). CMS has reached this decision based on Illinois' SBE Blueprint Application attestations, progress to date, and expected progress across the entire spectrum of Exchange requirements. CMS's conditional approval is contingent upon the following:

1. Continuing to meet the Federal requirements for the initial, go-live implementation of Get Covered Illinois for the upcoming Open Enrollment period, as summarized in the appendix to this letter; and
2. Continued compliance with federal regulations once Get Covered Illinois successfully completes its initial, go-live implementation and transitions to regular operations, including continued demonstration of the ability to perform required Exchange activities in line with the attestations Get Covered Illinois has made in its SBE Blueprint Application submission.

We look forward to continuing our partnership with Get Covered Illinois and are committed to providing your team our ongoing support and technical assistance to help Get Covered Illinois succeed.

Thank you,

A handwritten signature in dark ink, appearing to read "Peter Nelson", is written over a light gray horizontal line.

Peter Nelson
Director, Center for Consumer Information & Insurance Oversight
Deputy Administrator, Centers for Medicare & Medicaid Services

Appendix: Get Covered Illinois – CMS Assessment of Key SBE Transition Activities

Key Functional Area	State Progress
Federal Data Services Hub (HUB) Authority to Connect (ATC)	Received CMS Federal Data Services Hub (FDSH) Authority to Connect (ATC) approval on 7/22/2025.
Federal Data Services Hub (HUB) Testing	On track to complete all required FDSH testing by October 2025.
Plan Management	- Successfully demonstrated consumer-facing Qualified Health Plan (QHP) display capabilities on 7/22/2025. - Successfully submitted evidence of Advance Premium Tax Credit (APTC) calculation and proration capabilities on 7/22/2025. To maintain conditional approval, Illinois will address any discrepancies in their calculation functionality identified by CMS based on further CMS validation. - Successfully demonstrated accurate transfer of certified QHP data through the National Association of Insurance Commissioners' (NAIC) System for Electronic Rates & Forms Filing (SERFF), onto own SBE platform, along with issuer plan preview and validation tools on 7/22/2025.
Eligibility and Enrollment	- Illinois submitted its initial alternative single, streamlined eligibility application for CMS review and approval under 45 CFR 155 Subpart D and 45 CFR 155.405(b) on 2/4/2025, and submitted a revised single, streamlined application, per CMS feedback, on 2/20/2025. - Illinois demonstrated implementation of required eligibility functionality, including coordination with the State Medicaid Agency (SMA), to CMS through a series of live Operational Readiness Reviews (ORRs) on 5/19/2025 and 5/21/2025. Illinois also submitted 8 additional video recordings of demonstrating required functionality based on different eligibility scenarios. - Illinois demonstrated account transfer functionality live and end-to-end (SBE to SMA and SMA to SBE) during an ORR on 6/23/2025. - Illinois submitted documentation to CMS showing progress in onboarding QHP issuers onto the IL SBE platform to conduct automated enrollment transactions, including progress in testing of enrollment functionality with issuers using different consumer scenarios and actions. IL will continue to submit regular updates to this documentation to show status of readiness of its issuers to enroll eligible consumers for Open Enrollment go-live. - To maintain conditional approval, Illinois must address the required open eligibility and enrollment items identified through CMS' ORRs and implement necessary changes as described and, by the dates agreed upon, in the "Requirements and Recommendations for IL" document and summarized below: Prior to Open-Enrollment PY26 - Update single, streamlined eligibility application (SSApp) help-language such that it guides applicants to correctly designate household members that are not members of the primary tax-

	filer household to “not seeking coverage on this application” and submit screenshots of this change with CMS by 09/06/2025. - o Update eligibility response page (ERP) text to more accurately inform applicants that the household size and annual income amounts listed were used for determination of Marketplace eligibility, and that household size may be different for purposes of Medicaid eligibility and submit screenshots to CMS by 09/06/2025. - o Update ERP language for a full Medicaid eligibility determination request such that it aligns with the Federally Facilitated Exchange’s (FFE’s) language as indicated in the FFE User Interface Question Companion Guide (UI Q CG), and submit screenshots to CMS by 09/06/2025. - o Update “Sign and Submit” page of the IL SBE SSApp to include all required attestations as indicated in the FFE UI Q CG and submit screenshots to CMS showing their implementation by 09/06/2025. - o Update the auto-eligibility determination process for applicants who are referred to the SBE from the SMA via an account transfer to ensure that they are responding to all relevant attestations prior to enrollment in a QHP and demonstrate this change to CMS before Open Enrollment for PY26. Post Open-Enrollment PY26 - o Work with SMA to ensure it implements the functionality to accept verified applicant data received from the SBE via account transfer without conducting duplicative and/or unnecessary re-verifications.
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Key Functional Area	State Progress
Consumer Assistance	• Successfully demonstrated a consumer-facing SBE website and call-center development plan to CMS on 7/23/25, meeting functional requirements outlined in the SBE Blueprint application. To maintain conditional approval, Illinois will incorporate CMS feedback on the website prior to Open Enrollment go-live of its website. • Successfully provided and incorporated results of a stakeholder usability testing plan, provided to CMS on 7/23/25, in the implementation of Illinois’ consumer-facing Exchange website under CFR 155.205(b). • On 7/14/25, CMS and Illinois established an agreed-upon consumer communications coordination plan regarding the transition of consumers from the Federal platform to the SBE, including a timeline for the Illinois to send initial transition-related stakeholder communications on 10/06/2025.

Legal Authority and Governance	• Illinois Public Act 103-0103 provided enabling authority to operate the Illinois SBM – Get Covered Illinois. • Get Covered Illinois will operate as a division of the Illinois Department of Insurance. Get Covered Illinois, has established an Advisory Council that meets the requirements of 45 CFR 155.110(c), and holds meetings on a regular basis that are open to the public with advanced notice. • Illinois has provided full staffing plan to CMS which includes information to cover the SBE transition period, first SBE Open Enrollment period, and SBE operations thereafter.
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