BerryDunn | BDMP Assurance, LLP

Independent External Audit: Get Covered Illinois, State of Illinois

July 1, 2024, to June 30, 2025

Audit Findings Report

Independent External Audit: 2025 Findings Report

TO: CCIIO STATE EXCHANGE GROUP

FROM: BDMP Assurance, LLP (BerryDunn)

DATE: October 16, 2026

SUBJECT: AUDIT FINDINGS REPORT FOR

AUDIT PERIOD: 7/1/2024 – 6/30/2025

I. Executive Summary

PURPOSE:

The purpose of this independent external audit is to assist the State of Illinois in determining whether the Get Covered Illinois Exchange (the Exchange), the Illinois State-Based Exchange on the Federal Platform (SBE-FP), is in compliance with the programmatic requirements set forth by the Centers for Medicare & Medicaid Services (CMS) during the audit period.

Name of SBE-FP: Get Covered Illinois
State of SBE-FP: Illinois
Name of Auditing Firm: BerryDunn

Our responsibility was to perform a financial and programmatic audit to report on GCI's compliance with Title 45, Code of Federal Regulations, Part 155 (45 CFR 155) as described in the CMS memo dated June 18, 2014, Frequently Asked Questions about the Annual Independent External Audit of SBMs. The Program Integrity Rule Part II (“PI, Reg.”), 45 CFR 155.1200 (c), states, “The State Exchange must engage an independent qualified auditing entity which follows U.S. generally accepted governmental auditing standards (U.S. GAGAS) to perform an annual independent external programmatic audit and must make such information available to the United States (U.S.) Department of Health and Human Services for review.”

SCOPE:

The scope of this engagement included an examination of GCI's compliance with the programmatic requirements under 45 CFR 155, Subparts C, D, E, and K for the 12-month period July 1, 2024, through June 30, 2025. We conducted our examination in accordance with U.S. generally accepted auditing standards and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States. We completed an examination of GCI's compliance with the applicable programmatic requirements under 45 CFR 155 and issued our reports dated October 16, 2026.

We also performed an audit of its financial statements for the year ended June 30, 2025, and issued our report dated June 24, 2026.

Due to the State’s SBE-FP status during the audit period, eligibility and enrollment functions were performed by the federal platform. Accordingly, we did not select or test eligibility and enrollment transactions for compliance with requirements related to eligibility determination,

data verification, or Qualified Health Plan (QHP) enrollment, as these functions are administered by CMS.

METHODOLOGY:

Audit Firm Background:

BerryDunn is a national consulting and certified public accounting firm with multiple practice groups dedicated to serving state and local government agencies. BerryDunn was formed in 1974 and has experienced sustained growth throughout its 50-year history. Today, BerryDunn employs 900+ personnel with headquarters in Portland, Maine—and office locations in Arizona, Connecticut, Hawaii, Massachusetts, New Hampshire, West Virginia, and Puerto Rico. The firm has experienced professionals who provide a full range of services, including information technology (IT) consulting; management consulting; and audit, accounting, and tax services. Those services include conducting Financial and/or Programmatic audits of multiple State-Based Exchanges. We also have completed audits in accordance with Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance, previously referred to as Office of Management and Budget (OMB) Circular A 133) for several sizable healthcare organizations, many of which receive U.S. Department of Health and Human Services federal grants or funding. In addition, we provide audit services for higher education, social service, and economic development organizations, as well as other entities that receive federal grants and are subject to the Uniform Guidance.

Financial Statement Audit:

We have audited, in accordance with U.S. generally accepted auditing standards (U.S. GAAS) and the standards applicable to financial audits contained in Government Auditing Standards issued by the Comptroller General of the United States, the financial statements of GCI, for the year ended June 30, 2025, and related notes to the statements, and have issued a report thereon dated June 24, 2026.

Programmatic Audit:

We have examined GCI's compliance with the programmatic requirements described in 45 CFR 155 for the year ended June 30, 2025, and have issued a report thereon dated October 16, 2026.

