Payment Portal Guide

Step 1:

Visit www.lewermark.com and select your school

Step 2:

Scroll down until you see the shopping cart icon:

Print Your ID Card | Purchase Student Insurance 2019-2020 | Plan Summary 2019-2020 | Plan Brochure 2019-2020

Step 3:

Click on "Purchase Student Insurance"

Step 4:

Select school name

Enter student ID number (If you have used the payment portal before, please use the same student ID number and log in.)

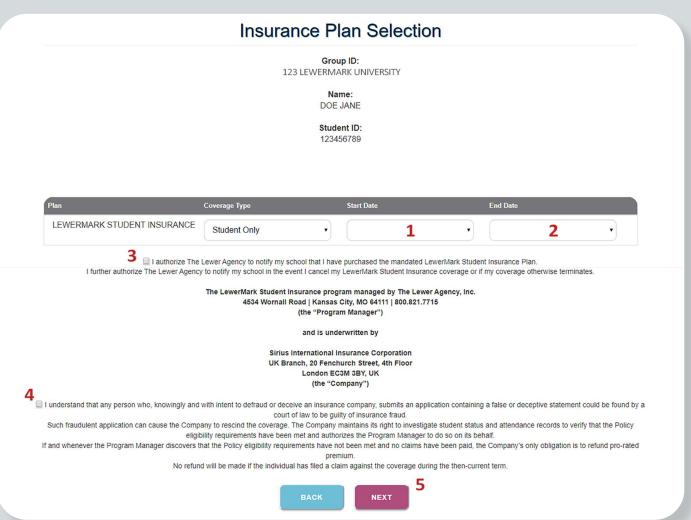**If you are unable to log in, please reset your password and then try logging in again.

Step 5:

Enter student information

New Student Information

Group Number	Student ID: 123456789
Family Name (Last Name)*	Given Name (First Name)*
Date of Birth*	Student Gender*	Visa Status*
Country of Citizenship*		
U.S. Address Line 1 (House number and Street Name)*	U.S. Address Line 2 (Apartment #)	
U.S. City*	U.S. State*	U.S. Zip/Postal Code*
Email Address*	U.S. Cell/Mobile Number*	U.S. School or Work Number

* - Required Field

By clicking Next, I verify this information is true and correct to the best of my knowledge

BACK   NEXT

Step 6:

Select dates of coverage from drop down arrow and check BOTH boxes. Click on "NEXT"

Insurance Plan Selection

Group ID: 123 LEWERMARK UNIVERSITY

Name: DOE JANE

Student ID: 123456789

Plan	Coverage Type	Start Date	End Date
LEWERMARK STUDENT INSURANCE	Student Only	**1**	**2**

3 I authorize The Lewer Agency to notify my school that I have purchased the mandated LewerMark Student Insurance Plan.
I further authorize The Lewer Agency to notify my school in the event I cancel my LewerMark Student Insurance coverage or if my coverage otherwise terminates.

The LewerMark Student Insurance program managed by The Lewer Agency, Inc.
4534 Wornall Road | Kansas City, MO 64111 | 800.821.7715
(the "Program Manager")

and is underwritten by

Sirius International Insurance Corporation
UK Branch, 20 Fenchurch Street, 4th Floor
London EC2M 3BY, UK
(the "Company")

4 I understand that any person who, knowingly and with intent to defraud or deceive an insurance company, submits an application containing a false or deceptive statement could be found by a court of law to be guilty of insurance fraud.
Such fraudulent application can cause the Company to rescind the coverage. The Company maintains its right to investigate student status and attendance records to verify that the Policy eligibility requirements have been met and authorizes the Program Manager to do so on its behalf.
If and whenever the Program Manager discovers that the Policy eligibility requirements have not been met and no claims have been paid, the Company's only obligation is to refund pro-rated premium.
No refund will be made if the individual has filed a claim against the coverage during the then-current term.

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Step 7:

Click on "PAY WITH CARD"

*Amount will vary depending on dates of coverage

**Payment needs to be made with a U.S. Mailing Address

Plan Selection Confirmation

Group ID: 123 LEWERMARK UNIVERSITY

Name: DOE JANE

Student ID: 123456789

Plan	Coverage Type	Start Date	End Date	Plan Cost
LEWERMARK STUDENT INSURANCE	Student Only	January 21st, 2020	May 15th, 2020	$345.67
			Total:	$345.67

Payment Terms: I authorize The Lewer Agency, Inc. to initiate an electronic payment for the amount specified above.
Please note: once the payment is authorized, there cannot be any changes. Your bank/credit card statement will show a charge by Lewer.

BACK   PAY WITH CARD

Have questions? Contact us at:
1(800) 821-7715 | lewermarksupport@lewer.com
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