

Access Your Flex Administrators Dental/Vision Reimbursement Account online

You can create your account to have access to your claims and your Flex Administrators Dental/Vision Reimbursement account balance online.

To create new username and password go to: <https://flexadministrators.lh1ondemand.com/Login.aspx?ReturnUrl=%2f>

Under “New User?” Click on Create your new username and password

Existing User?

Login to your account

Username [Forgot Username?](#)

Password [Forgot Password?](#)

Login

Setting up a New Account?

It's easy to apply for a new account. Click "Get Started" below to begin.

Code

Get Started

New User?

[Create your new username and password](#)

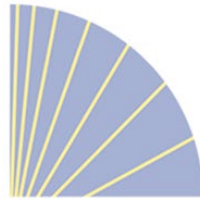
Employee with FSA Health Care or Dependent Care:

If you were enrolled previously in Flex Spending-Health Care or Dependent Care Account and you have created an account and logged in previously to Flex Administrators, you will continue to use the same username and password. If you don't remember your username or password, under Existing User-Select Forgot User Name or Forgot Password. If you need login assistance, please contact Flex Administrators at:(616) 456-7908 or email: service@flexadministrators.com

User Identification Set Up:

New User: Enter First Name, Last Name, Zip and SSN (Do not enter Employee ID) and select Next

If you do not want to enter your SSN, you will need to contact Flex Administrators for assistance, please contact Flex Administrators at: (616) 456-7908 or email: service@flexadministrators.com



FLEX ADMINISTRATORS

User Identification (Step 1 of 3)

Complete the information below to verify your identity.

*Required

First Name*

Last Name*

Zip Code*


SSN or ~~Employee ID*~~

 - -

-- OR --

Next

Security Questions Set Up:



Security Questions (Step 2 of 3)

Please enter an answer to any 3 security questions to complete your user setup. To keep your information secure, you will be asked to answer 3 of these questions to complete sensitive actions within the portal such as resetting a forgotten password. *Required

Select a question... <small>▼</small> *	<input type="text"/>
Select a question... <small>▼</small> *	<input type="text"/>
Select a question... <small>▼</small> *	<input type="text"/>

Answer security questions and select next

The last step is to set up your password:



Create Username and Password (Step 3 of 3)

*Required

Username*

Your username may contain alphanumeric characters and any of the following special characters: period (.), at sign (@), underscore (_), and dash (-).

Password*

The password must: · Have a minimum of 6 characters · Not be one of your last 3 passwords · Contain upper and lowercase letters · Contain at least one number

Confirm Password*

When going through the account registration process, an auto-generated username is displayed. Please make sure the username does not have any part of your Social Security Number (even the last four) as this could be a potential security issue for individuals. You should be able to change the auto-generated username, if you need login assistance, please contact Flex Administrators at: (616) 456-7908 or email: service@flexadministrators.com

Once you have entered your password, select submit and you will have access to your Flex Administrators Dental/Vision Reimbursement Account.