

## How to Enter Your Insurance Information on the Patient Portal

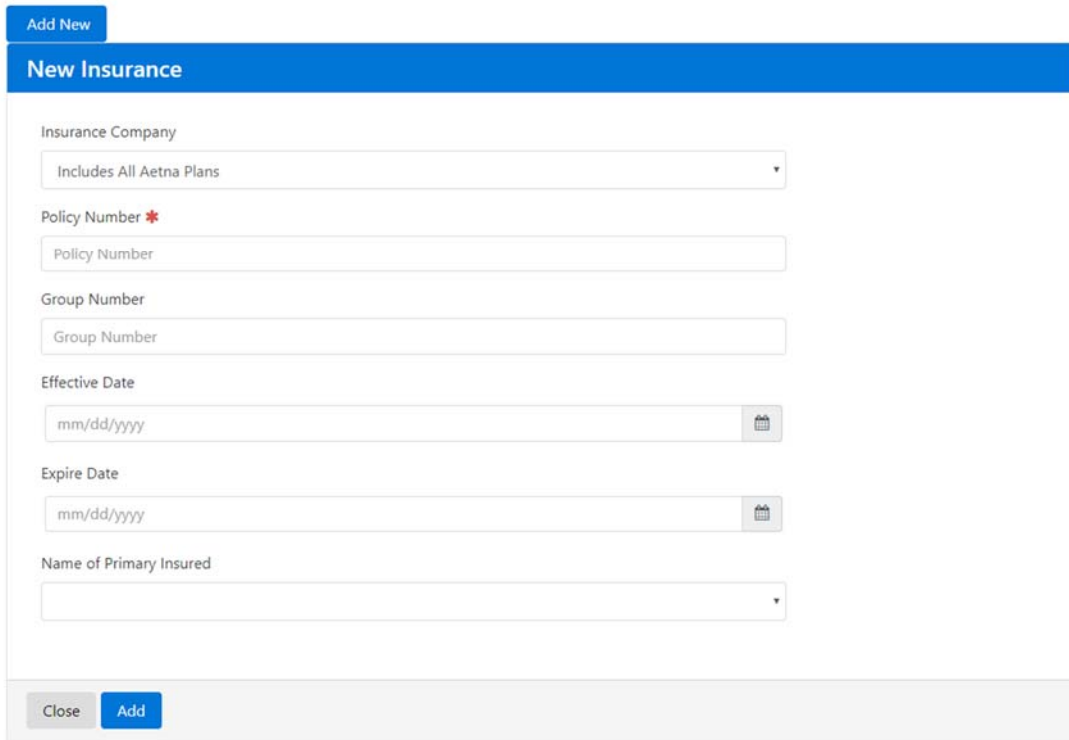
1. Log into the Patient Portal at [myosh.unt.edu](http://myosh.unt.edu) using your EUID and password
2. Click the Insurance link

The screenshot shows the Patient Portal interface. At the top left is the UNT logo and 'STUDENT HEALTH & WELLNESS CENTER Division of Student Affairs'. At the top right are links for 'Locations and Hours' and a user profile 'Patient15 Test'. Below the header is a navigation bar with links for Home, Appointment, Insurance, Forms, Messages, and Statements. The 'Insurance' link is circled in red. Below the navigation bar is a green welcome message: 'Welcome to the UNT Student Health & Wellness Center's On-Line Patient Portal!'. Underneath is a 'To Do List' section with four items: 'Upcoming Appointments' (with a calendar icon and the text 'You do not have any upcoming appointments.'), 'Forms' (with a pencil icon and the text 'You have forms that need to be completed.'), 'Messages' (with an envelope icon and the text 'You have 0 unread message(s).'), and 'Statements' (with a document icon).

