

Life and Disability administration tools

Easy, secure ways to manage life and disability benefits online

Access the tools you need to administer your life and/or disability plans online. You can add new employees, terminate employee coverage, pay your bill, access claim reports, and more.

Administer your plan with Compassi online employer self service¹

Use Compassi to view billing statements and employee coverage information online. The secure self-service tool also allows you to²:

- View Life and Disability plan information
- Add or terminate employees
- View and update employee demographic data and coverage details
- Add or terminate lines of coverage to existing members
- View and download Excel or PDF version of billing invoice
- Pay your bill (list billed groups only) via link to Pay and View My Bill. The payment system requires a separate login.

Self administered groups can upload self bill worksheets.

Pay your bill with MyOnlineBill

Use this tool to view bills and make payments online. We can automatically withdraw funds from your bank account to pay your plan premium.

You can log on every month to pay your bill or set up recurring payments.

Access life and disability reports³

You can access life and disability reports online. Reports include:

- Life and Disability Experience Summary Reports
- Life and Disability Claims Detail Reports
- Group Statistics Reports for Disability Claims
- Group Statistics Reports for Life Claims
- Group Advice to Pay Report
- Group Paid Claims Report.

Receive Evidence of Insurability (EOI)/Medical Evidence Underwriting Communications and Reports

To help you stay current and know when to update payroll deductions, you can sign up to receive copies of letters sent to your employees about their life and disability underwriting, as well as status reports via email. You can choose to receive status reports weekly or monthly.

For more information, contact:

- AL-E&BSupport@standard.com for questions about Compassi Employer Self Service, reports, and Online Bill Pay.
- AL-MedicalUnderwriting@standard.com for questions about Evidence of Insurability (EOI)/Medical Evidence Underwriting Communications and Reports.

¹ Eligibility and access may vary. Not applicable for groups using electronic enrollment files.

² Only available for list billed groups.

³ Not available for any state or federal leave administration product.

Life and Disability Administration Services Registration Form and User Agreement

Complete all details for each user below and email this completed, signed agreement to AL-E&BSupport@standard.com.

Company Name	
Group Number(s)	
Bill Group/Sub Group	
Address	
City	
State	
Zip	

Please list users/operators in your groups who will have access. Fill out all information for each user; add additional sheets as needed.

User 1			
First Name/Last Name		Title	
Email		Daytime Phone	
Compassi access details			
<input type="checkbox"/> This user should have the same Compassi access for all Bill Groups (please only fill out one Bill Group section below)			
Select only one level of access (Full Member Access, View Member Access, or Self-bill Access)			
Bill Group	<input type="checkbox"/> Full Member Access <i>Full edit access to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> View Member Access <i>No ability to make any changes to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> Self-bill Access <i>Self-bill groups only have the ability to upload self-bill worksheets to the portal</i>
Bill Group	<input type="checkbox"/> Full Member Access <i>Full edit access to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> View Member Only <i>No ability to make any changes to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> Self-bill <i>Self-bill groups only have the ability to upload self-bill worksheets to the portal</i>
Bill Group	<input type="checkbox"/> Full Member Access <i>Full edit access to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> View Member Only <i>No ability to make any changes to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> Self-bill <i>Self-bill groups only have the ability to upload self-bill worksheets to the portal</i>
Claims Reporting Access	<input type="checkbox"/> Give access to Employer Claims Reporting Option: <input type="checkbox"/> Give this User access to Paid Claim Reports	<input type="checkbox"/> Give access to all Bill Groups and Member Classes OR <input type="checkbox"/> Give access to only these Bill Groups and Member Classes (list Bill Groups and Member Classes):	
Experience Reporting	<input type="checkbox"/> Give access to Experience Reporting		
Evidence of Insurability (EOI)/Medical Evidence Underwriting communications and reports details.			
EOI/MEU communications and reports	Receive copies of letters sent to employees and dependents <input type="checkbox"/> All <input type="checkbox"/> Final Status Only <input type="checkbox"/> None	MEU Status Reports <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> None	

