



Illinois Department of Insurance

JB PRITZKER
Governor

ROBERT H. MURIEL
Director

MEMORANDUM

TO: ALL COMPANIES WRITING ACCIDENT AND HEALTH INSURANCE AND MANAGED CARE PLANS IN ILLINOIS

FROM: ROBERT H. MURIEL, DIRECTOR OF INSURANCE 

DATE: MAY 8, 2020

RE: COMPANY BULLETIN 2020-13
ILLINOIS FILING REQUIREMENTS FOR INDIVIDUAL AND SMALL GROUP HEALTH PLANS, ON AND OFF-MARKETPLACE (ON AND OFF-EXCHANGE) AND STAND-ALONE DENTAL PLANS

The purpose of this Bulletin is to provide instructions to Issuers seeking certification or recertification of individual and small group plans and Stand-alone Dental Plans (SADP) offered on the Individual and Small Business Health Options Program (SHOP) Marketplace. This Bulletin also applies to those plans offered off the Marketplace (Off-Exchange) in the individual and small group markets for Plan Year 2021.

Note: The issuer deadlines apply to ALL individual and small group health plans, and dental plans offered on and off the Marketplace.

	Activity	Dates
Plan and Rate Application and Review Process	Deadline for Issuers to Submit Plan Data and Rate Filings to Illinois Through SERFF	5/27/2020
	Illinois DOI First SERFF Data Transfer Deadline	6/17/2020
	CMS Reviews Initial Qualified Health Plan (QHP) Applications	6/18/2020 – 8/12/2020
	Illinois DOI Second SERFF Transfer Deadline	7/22/2020
	Deadline for Issuers to Submit Service Area Petition Changes	8/11/2020
	Illinois DOI Deadline to Provide Issuer Service Area Petition Changes to CMS	8/11/2020
	Illinois Deadline for Issuers to Submit Changes to Plan Submissions	8/21/2020
	Illinois Transparency in Coverage data submission deadline	8/21/2020
	Illinois Deadline for Issuers to Submit Changes to Rates	8/21/2020
	Illinois DOI Second SERFF Data Transfer Deadline	8/26/2020
	CMS Sends Final Correction Notices to Issuers with Agreements for Signature and Plan Lists Confirmation	9/15/2020
	Illinois DOI Sends CMS Final Plan Recommendations	9/15/2020 – 9/23/2020

	Issuers Send Signed Agreements, Confirmed Plan Lists and Final Plan Crosswalks to CMS	9/15/2020 – 9/23/2020
QHP Agreement/ Final Correction	Limited Data Corrections Window (Outreach to Issuers with CMS or Illinois DOI Identified Data Errors; Issuers Submit Corrections; CMS Reviews and Finalizes Data for Open Enrollment)	9/17/2020 – 9/18/2020
	Transparency in Coverage data resubmission deadline	9/18/2020
	CMS Sends Certification Notices with Counter-Signed Agreements and Final Plan Lists to Issuers	10/5/2020 – 10/6/2020
Open Enrollment Begins		11/1/2020

Issuers are advised to consult federal regulations, 2021 Letter to Issuers, and state law in conjunction with this Bulletin to ensure full compliance. Helpful documents can be found on the Illinois Department of Insurance’s [ACA Issuer Homepage](#).

- All form filings must be submitted in the format of a complete insurance policy. The Department will not accept matrix insert page filings, riders, amendments, variable language or brackets. Approved filing will only be reopened upon request from CMS. NOTE: Summary of Benefits and Coverage may contain bracketed information per the federal template, and the cover page may include brackets for policyholder name, policy number, product name, effective date of policy and other identifying data.
- Visit the [CMS QHP Certification Website](#) and complete the QHP Application checklist.
- For 2021 plans, Illinois will require the crosswalk template to be uploaded to the binders.
- Submit all [checklists, templates and supporting documentation](#) in SERFF.
- Provide a red-lined version identifying the variations in plan benefit design from the plans submitted for the previous plan year for each form filing submitted for recertification. Red-lined versions must be submitted under the supporting documentation tab in the form filing in SERFF.
- Associate all relevant filings in the SERFF binder including but not limited to form, rate, external review, and network adequacy filings.
- Previously filed Network Adequacy filings may be associated in the binder if no substantive changes have been made to the network.
- Remit the fee of \$3,000.00 for certification of each new QHP and \$1,500.00 for recertification for existing QHP plans via EFT in SERFF binder filings at the time of binder submission.
- Service Area Exemption: Issuers that fail to offer coverage to an entire rating area must obtain an exception from the Department. (See [QHP Service Area Exception Form](#)) The Issuer must provide service area maps to show compliance with the service area requirement.
- For Plans that will be discontinued or modified, Issuers must submit the appropriate letters or notifications pursuant to 215 ILCS 97/60.

Issuers may be required to attach other checklists and/or supporting documentation templates, as indicated by the ACA Individual, Small Group, and Catastrophic Checklists.

Maximum Annual Limitation on Cost Sharing for Plan Year 2021

	Individual Coverage	Family Coverage
Health Plans	\$8,550	\$17,100
SADPs	\$350	\$700

Exhibit 1:**2021 Health Plans Filing Requirements – Form and Binder**

	Required Submission Via SERFF		
Federal Required Templates	On/Off-Exchange	Off-Exchange	Location
All Applicable templates/documents listed on the CMS Certification Checklist	Yes	No	Binder
Illinois Required Documents			
ACA Individual, Small Group, and Catastrophic Checklist	Yes	Yes	Form filing
ACA Individual and Small Group SADP Checklist	Yes	Yes	Form filing
Network Adequacy and Transparency Checklist (not applicable to SADPs)	Yes	Yes	Network Adequacy Filing
Mental Health Parity Supporting Documentation Template (does not include SADP)	Yes	Yes	Form Filing
Proposed Enrollment Template	Yes	Yes	Binder
External Review Checklist (Not applicable to SADPs)	Yes	Yes	External Review Filing

QHP Rates Guidance:

- The Department will allow carriers to modify their individual and small group rate filings through July 29, 2020 to reflect updated assumptions for both COVID-19 and risk adjustment. Other types of changes or changes after this date will be allowed at the discretion of the Department. All documents which change will need to be resubmitted in redline format, in order to allow for a more efficient review.
- Since July 1, 2019, it has been illegal in Illinois to sell tobacco products to individuals under 21 years of age. Accordingly, premium rates for consumers in this age group should not include a tobacco load.

Exhibit 2:**2021 Health Plans Filing Requirements – Rates**

	Required Submission via SERFF		
Federal Required Templates	On-Exchange	Off-Exchange	Location
QHP Rating Module Documents <ul style="list-style-type: none"> • Rates Table Template • Business Rules Template 	Yes	Yes	Rate filing & Binder
Unified Rate Review Template	Yes	Yes	Rate Filing & Binder
Illinois Required Documents			
Health Premium Rate checklist	Yes	Yes	Rate Filing & Binder
Proposed Enrollment Template	Yes	No	Rate Filing & Binder