



Update to Life Event Reporting Registration for Assisters

MNsurance's Accessibility & Equal Opportunity (AEO) office can provide this information in accessible formats for individuals with disabilities. Additionally, the AEO office can provide information on disability rights and protections to access MNsure programs. The AEO office can be reached via 855-366-7873 or AEO@MNsurance.org.

Current Registration Process



MNsure.org

Search



Quick Links

Announcements Assister Portal Broker One Stop Navigator One Stop

Home > Shared Resources > Report Application Changes

Shared Resources

- Document Library
- External Resources
- Joint Policies and Procedures
- Outreach Resources
- ▶ Report Application Changes
- Stakeholder Groups
- Training Resources

Report Application Changes

Private health plan enrollees (private plans are also known as qualified health plans or QHPs), need to report any changes that impact enrollment in their plan and any changes that impact their eligibility for premium tax credits and cost-sharing reductions, if they applied for financial assistance.

Private plan enrollees must report changes **within 30 days of the date of the change**. Reported changes may affect eligibility; see [Rights and Responsibilities](#).

You can assist individuals to report their changes using one of our online forms or by calling the ARC or Broker Line. **Please read carefully the types of changes you can report online before you start.**

Online Report Forms

Register to use the online report forms. After you register, log in.

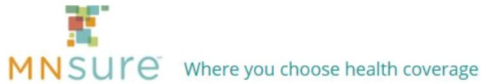
Register

Log In

[Use the Online Report Forms](#)



Current Registration Process



Register to Report a Change Online

Create a unique user name and password. These do not need to match your Mnsure account login credentials.

User name (Required)

Password (minimum 8 characters, use upper case and lower case letters and at least 1 number) (Required)

Confirm password (Required)

Navigator, Certified Application Counselor (CAC) or Broker Information

Are you a navigator, CAC or broker completing this form on behalf of a client? (Required)

Yes No

First name of the person completing this form

Last name of the person completing this form

Phone number for the person completing this form (Must be 10 digits, numbers only)

Broker, navigator or CAC identification number related to the individual reporting this change

Confirm ID number

Privacy Notice

What information does Mnsure ask for?
The Mnsure application and eligibility system is used for several health insurance and financial assistance programs. The following privacy warning addresses all the information Mnsure may collect. You may not be asked to provide all this information, depending on the life event you are reporting.

In order to verify your eligibility for cost-sharing reductions, advanced payment of premium tax credits, and public assistance programs, Mnsure collects private data, including household size, date of birth, Social Security number, migration information and income, and verifies this information against state and federal sources. Mnsure will also collect information to confirm that you reside in Minnesota, are lawfully present in the United States, and are not incarcerated. Mnsure is required to collect the information in order to determine eligibility for Medicaid, cost-sharing reductions and advanced payment of premium tax credits.

Mnsure collects your social security number to tell you apart from other people, to prevent duplication of state and federal benefits, and to verify income, resources or other information that may affect your eligibility and benefits. You do not have to provide a Social Security number for persons in your home who are not applying for coverage or if you have religious objections. If you are permanently living in the U.S. without permission or approval from the U.S. Citizenship and Immigration Services, you do not need to provide your Social Security number, but you may not be eligible to enroll in benefits or plans offered on Mnsure.

In order to proceed with purchasing and enrolling in a qualified health plan, Mnsure collects additional private information.

I agree that I have read and understand my rights and responsibilities described in the privacy notice.

I agree

Attestation

By the best of your knowledge, you are attesting that your household has a change. You promise that all the information you provide regarding this change is true and complete. You understand that there may be a penalty if your attestations are not true. If you submit information that is not truthful, your private health plan (qualified health plan) coverage may be terminated and you may have to repay any payments that you are entitled to, including advance payment of premium tax credits.

I agree that I have read and understand my rights and responsibilities described in the attestation agreement.

I agree

Submit

New Registration Process



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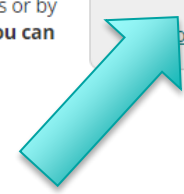
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Log In

[Use the Online Report Forms](#)



New Registration Process

Register to Report a Change Online

Email (your unique email) (Required)

Confirm email (Required)

Password (minimum 8 characters, use upper case and lower case letters and at least 1 number) (Required)

Good

Confirm password (Required)

Assister ID or NPN (your current active ID) (Required)

Confirm Assister ID or NPN (Required)

Submit

Already registered? [Reset your password.](#)



New Registration Process

Register to Report a Change Online

Email (your unique email) (Required)

Confirm email (Required)

Password (minimum 8 characters, use upper case and lower case letters)

Good

Confirm password (Required)

Assister ID or NPN (your current active ID) (Required)

Confirm Assister ID or NPN (Required)

Submit

Already registered? [Reset your password.](#)

Register to Report a Change Online

You did not enter valid information in one or more of the fields.