User 2			
First Name/Last Name		Title	
Email		Daytime Phone	
Compassi access details			
<input type="checkbox"/> This user should have the same Compassi access for all Bill Groups (<i>please only fill out one Bill Group section below</i>)			
Select only one level of access (Full Member Access, View Member Access, or Self-bill Access)			
Bill Group	<input type="checkbox"/> Full Member Access <i>Full edit access to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> View Member Access <i>No ability to make any changes to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> Self-bill Access <i>Self-bill groups only have the ability to upload self-bill worksheets to the portal</i>
Bill Group	<input type="checkbox"/> Full Member Access <i>Full edit access to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> View Member Only <i>No ability to make any changes to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> Self-bill <i>Self-bill groups only have the ability to upload self-bill worksheets to the portal</i>
Bill Group	<input type="checkbox"/> Full Member Access <i>Full edit access to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> View Member Only <i>No ability to make any changes to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> Self-bill <i>Self-bill groups only have the ability to upload self-bill worksheets to the portal</i>
Claims Reporting Access	<input type="checkbox"/> Give access to Employer Claims Reporting Option: <input type="checkbox"/> Give this User access to Paid Claim Reports	<input type="checkbox"/> Give access to all Bill Groups and Member Classes OR <input type="checkbox"/> Give access to only these Bill Groups and Member Classes (<i>list Bill Groups and Member Classes</i>):	
Experience Reporting	<input type="checkbox"/> Give access to Experience Reporting		
Evidence of Insurability (EOI)/Medical Evidence Underwriting communications and reports details.			
EOI/MEU communications and reports	Receive copies of letters sent to employees and dependents <input type="checkbox"/> All <input type="checkbox"/> Final Status Only <input type="checkbox"/> None	MEU Status Reports <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> None	
User 3			
First Name/Last Name		Title	
Email		Daytime Phone	
Compassi access details			
<input type="checkbox"/> This user should have the same Compassi access for all Bill Groups (<i>please only fill out one Bill Group section below</i>)			
Select only one level of access (Full Member Access, View Member Access, or Self-bill Access)			
Bill Group	<input type="checkbox"/> Full Member Access <i>Full edit access to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> View Member Access <i>No ability to make any changes to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> Self-bill Access <i>Self-bill groups only have the ability to upload self-bill worksheets to the portal</i>
Bill Group	<input type="checkbox"/> Full Member Access <i>Full edit access to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> View Member Only <i>No ability to make any changes to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> Self-bill <i>Self-bill groups only have the ability to upload self-bill worksheets to the portal</i>
Bill Group	<input type="checkbox"/> Full Member Access <i>Full edit access to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> View Member Only <i>No ability to make any changes to member data</i> Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> Self-bill <i>Self-bill groups only have the ability to upload self-bill worksheets to the portal</i>

Claims Reporting Access	<input type="checkbox"/> Give access to Employer Claims Reporting Option: <input type="checkbox"/> Give this User access to Paid Claim Reports	<input type="checkbox"/> Give access to all Bill Groups and Member Classes OR <input type="checkbox"/> Give access to only these Bill Groups and Member Classes (<i>list Bill Groups and Member Classes</i>):	
Experience Reporting	<input type="checkbox"/> Give access to Experience Reporting		
Evidence of Insurability (EOI)/Medical Evidence Underwriting communications and reports details.			
EOI/MEU communications and reports	Receive copies of letters sent to employees and dependents <input type="checkbox"/> All <input type="checkbox"/> Final Status Only <input type="checkbox"/> None	MEU Status Reports <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> None	
User 4			
First Name/Last Name		Title	
Email		Daytime Phone	
Compassi access details			
<input type="checkbox"/> This user should have the same Compassi access for all Bill Groups (<i>please only fill out one Bill Group section below</i>)			
Select only one level of access (Full Member Access, View Member Access, or Self-bill Access)			
Bill Group	<input type="checkbox"/> Full Member Access Full edit access to member data Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> View Member Access No ability to make any changes to member data Option: <input type="checkbox"/> Hide Bills	<input type="checkbox"/> Self-bill Access Self-bill groups only have the ability to upload self-bill worksheets to the portal
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If you need to deactivate a user in the future, simply email AL-E&BSupport@standard.com

Only complete this section if you requested automatic recurring bill payments (EFT)

Recurring Automatic bill payments (EFT) (only available for list billed groups) – for assistance email AL-E&BSupport@standard.com.

