

My Prairie Online Portal Registration Process

Step 1: Go to www.prairieontheweb.com and select "Member Login"



Step 2: Select "Register Account"



Step 3: Under License Agreement select "Next"



Step 4: If you are the Employee / Member, complete Member Date of Birth, Member Last Name, and Member SSN or Member ID. Select "Next."

Are you a dependent?		
Member Date of Birth:		
Format mm/dd/yyyy		
Member Last Name:		
Member CON or Member ID:		
Member 33N of Member ID.		
Member SSN or Member ID:		

If you are a dependent, check the "Are you a dependent?" box, complete Dependent Date of Birth (DOB), Dependent First Name, Member Date of Birth, Member Last Name, and Member SSN or Member ID. Select "Next."

Member Date of Brith:	Dependent First Name	
Exmest meddlasou	Member Date of Birth:	
Member Last Name:	Member Last Name:	
	nber SSN or Member ID:	
	Member SSN or Member ID:	
SSN or Member ID:		

Step 5: Enter a username, email address, password, and security questions. Select "Next."

Cancel	Previous	Next	
Select Question	*		
Security Question 3			
Delect Chesholl	•		
Security Question 2			
- Select Question -			
Security Question 1			
Confirm Password			
At least 8 characters/Alpha-numeric and special characters - #556&*@~	-12/		
Password			
Personal			
Confirm Email Address			
Plassa anter unir full amail srivines, for avample, nama@vinmain.com			
Email Address			
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I Uncompared would be at least 2 in leastly shad with a latter. Characters accord	and are alaba a maxis (dat) (dash) and Ø		

Continued >



(800) 615-7020

Step 6: Your registration is complete. Confirm your information is correct. Select "Finish."

Your registration is complete. Please confirm the infor	mation below is correct and press the "Finish" button to	finalize the process
Member Information		
Your Name: EMPLOYEE1 TEST		
Address: ANY STREET		
City: ANY CITY		
State: ANY STATE		
Zip: 00000		
Account Information		
Username: psetestlogin		
Email Address: somebody@somewhere.com		
Cancel	Previous	Finish

Welcome to Your Online Portal Homepage!

Through the My Prairie Online Portal, you have access to important information like coverage and benefits, eligibility, current deductible and out of pocket balances, claims, links to networks and prescription benefits, and more. The online portal provides a fast and convenient way to view all the details of your health plan on your computer or mobile device.

						You are currently logged in a	s: EMPLOYEE1 TE
🕖 PRAIF	RESTATES					🞽 MESSAGES 🛈 🎄 PI	ROFILE 🖞 LOGOUT
Home My Ben	efits 🗸 Employee Toolki	t FAQ.s We	Iness Portal H	lealth Cost Manage	r		
Coverage	e Summary				Curre	nt Balances	
Primary Ins	ured: EMPL	OYEE1 TEST			2017	ledical Deductible - In Network	
Effective Da	ate:	Effective	Until:		\$638.37		\$1500.00
Coverage S	tatus: Active	e Group Nu	mber:	TES	2017 M	Nedical Deductible - Out Of Network	
View all Cov	erage & Benefits				\$638.37		\$3000.00
Dependents	5				2017	Medical Out Of Pocket - In Network	
HUSBAND1	TEST View Eligibility				\$861.37		\$2000.00
NINETEEN	TEST View Eligibility				2017 N	Nedical Out Of Pocket - Out Of Network	
DAUGHTER	TEST View Eligibility			_	\$661.37		\$4000.00
SONTEST							
Quick Links							
enefit informatio	n						
amily Account A	Access						
Recent Cla	ims						
Claim Number	r <u>Member</u>	Service Date	Total Charges	s My Respons	<u>ibility</u>	<u>Provider</u>	<u>Claim Status</u>
21704482601	TEST, EMPLOYEE1	2/8/2017	\$5,145.00	\$5,145.00		BURKE PERIODONTICS AND IMPLANT DENTISTRY	Paid
21704482600	TEST, EMPLOYEE1	2/8/2017	\$4,140.00	\$3,230.20		BURKE PERIODONTICS AND IMPLANT DENTISTRY	Paid
21701385200	TEST, EMPLOYEE1	1/20/2017	\$3,370.00	\$0.00		BURKE PERIODONTICS AND IMPLANT DENTISTRY	Paid
21701385201	TEST, EMPLOYEE1	1/20/2017	\$11,090.00	\$0.00		BURKE PERIODONTICS AND IMPLANT DENTISTRY	Paid
21702126800	TEST, EMPLOYEE1	1/13/2017	\$1,195.00	\$354.80		JARED FRISBIE	Paid

