Parent Portal

Instructions for Entering Insurance Info

Education and Information Technology Department

2025

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**.

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

Health Problems

[   ]   Add Insurance   🖶 ▽

Anthem Blue Cross - Medical   (Active)

Insurance Type	Primary Coverage	Effective Date	Expiration Date	✏
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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Policy Number

or

Member ID

and/or

Benefits ID

*Note: If your insurance card does not have a Group ID number, you can skip that box.