

How to Complete the Broker Certification for NYSOH

To become a certified broker with NY State of Health, complete the steps outlined below. Brokers must be currently licensed as an insurance agent or a broker in New York State.

1. Complete the required training course. For a list of facilities offering the NYSOH certification training click here:

http://www.dfs.ny.gov/insurance/agbrok/ab_shop.htm.

- The completion of the Small Business Marketplace course is a prerequisite for the completion of the Individual Marketplace course.



Services News Government Local

Location Translate

Department of Financial Services Consumer Information Applications & Filings Industry Guidance Reports & Publications Contact Us

Search DFS Portal

Agents and Brokers

Agents and Brokers Home

Manage Your License ▼

Application Forms and Instructions ▼

Excess Lines: Premium Tax Statement

Fingerprinting Procedures

Fee Schedules

Prelicensing and Continuing Ed ▼

NY State of Health Certification ▼

New York State of Health (NYSOH) Marketplace Certification Course Providers

The New York State of Health Marketplace began accepting applications for insurance on October 1, 2013. Producers who are licensed with either the accident and health or property casualty line of authority and wish to sell, solicit or negotiate accident and health insurance through the Marketplace must complete a certification course for both the Individual Market and the Small Business Market (SHOP).

The completion of the Small Business Market course is a prerequisite for completing the Individual Market course. Therefore, Individual Market certification requires the completion of both courses.

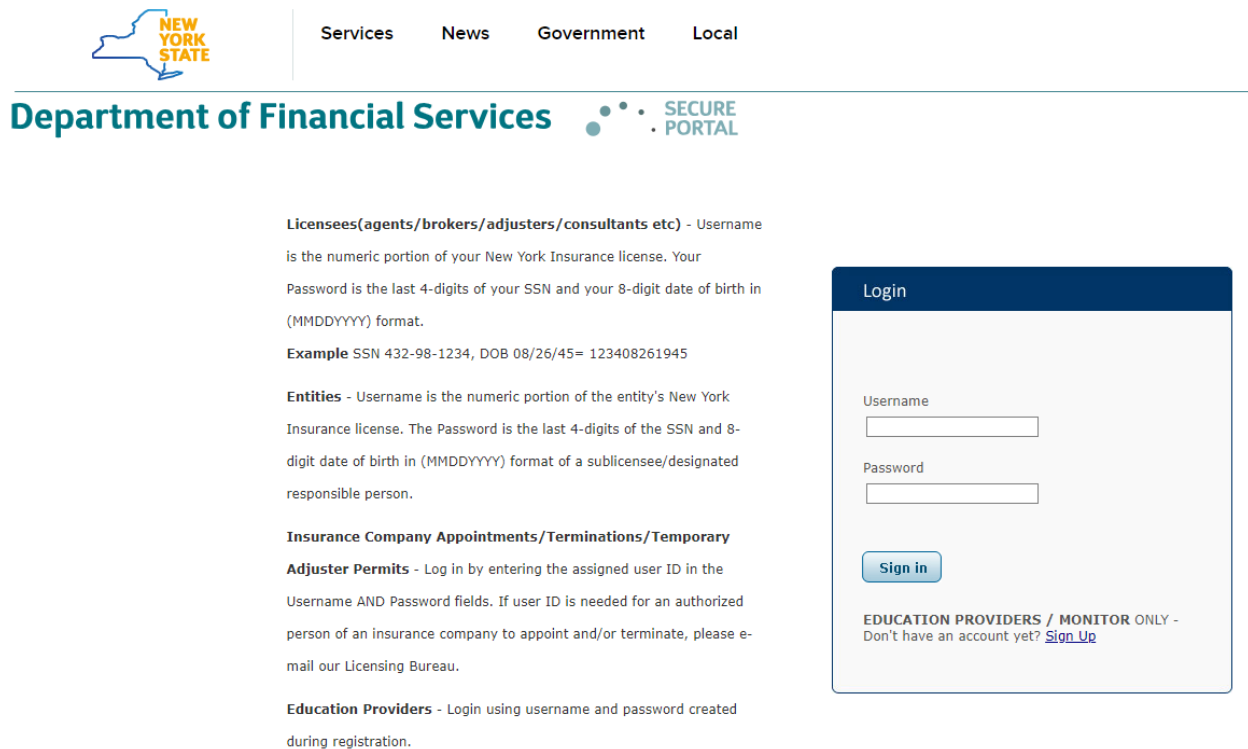
Producers completing these courses may earn continuing education credits toward the renewal of their insurance licenses.