3. Click the Add New button

The screenshot shows the Insurance page in the Patient Portal. At the top left is the UNT logo and 'STUDENT HEALTH & WELLNESS CENTER Division of Student Affairs'. At the top right are links for 'Locations and Hours' and a user profile 'Patient15 Test'. Below the header is a navigation bar with links for Home, Appointment, Insurance, Forms, Messages, and Statements. The 'Insurance' link is underlined. Below the navigation bar is a large text box containing the following information:  
Currently, the Student Health & Wellness Center (SHWC) only files to the University-sponsored student health insurance. If you have any other insurance plan, we can provide you with a detailed statement at checkout that you may use to file an out-of-network claim.  
Beginning in Fall 2019, we will be able to file to various other commercial insurance plans, so stay tuned! Until then, please add your insurance information to be kept on file for possible future use. Be sure to include the name of the primary individual who is insured (who's plan is it?), the primary's date of birth, and the plan ID and group numbers.  
If you have questions, please email us at [SHWCInsurance@unt.edu](mailto:SHWCInsurance@unt.edu).  
Below the text box is a blue button labeled 'Add New', which is circled in red. Below the button is the text 'Insurance On File'.

4. You will be shown a screen asking for your insurance information. All the information should be on your insurance card for you to copy.

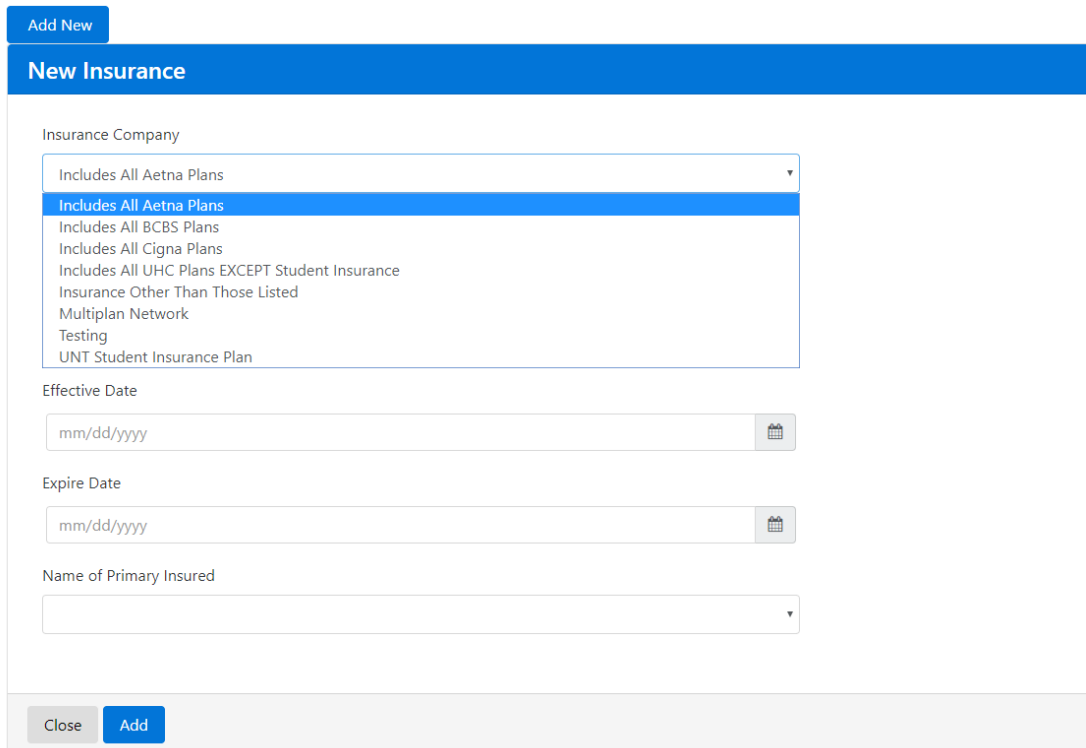


The screenshot shows a web form titled "New Insurance" with a blue header. At the top left is a blue "Add New" button. The form contains the following fields:

- Insurance Company:** A dropdown menu with "Includes All Aetna Plans" selected.
- Policy Number \***: A text input field with "Policy Number" as a placeholder.
- Group Number:** A text input field with "Group Number" as a placeholder.
- Effective Date:** A date input field with "mm/dd/yyyy" as a placeholder and a calendar icon.
- Expire Date:** A date input field with "mm/dd/yyyy" as a placeholder and a calendar icon.
- Name of Primary Insured:** A dropdown menu.

