

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 sense of depth and movement.

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 sidebar contains a 'Medical' tab with sub-options: 'Immunizations' and 'Insurance Info'. 'Insurance Info' is highlighted with a red box. On the right, the 'Health Problems' section is visible. Below it, a message states 'No records found.' and a red box highlights the '+ Add Record' button.

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

The 'Add Record' form contains the following fields and sections:

- Insurance Type** (dropdown menu)
- Insurance Carrier** (text field, callout 1)
- Group Number** (text field, callout 3)
- Policy Number** (text field)
- Effective Date** (calendar icon, callout 4)
- Expiration Date** (calendar icon)
- Member ID** (text field, callout 2)
- Primary Coverage** (toggle switch, currently on)
- Medicaid (Medi-Cal)?** (toggle switch, currently off)
- Primary Care Provider Name** (text field)
- Primary Care Provider Phone** (text field)
- Comments** (text area with red text: "Please enter the First and Last Name of the Subscriber/Policyholder in the Comments box. Example: Jane Doe")

At the bottom right, there is a **Save** button highlighted with a red box, and a **Cancel** button.

On the right side of the form, there is a summary box for the insurance company (callout 1) and a Medi-Cal logo (callout 2). The summary box includes:

- Insurance company** (callout 1)
- Member name:** Jane Doe
- Member number:** XXX XXX XXX (callout 2)
- Group number:** XXX XXX XXX (callout 3)
- Plan type:** HMO
- Effective date:** 1/1/24 (callout 4)
- PCP<sup>3</sup> copay:** \$15.00
- Specialist copay:** \$15.00
- Emergency room copay:** \$15.00
- Prescription group #:** 123456789
- Prescription copay:** \$15.00 Generic, \$25.00 Name brand
- Member service:** (800) XXX XXXX

Below the summary box is a Medi-Cal logo and a box containing the following information:

- Medi-Cal** (callout 2)
- caloptima.org** (callout 1)
- [MEMBER NAME]**
- Member ID: [CIN]** (callout 2)
- Eff Date: [mm/dd/yyyy]** (callout 4)
- DOB: [mm/dd/yyyy]**
- [HEALTH NETWORK]**
- [HN PHONE]**
- [PCP: PCP NAME]**
- [PCP PHONE]**
- 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

Copy

Add Record

Cigna - Medical

Active

☐

Insurance Type

MED - Medical

Effective Date

1/1/2025

Medicaid (Medi-Cal)?

No

Comments

Jane Doe

Created on: 5/1/2025 3:08:29 PM, Created by:

Insurance Carrier

Cigna

Expiration Date

--

Benefits ID

--

Group Number

CY78YU

Member ID

ABC123

Primary Care Provider Name

--

Policy Number

--

Primary Coverage

Yes

Primary Care Provider Phone

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