# Registering for an Online Account on UMR.com



#### It takes only a few steps to Register for an Account on UMR.com

Please open your web browser and go to umr.com, Chrome works best for the website



Welcome to UMR!

HealthSafe ID\*

#### Secure, convenient sign in.

Use your HealthSafe ID<sup>®</sup> to access your accounts using a single ID and password. Learn more.

Sign in	
Remember my username on this <u>trusted device</u> . (Optional)	
assword	

This will now open a new Secure Window. Do not fill out any information on this page, Just click on the button at the bottom of the page "Register Now"

HealthSafe ID*	
Let's get you registered	
Create your $\underline{\text{HealthSafe ID}}^{\circ}$ to help protect the security of your personal here.	ealth information.
All fields are required unless marked as optional.	
First Name Last Name	]
Date of Birth (mm/dd/yyyy)	]

On the next page you can now enter your

- First Name
- Last Name
- Date of Birth (mm/dd/yyyy)

If you have your Member ID Card, please Enter your ID Number or if you do not have it Enter Your Social Security Number. You will need to also need to know Your Group Number:

Member ID     Social Security Number	Member ID Social Security Number
Member ID	Last 6 digits of Social Security Number
Group or Policy Number	Group or Policy Number
Once the information is entered click "Continue"	Continue

HealthSafe ID<sup>®</sup> We found your HealthSafe ID<sup>®</sup> Your <u>HealthSafe ID<sup>®</sup></u> Username

Remember my username on this <u>trusted device</u> . (Optional)	assword	
Remember my username on this <u>trusted device</u> . (Optionel)		
Remember my username on this <u>trusted device</u> . (Optional)		
	Remember my username on this <u>trusted device</u> . (Optional)	
Sign in		

If the system recognizes that you may already have an account, you will see the image to the left with your Username

If the system recognized that you do not have an account you will see the image to the right. On this page, you will create your own Username and Password. Enter your email address and make sure That the "I agree to the terms" box is selected and click "Continue"

## Set up your account

Create your HealthSafe ID® account by completing the fields b	oelo
All fields are required unless marked as optional.	
Username	
Password	
Email Address	
Remember me on this trusted device. (Optional)	
<ul> <li>I agree to the Terms of Use. Privacy Policy and Consumer Communications Notice.</li> </ul>	
Continue	

# Keep your acount safe

To keep your account secure, please choose a confirmation method.

All fields are required unless marked as optional.	

Confirmation Type
Text Message 🗸 🗸
Text Message
Phone Call
Phone Number
+1 ()
An automated message will be sent to the phone number you provided for account confirmation and recovery purposes, and as noted in the Consumer Communications Notice. Messaging, data rates, and Texting Terms and Conditions. apply.

Text me

For additional Security, the system will ask you for a number to Call or Text for verification

If you select Phone Call, you will receive a call at number you have entered. The system will then give you a code to enter to create your account

If you select Text Message, you will receive a text at the number you have entered. The system will then sent you a code to enter to create your account

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OHECK YOU		messages:

To keep your account secure, please choose a confirmation r	method.
All fields are required unless marked as optional.	
Phone Number	
R	
Confirmation Code	
Create account	
Text me again   Call me instead	

## P Your account has been created

Once your code has been confirmed
you will get confirmation that your
account has been created

You can change your information anytime in Account Settings.	

Username		
Phone Numbe	er	