

Illinois Department of Insurance

Letter of Submission Template

[Issuer shall file a letter of submission, or provide information in the Filing Description field under the General Information tab in SERFF. (Reference 50 IAC 916.40(b) and 50 IAC 2001.130(a)(3))]

1. [Salutation]
2. RE: [Issuer preference]
3. [Statement to indicate: (a) purpose and content of filing; (b) whether or not the submission is a new form]
4. [List name of the form(s) and identifying form numbers. If the form is intended to supersede another, the form number of the form replaced and the date it was approved by the Department, with a redline version from the previously approved form. Identify SERFF tracking number(s) of the prior approved forms.]
5. This is an [insert **one** statement as shown below. Use all caps as shown.]
 - ON EXCHANGE filing. [QHPs and SADPs. For a QHP form filing, indicate the SERFF tracking number of the associated Off Exchange mirrored form filing (a filing to represent an off exchange QHP plan that is also sold on the marketplace exchange)]
 - OFF EXCHANGE MIRRORED filing. [QHPs only. Indicate the SERFF tracking number of the associated On Exchange form filing]
 - OFF EXCHANGE MARKET filing. [QHPs only. For forms/plans not offered on the marketplace exchange]
 - OFF EXCHANGE CERTIFIED filing. [SADPs only. For certified SADPs sold off exchange only]
6. [Indicate the SERFF tracking number(s) of the associated rate, network, and form filings.]
7. [If applicable, statement to indicate whether or not the filing represents a Multi-State plan.]
8. [Other additional information, as appropriate for the filing.]
9. [Complimentary close/Name of Sender/Contact information for Sender]