Email (your unique email) (Required)

✘ Value already present

Confirm email (Required)

Assister ID or NPN (your current active ID) (Required)

✘ Value already present

Confirm Assister ID or NPN (Required)

New Registration Process

☆ DoNotReply

Email Validation - MNSure Report a Change (LEC) account - Thank you for creating a Report a Change (LEC) account with MNSure. To activate y

Email Validation - MNSure Report a Change (LEC) account Inbox x

DoNotReply@mnsure.org

to John.v.salisbury

Thank you for creating a Report a Change (LEC) account with MNSure. To activate your account, you must click on the link below to validate your email address.

<https://k1.caspio.com/dp/86f73000fd53e01b73134e578316?ValidationCode=7808c503edd3412dafac4078eae2ff95>



Thank you for validating your email address. Your account is now active.

[Report a Change \(LEC\) Home](#)

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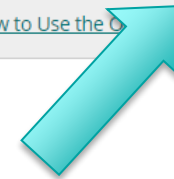
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Log In

[How to Use the Online Report Forms](#)



New Sign-In Process

Enter your validated email and password

Email

Password

Log In

Forgot your password? [Reset Password](#).
New user? [Register to Report Changes Online](#).
Email not confirmed? [Resend Validation Email](#).

New LEC Landing Page



MNsure Report a Change (LEC) Tool

Logged in as: John.v.salisbury@gmail.com
[Change Passw](#)

Important:

In order to use this form your client or members of your client's household must currently be eligible for a QHP through MNsure.

Privacy Notice and Attestation

Your client must receive and understand the following privacy notice and attestation. Please provide your client an opportunity to read the notice and attestation or read it to the client.

representatives of the Legislative Auditor, MN.IT information technology staff, enforcement agencies with statutory authority, and persons authorized by court order. If you applied for financial assistance, the Department of Human Services is also authorized to view and use the information pursuant to Minn. Stat. § 13.46.

MNsure will also share information with the Federal Data Services Hub in order to retrieve information necessary to perform eligibility verifications. An inquiry will be made against data held by federal agencies including the Department of Homeland Security to verify citizenship and immigration status, the Internal Revenue Service to verify federal tax information, the Social Security Administration to verify income and incarceration status, Centers for Medicaid and Medicare Services to verify health insurance tax credits, and other federal insurance sources to verify minimum essential coverage. An inquiry may also be made against data held by state agencies including the Department of Human Services and the Department of Employment and Economic Development.

How long will MNsure retain your private data?

The information you provide is private, and will be kept as required by law for up to 10 years. MNsure does not collect or retain any genetic information.

Important: By submitting this form, I agree that I understand my privacy rights described in this notice.

Attestation

To the best of your knowledge, you are attesting that your household has a change. You promise that all the information you provide regarding this change is true and complete. You understand that there may be a penalty if your attestations are not true. If you submit information that is not truthful, your private health plan (qualified health plan) coverage may be terminated and you may have to repay any payments that you are not entitled to, including advance payment of premium tax credits.

By submitting this form, I agree that I have read and understand the rights and responsibilities described in the attestation above.

New LEC Landing Page

Select a Change to Report

Important: You cannot enroll in health care coverage using this form. Log out and call the MNSure Contact Center at 651-539-2099 or 855-366-7873 for help.

This page will time out after 30 minutes of inactivity. If it times out, any information entered will not be submitted to MNSure.

If you have no additional changes to report at this time please [log out](#).

Add a Person to Household (Assisted Applications)

This form is for those who submitted an application WITH financial assistance ("assisted application"). It will take **30–60 minutes to complete**.

You can report these additions to your household with this form:

- Newborn babies
- New household members due to marriage
- Current household members that were omitted from application in error

Information you may need:

- Social Security number (if available) for the person being added if they are seeking coverage
- Date of birth for the person being added
- For non-citizens, Green Card or other immigration documents
- W2 form or Employer Tax ID Number (EIN)
- Employer's address and contact information

Add a Person to Household (Unassisted Applications)

This form is for those who submitted an application WITHOUT financial assistance ("unassisted application"). It will take **20–40 minutes to complete**.

You can report these additions to your household with this form:

- Newborn babies
- New household members due to marriage
- Current household members that were omitted from application in error

Information you may need:

- Social Security Number (if available) for the person being added if they are seeking coverage
- Date of birth for the person being added
- For non-citizens, Green Card or other immigration documents

Change in Tax-Filer Status

This form will take **5–15 minutes** to complete. Use it to report:

- A change to tax filer status
- A correction to tax filer status

Change to Income or Projected Annual Income

This form will take **20–40 minutes** to complete. Use it to report:

- A new job
- A loss of employment
- A change to your current income
- A change to your projected annual income

Important: You may be asked to provide supporting documents about your income change to MNSure.

Loss of Health Care Coverage

This form will take **5–15 minutes** to complete. Use it to report:

- Loss of employer sponsored insurance
- If you are still entitled/eligible for the insurance but think it is no longer affordable we will need you to submit an [Appendix A](#)
- Loss of a private health plan (qualified health plan)
- If you are seeking to enroll in coverage due to loss of MinnesotaCare or Medical Assistance it CANNOT be reported on this form. Please contact MNSure at 1-855-366-7873.



Questions?