Premium Payment Authorization form

Recurring Automatic Payments through Electronic Funds Transfer (EFT)

Enrollment Information

Section 1: Enrollment information

Enrollment type	<input type="checkbox"/> New Account <input type="checkbox"/> Existing account – Group number: Bill Group Number, if not all:
Requested effective date - submit 30 days prior	(MM/DD/YYYY)
Please select a Draft Day between the 1 st – 14 th of the month	
Paperless billing	<input type="checkbox"/> Yes <input type="checkbox"/> No
Sole Billing Contact Name	
Sole Billing Contact phone number	
Sole Billing Contact email address	

Section 2: Financial institution information

Financial Institution	
9 digit ABA/routing no.	
Account no.	
Account type	<input type="checkbox"/> Business checking <input type="checkbox"/> Business savings <input type="checkbox"/> Personal checking <input type="checkbox"/> Personal savings

Please attach a voided check/scan of a voided check to ensure accuracy.

Authorization

This authorization will remain in full force and effect until written notification to cancel is received from customer with at least 30 days notice to act. Customer will receive notification at least 10 days prior to each action with the applicable amount and date information. By signing below on page 8, I (we) hereby authorize the initiation of debit entries of premiums or any other related payments to our account. I also understand if changes I make to my auto withdrawal amount are processed close to the withdrawal date, The Insurance Company may not be able to notify me of the new auto withdrawal amount before the withdrawal is made.

User Agreement between Anthem Life and End User of Anthem Life Application

Compassi Employer Self Service, Employer Claims Reporting/Status Check Application, Experience Reporting

1. Definitions

- 1.1. Anthem Life means Anthem Life Insurance Company, Anthem Life & Disability Insurance Company, and Greater Georgia Life Insurance Company.
- 1.2. Agreement means this End User Agreement.
- 1.3. Application means any of the on-line bill pay, claims reporting or status check, or experience reporting services offered to Employers by Anthem Life to assist Employers in submitting, viewing, creating or changing membership information, or similar functions and submitting, viewing or checking status on member claims information, or premium payment information, or similar functions.
- 1.4. Documentation means the Application(s) and the written and printed materials in all media pertaining to such Application.
- 1.5. End User means a Employer or their designated agent, who desires to access an Application pursuant to the terms of this Agreement.
- 1.6. Member means those individuals who are eligible to receive covered services under a group life and/or disability benefit plan issued or administered in whole or in part by Anthem Life.
- 1.7. Operators means those individuals who are employees or agents or are otherwise acting exclusively on behalf of an End User accessing an Application(s).
- 1.8. Operator Keys means the security protocols of Anthem Life used to identify Operators and control access to an Application(s).
- 1.9. Designated Agents means those persons accessing an Application(s) for more than one End User (e.g., clearinghouses, practice management vendors or billing agents). A Designated Agent can be an individual or it can be a processing center employing several individuals, each of whom would be considered an Operator of the Designated Agent. Designated Agents must be separately designated by each End User on whose behalf the Designated Agent is accessing an Application.
- 1.10. Recognized Devices means those computers under the exclusive control of the End User (and/or its Designated Agent).
- 1.11. Site Administrators means those persons employed by, agents for or otherwise acting on behalf of the End User who are responsible for administration at the End User's site.

