

Parity complaint steps

1. Go to <https://mn.gov/commerce/consumers/file-a-complaint/>
2. Click **health insurance** –
a window will appear telling you that you will need to set up an account.
3. **Set up an account to login to the Consumer Portal.** You will need to provide your email address and a password, name, address, and phone number.
4. **You will automatically be taken back to the Consumer Complaint Portal to login.**
5. **Login**
6. You will be in the **Consumer Complaints Workspace**
7. Click [Submit a Complaint](#)

You will be logged in on the Minnesota Complaint Submission screen. If you check the **Use the “Previous” and “Next” ARROWS to go between pages. DO NOT USE THE ARROW ON YOUR BROWSER OR YOU WILL HAVE TO LOGIN AGAIN.**

- **Complainant Information**

Select the *“If complainant information is the same as account information,”* box, and your information will autofill.

Click “Next” to go to the next step.

- **Insured Information**

If you are the insured, click the “Are you the insured?” box to autofill the page. If not, describe your relationship to the insured or covered person, and add their name.

Click “Next” to go to the next step.

- **Complaint Against**

- Click the box to choose “My Insurance Company”
- **Insert your insurance company’s name.**

Click “Next” to go to the next step.

- **Insurance Information**

- **Policy**

- **Type of Policy** – choose “Group,” “Individual,” or “Unknown” from the dropdowns.
- Enter your policy number
- **Type of Insurance** – choose “Health Insurance” from the dropdowns.

- **Claim**

- **Claim Number** (from your denial paperwork)
- **Date of Loss** – this is the date the services were provided / date services were denied / date services were delayed

Click “Next” to go to the next step.

- **Complaint Details**

- **Type of Problem** Choose from the dropdowns:

- Billing/Premium Dispute
- Cancellation/Non-Renewal
- Claim Handling
- Other – If other, start with **INSURANCE DISCRIMINATION: Mental Health Parity or INSURANCE DISCRIMINATION: Substance Use Disorder Parity**

- **Detail of Complaint** – Describe your complaint

Click “Next” to go to the next step.

- **Documentation and Declaration**

- **Documentation** – You can choose how you will share your documents here:

- Upload* Fax Mail None *Accepted file type to upload are: doc, docx, gif, jpg, pdf, xls, and xlsx. If you select "Upload," you will be taken to the document upload screen after you submit your complaint.
- **Declaration/Authorization/Release**
Review the authorization statement and click the box.

Click "Next" to go to the next step.

- **Review Complaint** – Your information will appear for you to review.
 - If everything is correct, click the Submit button near the bottom of the page.
 - If changes or corrections are needed, click the section header to go back to that section. Click on the "Review Complaint" header to get back to review again.

You can also click the "Previous" box until you get to that information, make the correction, and click "Next" to go to the next correction or until you get to review again.

When you are sure everything is ready, click the "Submit" button.

- **Upload documents** – If you indicate that you would upload documents in the "Documentation and Declaration" Section, the "Add Document" section will show.
 - Simply choose the files you want to upload to help explain your complaint.