Listed below are Provider Organizations who have an approved certification course. Contact them directly for detailed course information and availability. Or search for a course in your area via the [Continuing Education Course Search](#).

Once you have completed the certification course and received your course document, initiate the certification process by visiting the [New York State of Health Certification Instructions](#).

PROVIDER NAME & CONTACT	SHOP COURSE	INDIVIDUAL COURSE
Absentia, LLC dba CE Live		

2. Once certification trainings are successfully completed, register each course with the NYS Department of Financial Services (DFS). To do so, please login to the Producer Login Page here: <https://myportal.dfs.ny.gov/nylinxext/>.



The screenshot shows the NYS Department of Financial Services Secure Portal. The header includes the New York State logo and navigation links: Services, News, Government, and Local. The main heading is "Department of Financial Services" followed by the "SECURE PORTAL" logo. The page content is divided into two columns. The left column contains instructions for different user types: Licensees (agents/brokers/adjusters/consultants etc), Entities, Insurance Company Appointments/Terminations/Temporary Adjuster Permits, and Education Providers. The right column features a "Login" form with fields for Username and Password, a "Sign in" button, and a link for "EDUCATION PROVIDERS / MONITOR ONLY" who don't have an account yet.

Licensees(agents/brokers/adjusters/consultants etc) - Username
is the numeric portion of your New York Insurance license. Your Password is the last 4-digits of your SSN and your 8-digit date of birth in (MMDDYYYY) format.
Example SSN 432-98-1234, DOB 08/26/45= 123408261945

Entities - Username is the numeric portion of the entity's New York Insurance license. The Password is the last 4-digits of the SSN and 8-digit date of birth in (MMDDYYYY) format of a sublicensee/designated responsible person.

Insurance Company Appointments/Terminations/Temporary Adjuster Permits - Log in by entering the assigned user ID in the Username AND Password fields. If user ID is needed for an authorized person of an insurance company to appoint and/or terminate, please e-mail our Licensing Bureau.

Education Providers - Login using username and password created during registration.

Login

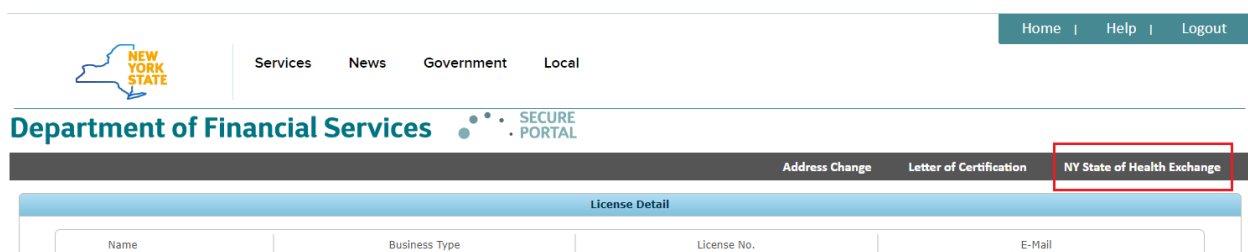
Username

Password

Sign in

EDUCATION PROVIDERS / MONITOR ONLY -
Don't have an account yet? [Sign Up](#)

3. After logging in, click on the *NY State of Health Exchange* tab.



The screenshot shows the NYS Department of Financial Services Secure Portal after login. The header includes the New York State logo and navigation links: Services, News, Government, and Local. The main heading is "Department of Financial Services" followed by the "SECURE PORTAL" logo. The page content is divided into two columns. The left column contains instructions for different user types: Licensees (agents/brokers/adjusters/consultants etc), Entities, Insurance Company Appointments/Terminations/Temporary Adjuster Permits, and Education Providers. The right column features a "Login" form with fields for Username and Password, a "Sign in" button, and a link for "EDUCATION PROVIDERS / MONITOR ONLY" who don't have an account yet.


Home | Help | Logout

Address Change Letter of Certification NY State of Health Exchange

License Detail

Name	Business Type	License No.	E-Mail
------	---------------	-------------	--------


4. Your certification course(s) will display on the screen. You must select the course(s) you want to register and click *NEXT*.