2. Scope of Agreement

- 2.1. Parties. This Agreement is by and between Anthem Life and End User. Anthem Life grants End User a non-exclusive, non-transferable, revocable, limited-use license to access the selected Application(s) set forth in this Agreement, including the online bill pay, Compassi Employer Self Service Application and the Application(s) set forth in the *Compassi User Manual* for End User's legitimate business purposes in providing services to Members. End User may request access for its Operators and/or its Designated Agents (e.g., clearinghouses, practice management vendors or billing agents), which access shall be provided and utilized in accordance with this Agreement.
- 2.2. Protecting Confidential Information. Member information, of any nature and in any format, along with all other sensitive or proprietary information obtained from Anthem Life is confidential information. End User represents and warrants that it has implemented and will enforce adequate policies and procedures to protect the confidentiality of Confidential Information as required by applicable laws, rules, and regulations. End User shall not use or disclose any Confidential Information except as expressly authorized in this Agreement or as required by applicable law. End User further represents and warrants that it shall comply with all applicable privacy and confidentiality laws, regulations and rules pertaining to the use, disclosure and transmission of Confidential Information. End User must notify Anthem Life as soon as possible, but no later than the next business day, after learning of any unauthorized access to, disclosure of or use of any Confidential Information and cooperate with Anthem Life to regain possession of the information.
- 2.3. Restricting Access. End User (and/or its Designated Agent) shall, directly, or through its Designated Agent, if applicable, restrict access to an Application to its authorized Operators. End User (and/or its Designated Agent) shall ensure that each Operator has access to only those records of the End User which such Operator must access for legitimate business purposes of the End User in serving End User's Members/patients who are enrolled in a health care plan offered or administered by Anthem Life. Operators shall access an Application(s) solely on behalf of End User's Members/patients. Such access shall be on a need-to-know basis and only in accordance with this Agreement, applicable laws, rules, and regulations.
- 2.4. Indemnification. End User directly or through its Designated Agent shall defend, indemnify, and hold harmless Anthem Life, and their respective direct and indirect subsidiaries, joint ventures, partnerships and other corporate arrangements, and each of their officers, directors, shareholders, agents and assigns from and against all claims, expenses (including reasonable attorneys' fees), damages, and liabilities arising or alleged to arise from End Users, Designated Agents, and their respective Operators and agents access of Application(s) or wrongful, unlawful or unauthorized access of an Application(s), or any breach of this Agreement. In addition, End User agrees on behalf of itself and its Designated Agent that Anthem Life shall have the right to obtain equitable relief from a court of competent jurisdiction as Anthem Life may deem necessary or appropriate to prevent or stop any unlawful or unauthorized actions.
- 2.5. Internet Connectivity. End User must provide its own Internet Service connectivity directly, or through its Designated Agent.
- 2.6. Non-disclosure of Proprietary Information. End User acknowledges and agrees that Documentation is the proprietary and intellectual property of Anthem Life. Except for disclosure to Site Administrators and Operators necessary to the End User's use of an Application(s),

End User shall not disclose, sell, use, reengineer or re-license the Documentation for any purpose. End User acknowledges and agrees that any unauthorized use or disclosure of Anthem Life's proprietary and intellectual property would cause Anthem Life irreparable harm that could not be fully remedied by monetary damages. End User, therefore, agrees that Anthem Life shall have the right to obtain such injunctive or other equitable relief as may be necessary to prevent unauthorized or unlawful action.

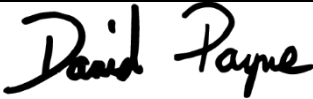
- 2.7. Appointment of Site Administrators. End User agrees to appoint one or more Site Administrator(s) as Anthem Life and End User mutually agree are necessary for the administration by End User. The initial Site Administrator(s) shall be specified on this Access Request Form. End User shall notify Anthem Life immediately when End User must change the initial Site Administrator(s) information by completing and submitting the applicable sections of the Access Change Form to Anthem Life. End User agrees to provide any information regarding Site Administrators reasonably requested by Anthem Life. End User represents that each Site Administrator shall have the authority to make decisions on behalf of the End User.
- 2.8. Responsibility of Site Administrator. End User acknowledges and agrees that, as between it and Anthem Life, End User is solely responsible for any and all actions of its Site Administrators, Operators and Designated Agent(s) and its/their Operators.
- 2.9. Canceling Operator Keys. End User shall ensure that the Site Administrator(s) notify Anthem Life in writing within two business days to cancel an Operator Key when the Operator to whom it was assigned has been dismissed, transferred, or is otherwise no longer authorized to access one or more Applications.
- 2.10. Notification of Change in Designated Agent/s. End User must promptly notify Anthem Life in writing upon appointing a Designated Agent, changing its Designated Agent or upon discontinuing its use of its Designated Agent, and must supply all information requested by Anthem Life pursuant to such appointment, change, or discontinuance.
- 2.11. Notice of Change in Operator, Site Administrator or Designated Agents. If at any time during the term of this Agreement the End User elects to: (a) change its Operator(s) (including hiring new employees who will be Operators or terminating one of its Operators or canceling the access of one of its Operators); (b) change any of its Site Administrator(s) information; or (iii) change its Designated Agent (including the retaining of a different Designated Agent or the cancellation of the Designated Agent), the End User must agree to the applicable portions of the User Agreement and notify Anthem Life. No Designated Agent may access an Application until such forms are accepted and approved by Anthem Life and all applicable Operator Keys are issued.
- 2.12. Proper Use and Non-Transferability of Operator Keys. End User acknowledges Operator Keys are unique to each individual Operator and agrees it must ensure proper use of all Operator Keys assigned to its Operators. Operator Keys are nontransferable. End User must request a separate Operator Key for each Operator by submitting each Operator's contact information to Anthem Life in writing in a manner acceptable to Anthem Life. End User agrees to implement and enforce policies and procedures to ensure that Operator Keys are disclosed only to the individual Operator to whom such Operator Key is assigned. End User also shall implement policies and procedures to ensure that no person other than Site Administrators and Operators have access to an Application(s).
- 2.13. Use of Anthem Life Group Number. End User shall implement and enforce policies and procedures to ensure that all End User's transactions and all communications from End User to Anthem Life include the End User's Anthem Life Group Number(s). The End User's tax identification number(s) is/are set forth as part of this Agreement.
- 2.14. Anthem Life Provides Applications "AS IS" without warranties of any kind. All implied warranties are hereby disclaimed to the fullest extent permitted by law. Under no circumstances shall Anthem Life be liable to End User (including, but not limited to, its Site Administrators, Operators or its Designated Agent and its Operators) or any third party for damages of any kind.