At the bottom of the form are two buttons: "Close" and "Add".

5. Use the drop down menu to select the appropriate Insurance Company, then complete the information fields.



This screenshot shows the same "New Insurance" form, but the "Insurance Company" dropdown menu is open, displaying a list of options:

- Includes All Aetna Plans (highlighted in blue)
- Includes All BCBS Plans
- Includes All Cigna Plans
- Includes All UHC Plans EXCEPT Student Insurance
- Insurance Other Than Those Listed
- Multiplan Network
- Testing
- UNT Student Insurance Plan

The other fields (Policy Number, Group Number, Effective Date, Expire Date, and Name of Primary Insured) remain empty. The "Close" and "Add" buttons are still visible at the bottom.

6. The final question, Name of Primary Insured, is the person who has the insurance plan. This could be you or, if you are under someone else's plan, could be a parent or spouse, etc. Using the drop down menu, select New and enter the Primary Insured's information.

**Add New**

### New Insurance

Insurance Company  
Includes All BCBS Plans

Policy Number \*  
JEA123456789

Group Number  
123456

Effective Date  
03/04/2019

Expire Date  
03/31/2020

Name of Primary Insured  
New

Close **Add**

Name of Primary Insured  
New

#### Name of Primary Insured Information

First Name  
PatientParent

Last Name  
Test

Birth Date  
01/01/1950

Relationship  
Parent

Close **Add**

When selecting Relationship, please note that you are specifying the Primary Insured's relationship to you, e.g., if the Primary Insured is your parent, the Relationship would be Parent.

Name of Primary Insured

- Cadaver Donor
- Child
- Employee
- Former Spouse
- Foster Child
- Grandchild
- Grandparent
- Handicapped Dependent
- Minor Dependent of Minor
- Niece/Nephew
- Organ Donor
- Other
- Parent
- Self
- Sponsor Dependent
- Spouse
- Step Child
- Unknown
- Ward of the Court

7. Click Add when you have entered all your insurance information.

Name of Primary Insured

New

**Name of Primary Insured Information**

First Name

PatientParent

Last Name

Test

Birth Date

01/01/1950

Relationship

Parent

Close **Add**

8. The Insurance tab on the Patient Portal will now list the information you have submitted. The last thing you must do is upload pictures of the front and back of your insurance card. Please note that you can only upload one image at a time.

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Beginning in Fall 2019, we will be able to file to various other commercial insurance plans, so stay tuned! Until then, please add your insurance information to be kept on file for possible future use. Be sure to include the name of the primary individual who is insured (who's plan is it?), the primary's date of birth, and the plan ID and group numbers.

If you have questions, please email us at SHWCInsurance@unt.edu.

[Add New](#)

**Insurances On File**

<p>Includes All BCBS Plans Policy Number: JEA123456789 Effective date of coverage: 3/4/2019</p>	<p>Entered: 4/3/2019 Group Number: 123456</p> <p><b>Upload Card</b></p> <p>Front Back</p>
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9. Select either Front or Back, select your image, and click Upload. Repeat for the other side of the card.

**Insurances On File**

<p>Includes All BCBS Plans Policy Number: JEA123456789 Effective date of coverage: 3/4/2019</p>	<p>Entered: 4/3/2019 Group Number: 123456</p> <p><b>Upload Card</b></p> <p><a href="#">View Front</a> <a href="#">Back</a></p> <p><a href="#">Upload</a></p>
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10. You are finished entering your insurance information when you can see all your insurance information and the links to view the front and back of your insurance card.

[Home](#) [Appointment](#) [Insurance](#) [Forms](#) [Messages](#) [Statements](#)

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Add New

### Insurances On File

**Includes All BCBS Plans**

Policy Number: JEA123456789

Effective date of coverage: 3/4/2019

Entered: 4/3/2019

Group Number: 123456

Upload Card

[View Front](#)

[View Back](#)