[Services](#)
[News](#)
[Government](#)
[Local](#)

[Home](#)
[Help](#)
[Logout](#)

Department of Financial Services



NYS of Health Course Details
Biographical
Address
Attestation Page
Confirmation
Next

Licensee Name: Reynolds, Burt
License Number: 0123456789
Effective Date: 01/17/2019
Expiry Date: 01/16/2021

Approval#	Description	Completion Date	Credits	Exam Credit	Select
NY HX/C	CE 1113 New York SHOP Exchange Certification	09/06/2013	8.0		<input type="checkbox"/>


In order to be certified by the New York State of Health Exchange, producers are required to complete New York State of Health certification course(s) approved by the New York State Department of Financial Services. Only the Health Exchange related courses you completed are displayed above. If no course information is displayed, this process cannot be completed. Information on approved New York State of Health certification courses is available on our website at http://www.dfs.ny.gov/insurance/apbrolk/ab_shop.htm

Next

HELP AND INFORMATION

Portal Help
Visit Us


- On the next screen, confirm your primary email address. Review/edit the information and click *NEXT*.



[Services](#)
[News](#)
[Government](#)
[Local](#)

[Home](#)
[Help](#)
[Logout](#)

Department of Financial Services



NYS of Health Course Details
Biographical
Address
Attestation Page
Confirmation
Previous
Next

Licensee Name: Reynolds, Burt
License Number: 0123456789
Effective Date: 01/17/2019
Expiry Date: 01/16/2021

Name

Last *

First *

Middle

Suffix

License #
DOB

Primary Email *

Confirm Primary Email

Secondary Email

An email address is required by the New York State of Health Exchange. Please make sure the email address entered is valid and current.

Previous

Next

HELP AND INFORMATION

Portal Help
Visit Us

6. Review/edit your mailing address and click *NEXT*.

The screenshot shows the 'Mailing Address' form in the Department of Financial Services Secure Portal. The user is Burt Reynolds, License Number 0123456789, with an effective date of 01/17/2019 and an expiry date of 01/16/2021. The form fields are as follows:

Mailing Address	
Address *	42 Hollywood Blvd.
State *	New York
City *	NEW YORK
Zip *	10128
County *	NEW YORK
Phone#	
FAX	

ALL FIELDS MARKED WITH * ARE REQUIRED
FIELD MARKED WITH ^ ARE NEEDED IF THE STATE IS NEW YORK

The address displayed above is your most recent and current mailing address on file with the Department of Financial Services.
NOTE - this is the address the New York State of Health Exchange will use to contact you. If this address needs to be changed, please select HOME in the upper right hand corner and select Address Change. Once you have completed the address change process, select the NY State of Health Exchange option again to proceed.

Navigation buttons: Previous, Next (highlighted with a red box).

Footer: HELP AND INFORMATION, Portal Help, Visit Us.

7. Attest that all information is complete and accurate. Click *I Accept*.

The screenshot shows the 'Attestation Page' in the Department of Financial Services Secure Portal. The user is Burt Reynolds, License Number 0123456789, with an effective date of 01/17/2019 and an expiry date of 01/16/2021. The page contains the following text:

The Applicant must read the following very carefully:

I hereby certify that, under penalty of perjury, all of the information submitted in this application is complete.

Navigation buttons: I Accept (highlighted with a red box), I Decline.

Footer: HELP AND INFORMATION, Portal Help, Visit Us.

8. Lastly, on the *confirmation screen*, a confirmation number displays and informs them that they will receive an email from NY State of Health inviting them to create a broker account. The email should be received within 24-48 hours after the course registration is complete.

Please Note: The email from the NYSOH will contain an **invitation code** which is necessary in the account creation process. Please copy and paste the invitation code; typing it out tends to cause errors. Also, before creating the NYSOH broker account a **NY.gov ID** (see "How to Create a NY.gov ID" for details).



Department of Financial Services



[NYS of Health Course Details](#) [Biographical](#) [Address](#) [Attestation Page](#) [Confirmation](#)

Licensee Name: Reynolds, Burt

License Number: 0123456789

Effective Date: 01/17/2019

Expiry Date: 01/16/2021

Your confirmation number is 17406.

Thank you for completing the training and registration portion of the New York State of Health Marketplace (Marketplace) certification process. The Marketplace will send you an email within 24 hours, providing instructions and an invitation code to log onto their website to complete the certification process. Please make note of your confirmation number and print this page for reference. Contact the Marketplace at 518-486-1836 if you do not receive your invitation code or if you have any questions.

[Home](#)

HELP AND INFORMATION

[Portal Help](#) [Visit Us](#)