3. General Provisions

- 3.1. Assignment. This Agreement is binding upon the parties, their successors and assignees.
- 3.2. Termination. This Agreement may not be assigned without Anthem Life's written consent. Anthem Life has the right to terminate access to an Application(s) by End User, any Operators, and/or End User's Designated Agent and its Operators immediately and without notice if Anthem Life reasonably believes that any of them breaches the terms of his or her respective agreements or if necessitated by concerns for the security of Application(s). Anthem Life may otherwise terminate this Agreement upon 10 days' written Notice. Any liabilities or obligations set forth in this Agreement that remain to be performed, or by their nature would be intended to be applicable following any such termination will survive termination of the Agreement.
- 3.3. Entire Agreement. This Agreement, together with all of the Forms and Attachments hereto, which are deemed incorporated by reference herein, represents the entire agreement between End User and Anthem Life and supersedes all prior and contemporaneous agreements or representations between the parties regarding the subject matter hereof.
- 3.4. Modifying the Agreement. Anthem Life reserves the right to modify this Agreement upon 15 days' notice to End User (Anthem Life may modify this Agreement by only the posting of modification(s) to this Agreement to its site, although Anthem Life may provide notice by other means as well); however, End User may notify Anthem Life within the 15 day period that the modification is unacceptable, and Anthem Life will discontinue End User's access to Applications. End User may not modify this Agreement unless the modification is in writing and signed by Anthem Life.
- 3.5. Governing Law. This Agreement will be construed in accordance with and governed by the laws of the State of Oregon without regard to its conflict of laws rules.

- 3.6. Waiver. All disputes arising from or relating to this Agreement shall be subject to the laws of Oregon.. Anthem Life's waiver or failure to claim breach of any provision of this Agreement will not be a waiver of a breach of any other provision or subsequent breach of the same provision.
- 3.7. Descriptive Headings. The headings contained in this agreement are for reference purposes only and shall not affect in any way the meaning or interpretation of this Agreement.
- 3.8. Accuracy of Data. End User represents that all data submitted through the application is true and accurate to the best of their knowledge and understands that it is being relied on by Anthem Life in accepting, creating or updating membership information. Any misstatements or failure to report medical information prior to effective dates may result in a material change to coverage or premium rates. Any material misrepresentation or significant omission found may result in denial of benefits or rescission or cancellation of coverage.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement effective as of the day and year stated below.

Anthem Life	
Authorized Representative	David Payne
Signature	
Title	President
Date	

Employer Group Name	
Authorized Officer CEO, CFO, President, Vice President, etc.	
Signature	
Title	
Date	

Life and Disability products are underwritten by Anthem Life Insurance Company. In Georgia, Life and Disability products are underwritten by Greater Georgia Life Insurance Company using the trade name Anthem Life. In New York, Life and Disability products are underwritten by Anthem Life & Disability Insurance Company. Anthem is a registered trademark of Anthem Insurance Companies, Inc.