Summary of Programmatic Audit Procedures:

Our audit consisted of specific procedures and objectives to evaluate instances of noncompliance and to test ’s compliance with certain subparts of 45 CFR 155. BerryDunn examined compliance with the requirements under 45 CFR 155, in the following programmatic areas:

- Exchange Establishment Standards and General Functions (Subpart C)
- Eligibility Determinations (Subpart D)
- Enrollment Functions (Subpart E)
- Certification of QHPs (Subpart K)

We reviewed the processes and procedures under 45 CFR 155, in the following programmatic areas in order to determine whether they followed the requirements of the ACA:

- Assisters, Navigators, Certified Application Counselors, and Brokers
- Compliance and Program Integrity
- Contact Center
- Eligibility and Enrollment Processes and Procedures
- Privacy and Security
- QHP Certification

We reviewed the following documentation, which was obtained directly from the Exchange, or located on either the Exchange website or the CMS website:

- GCI Conditional Approval Letter
- GetInsured Illinois State-Based Exchange IT and CAC Center Manual
- GCI CMS Blueprint Application
- CMS Feedback on GCI Website, July 2024
    - Progress tracking matrix for website improvements
- GCI Website Screenshots During Audit Period
- Guidance for CAC and Navigator personnel
- QHP:
    - Department of Insurance Policy Manual
    - QHP Certification Process
    - DOI Certification Bulletin to Issuers
    - GCI Issuer Agreement
    - DOI Review Requirements Checklist
    - QDP Checklist for SADP 2024
    - DOI Policy Manual
    - Certification and Licensing Process Guide PY25
    - Illinois Navigator Program Sample PY2025
- Privacy and Security
    - HFS and DOI Intergovernmental Agreement and First Amendment

To understand management and staff responsibilities and processes as they relate to compliance with 45 CFR § 155, we interviewed the following GCI staff:

- Director, Plan Management and Carrier Relations
- Director, Partner Relations and Outreach
- Deputy Director, Contact Center
- Deputy Director, Business Solutions and Program Management
- Deputy Director, Marketplace Compliance and Program Integrity
- Manager, Marketplace Training and Partner Certification

Confidential Information Omitted

N/A

II. Programmatic Audit Findings

MATERIAL NONCOMPLIANCE

Finding 2025-001

Criteria

155.205 (c) Accessibility. Information must be provided to applicants and enrollees in plain language and in a manner that is accessible and timely to—

(1) Individuals living with disabilities including accessible Web sites and the provision of auxiliary aids and services at no cost to the individual in accordance with the Americans with Disabilities Act and section 504 of the Rehabilitation Act.

(2) Individuals who are limited English proficient through the provision of language services at no cost to the individual, including

(i) For all entities subject to this standard, oral interpretation.

And

(A) For Exchanges and QHP issuers, this standard also includes taglines on Web site content and any document that is critical for obtaining health insurance coverage or access to health care services through a QHP for qualified individuals, applicants, qualified employers, qualified employees, or enrollees. A document is deemed to be critical for obtaining health insurance coverage or access to health care services through a QHP if it is required to be provided by law or regulation to a qualified individual, applicant, qualified employer, qualified employee, or enrollee. Such taglines must indicate the availability of language services in at least the top 15 languages spoken by the limited English proficient population of the relevant State or States, as determined in guidance published by the Secretary. If an Exchange is operated by an entity that operates multiple Exchanges, or if an Exchange relies on an entity to conduct its eligibility or enrollment functions and that entity conducts such functions for multiple Exchanges, the Exchange may aggregate the limited English proficient populations across all the States served by the entity that operates the Exchange or conducts its eligibility or enrollment functions to determine the top 15 languages required for taglines. […]

Condition

During the audit period, GCI maintained a public-facing Exchange website that included information related to health coverage and Marketplace services. GCI operated as a State-Based Exchange on the Federal Platform (SBE-FP) and relied on HealthCare.gov for eligibility and enrollment functions. GCI remained responsible for ensuring information on its Exchange website was accessible to individuals with disabilities and individuals with limited English proficiency.

