

Please return the completed form to:

Healthplex Inc., Member's Services, 333 Earle Ovington Blvd, Suite 300 Uniondale, NY 11553 T: 800.468.0466 healthplex.com

EMPLOYER/ADMINISTRATOR LOG-IN REGISTRATION FORM

Registration

- A Primary User Name is the Administrator that will have access to all functionality of the Healthplex website specific to your group data.
- The Log-In (User) Name is not case sensitive.
- Healthplex will notify you when access to the website is granted.
- Please return this completed form to our Web Support Department at sales@healthplex.com.

General Information	
Group Name	
Group #	
Main Contact	Phone #
Email Address	Date Submitted
Specify Log-In Information	
Log-In (User) Name	
Alternate User Name	
Please use 4-9 characters, letters and numbers only.	
Password	
Password must be 8 or more characters and contain 3 o	of the following character types: lowercase, uppercase, number, special character.
Access Levels*	
*The Employer/Administrator is the only perso log-ins and passwords.	on who can authorize access levels and the addition/termination of
☐ View Member Info Only** ☐ Add,	/Terminate/Update Member Info**
** Please select one.	

Please use the reverse side to assign group users to your online account. If additional user access is needed, attach additional registration form(s).

Please be advised that it is **your responsibility to notify Healthplex immediately**, in writing, by email, of the termination of any employee, or revocation of an individual's authority to have access to our website. Upon proper notification, Healthplex will remove the individual(s) from the permitted access list and delete the individual's password from its website.

Further Assistance

If you have any questions regarding website use or need assistance logging in, please contact our Web Support Department at 1-800-468-0466.



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Group User Log-In Information
Log-In (User) Name
Alternate User Name
Please use 4-9 characters, letters and numbers only.
Password
Password must be 8 or more characters and contain 3 of the following character types: lowercase, uppercase, number, special character.
Access Levels*
The Employer/Administrator is the only person who can authorize access levels and the addition/termination of log-ins and passwords.
☐ View Member Info Only**
Add/Terminate/Update Member Info**
Pay Bill
* Please select one.
Group User Log-In Information
Employee Name
Primary User Name
Alternate User Name
Please use 4-9 characters, letters and numbers only:
Password
Password must be 8 or more characters and contain 3 of the following character types: lowercase, uppercase, number, special character.
Access Levels*
*The Employer/Administrator is the only person who can authorize access levels and the addition/termination of log-ins and passwords.
☐ View Member Info Only**
Add/Terminate/Update Member Info**
Pay Bill

** Please select one.

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