Stay informed about coronavirus (COVID-19)
The latest about your health benefit resources. (English/Espanol)
Getting Started

We want to get to know you
We need just a few more details (you'll want to have your ID card handy). Required fields are marked *.

I do not have an ID card

First name:*  
[ ]

Last name:*  
[ ]

Date of birth:*  
[ ]

Member ID:*  
[ ]

Group number:*  
[ ]

Can't find your member ID or group number?

Verify my account  Cancel

Please Note:
By submitting this registration you are indicating you are the person whose ID number is being used to access information on our system. If you are not, please be advised that the Identity Theft and Assumption Deterrence Act of 1998 makes identity theft a federal crime with penalties up to 15 years imprisonment and maximum fine of $250,000 (Title 18 USC 1028).
Create Your Account

Create your account

Success! We were able to find your member ID and enrollment information in our system. Now, create your account to let us know how we can reach you, and establish a username and password. Required fields are marked *.

Email:*  
[kelly.taylor@metrohealthtrust.com]

Re-enter email:*  
[kelly.taylor@metrohealthtrust.com]

Phone number:*  
[Mobile: 1 7026412160]

Next  Cancel

Dedicated To Security
UMR takes your privacy seriously. We're committed to securing your private information and the information of all our users.

Questions?
Call the number on the back of your ID card if you're a member.

For other user types, see our Contact us page.
Create Username and Password
Must be unique and not the same as other UMR accounts

Username:
EBTdummy1

- Must have one letter
- 8 characters minimum
- Must have one number
- Cannot contain spaces or most special characters

Password:
EBTdummy1

- Must satisfy at least three of the following four conditions: Uppercase characters, Lowercase characters, Numeric (0-9), Non-alphanumeric characters (e.g., ?, %, *, etc.).
- Must contain at least 8 characters.
- Cannot contain the user IDs (i.e., a user's ID in its entirety cannot be a part of the password or the whole password).
- Cannot contain (6 or *).

Re-enter password:
EBTdummy1

Password must match
Create Security Questions

Select and answer the security questions. These questions will be used to verify your identity and keep your account secure. Please note: security answers must be at least 3 characters long and cannot contain the following characters: %, *, /, ?, :, ; & $ #. Answers are case sensitive.

Required fields are marked *.

Question 1:*
What street did you grow up on?
Your answer:*
Street

Question 2:*
In what city was your high school?
Your answer:*
Las Vegas

By submitting your registration information, you indicate you have read the Terms and Conditions and understand UMR's Privacy Policies.

Submit
Verify Your Email

Your email address of kelly.taylor@metrohealthtrust.com has not been confirmed. Please verify your email address to ensure you receive notifications from UMR or update your account settings to make changes.
And Your Done

Kelly Taylor,

Success! Your email address has been confirmed.

Your current preferences are detailed upon login. To change these at any time, visit the Account settings section. Please log in to access your information.

[Close this window]  [Continue to site]