

Learning With Purpose



College and Career Ready

ANAHEIM UNION HIGH SCHOOL DISTRICT

Learning With Purpose: College and Career Ready

Parent Portal

Instructions for Entering Insurance Info

Education and Information Technology Department

A large, abstract graphic at the bottom of the page composed of several overlapping, semi-transparent geometric shapes in shades of blue and grey, creating a modern, architectural look.

2025

Aeries – Insurance Information

Entering Insurance Information

After you have completed the **Data Confirmation** it is important to update your student's **Medical Insurance Information**.

To update your **Insurance Info** click on the **Medical Tab**. Select **Insurance Info**. Click on **Add New Record**.

The screenshot shows the Aeries interface. On the left, a dark blue sidebar contains a menu with 'Medical' (selected), 'Immunizations', and 'Insurance Info' (highlighted with a red box). The main area shows a 'Health Problems' search bar and a large light blue box with the text 'No records found.' and a red-bordered button labeled '+ Add Record'.

1. For your Insurance Coverage enter the **Insurance Carrier**, **Member or Policy ID**, **Group ID***, **Effective Date**, **Subscriber First Name**, and **Subscriber Last Name** in the appropriate fields below. Click on the **Save** icon before you exit the screen.

The 'Add Record' form is shown with several fields and a 'Save' button highlighted in red. Numbered callouts indicate the following fields:

- 1: Insurance Carrier
- 2: Member ID
- 3: Group Number
- 4: Effective Date

Other fields include Insurance Type, Policy Number, Expiration Date, Primary Coverage (toggle), Medicaid (Medi-Cal)? (toggle), Primary Care Provider Name, Primary Care Provider Phone, Subscriber First Name, Subscriber Last Name, Subscriber Street Address, and Subscriber Street Address 2. A 'Cancel' button is also present.

Below the form, a preview of the insurance information is shown, including the Medi-Cal logo, member details, and a disclaimer: 'Providers: Eligibility must be verified at time of service. Failure to obtain authorization may result in non-payment.'

Aeries – Insurance Information

The following is an example of how the screen will look after you click on **Save**.

Health Problems

Add Insurance

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Anthem Blue Cross - Medical Active

Insurance Type	Primary Coverage	Effective Date	Expiration Date	<div style="border: 1px solid black; padding: 10px; margin: 0 auto; width: 150px;"> Policy Number or Member ID and/or Benefits ID </div>
MED - Medical	Yes	1/1/2025	--	
Insurance Carrier	Carrier Name	Policy Number	Member ID	
AL0 - Anthem Blue Cross	--	--	78900000	
Subscriber First Name	Subscriber Last Name	Subscriber Street Address	Subscriber Street Address 2	
Jane	Doe	--	--	
Subscriber City	Subscriber State	Subscriber Zip	Group Number	
--	--	--	123456	
Medicaid (Medi-Cal)?	Benefits ID	Primary Care Provider Name	Primary Care Provider Phone	
No	--	--	--	
Comments				
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*Note: If your insurance card does not have a Group ID number, you can skip that box.