BerryDunn's review noted that website content was available primarily in English and Spanish during the audit period. Additional language access was provided through an automated translation tool accessible through a website translation menu. However, GCI could not demonstrate that website content was consistently available in the languages required by

federal regulations for individuals with limited English proficiency. In addition, internal GCI documentation noted that during the audit period the translation functionality relied on a website feature that did not appear to have been readily accessible to all users utilizing assistive technologies. GCI provided BerryDunn with a selection of recorded email exchange that linked documentation and updates which corresponded to the items of noncompliance which were identified by CMS personnel. The comments posted by CMS in mid July 2024 clearly identified instances wherein the existing GCI website did not comply with the criteria's listed references to 45 CFR 155.205 (c). GCI provided internal documented plans and updates upon request which were relevant to the insights communicated by CMS in late September 2024. BerryDunn's review of such provided records did not identify remediation efforts to address the elements identified in the criteria of this finding.

Cause

GCI relied on automated website translation functionality rather than implementing a formal process to evaluate whether language access services and website accessibility features met applicable federal accessibility and language access requirements. As a result, controls were not in place to periodically assess whether users with disabilities or limited English proficiency could readily access and understand website information.

Effect

Individuals with disabilities or limited English proficiency may experience barriers accessing Exchange information, understanding available health coverage options, or obtaining information regarding Marketplace services. As a result individuals may be less able to access resources intended to support eligibility and enrollment and may not receive necessary information.

Finding 2025-002

Criteria

155.205 (b) Internet Web site. The Exchange must maintain an up-to-date Internet Web site that meets the requirements outlined in paragraph (c) of this section and:

[…]

> (7) A State-based Exchange on the Federal platform must at a minimum maintain an informational Internet Web site that includes the capability to direct consumers to Federal platform services to apply for, and enroll in, Exchange coverage.

Condition

BerryDunn noted that CMS identified multiple instances of outdated and inaccurate information on the Get Covered Illinois website during its review of the Exchange's readiness for SBE-FP operations in August 2025. Evidence provided by management demonstrated that certain issues were remediated; however, documentation was insufficient to demonstrate that all identified website content was comprehensively reviewed, updated, and validated prior to the start of open enrollment.

As a result, the Exchange could not demonstrate that all consumer-facing website information was current, accurate, and reflective of applicable plan-year policies, processes, and enrollment information throughout the audit period.

Cause

Management's efforts during the transition to a State-Based Exchange on the Federal Platform were focused on multiple operational and implementation activities. As a result, the Exchange had not established a formalized process for conducting website content reviews and updating content based on CMS’s review prior to open enrollment.

Effect

Consumers may rely on Exchange website information when making health coverage decisions or seeking enrollment assistance. Outdated, inaccurate, or incomplete information increases the risk that applicants and enrollees may receive incorrect guidance regarding eligibility, enrollment processes, deadlines, available resources, or coverage options. This may result in consumer confusion and reduce the effectiveness of the Exchange's outreach and enrollment efforts.

MATERIAL WEAKNESS IN INTERNAL CONTROL OVER COMPLIANCE

We identified certain deficiencies in internal control over compliance, described in Findings 2025-001 and 2025-002, that we consider to be material weaknesses.

Programmatic Auditor's Opinion

Qualified

ADDITIONAL COMMENTS

N/A

III. Recommendations

Finding 2025-001

Recommendation

We recommend that management review the website deficiencies identified through CMS's readiness assessment and implement corrective actions for any issues that have not yet been remediated. Management should establish documented processes for periodic website accessibility testing, language access reviews, and ongoing monitoring of Exchange website content and functionality to help ensure continued compliance with applicable federal accessibility and language access requirements

Finding 2025-002

Recommendation

We recommend that GCI establish procedures to periodically assess its website for compliance with applicable Exchange requirements and promptly address identified deficiencies. These procedures should help ensure that required financial information is published and maintained in accordance with federal requirements and that consumers are provided accurate, up to date, and accessible information regarding Exchange coverage and enrollment.

IV. Financial Statement Auditor's Opinion

We have issued an Independent Auditor's Report on the financial statements for the year ended June 30, 2025, reflecting the following type of opinion:

Unqualified

V. Conclusion

Based on a review of the documentation required for this report, in our opinion, except for the material noncompliance described in the Audit Findings section of this report, GCI complied with the requirements of 45 CFR 155, Subparts C, D, E, and K during the year ended June 30, 2025, in all material respects.

SIGNATURE OF AUDIT FIRM:



COMPLETION DATE OF AUDIT:

FINDINGS REPORT: October 16, 2026