

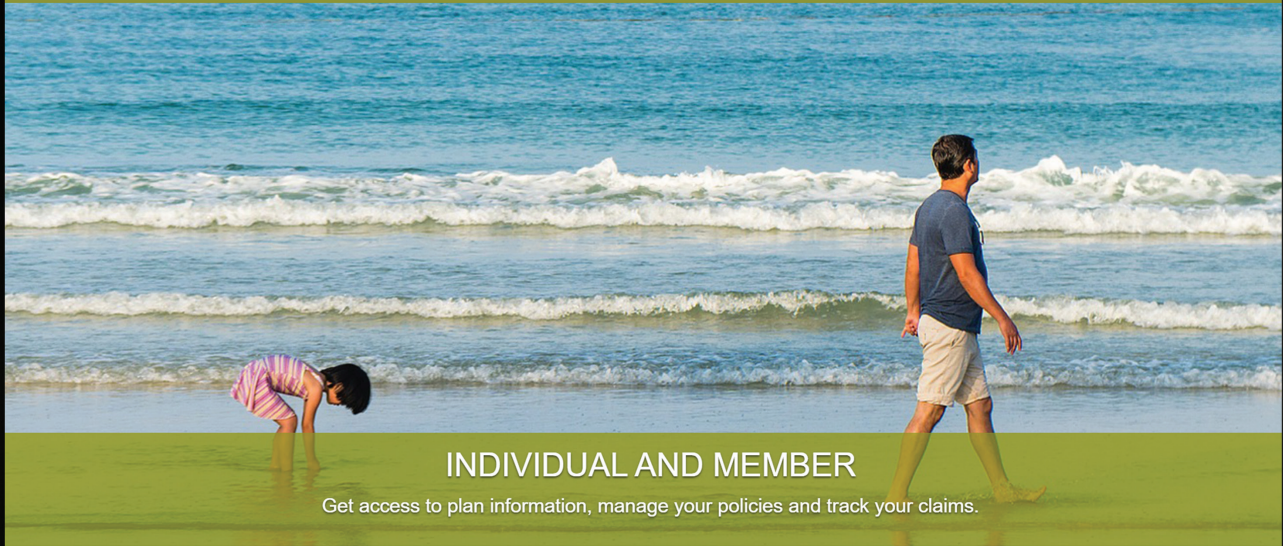
Individual & Member Portal Guide

For Life & Health Products



[Submit Your Inquiry](#) [Contact Us](#) [Log In](#) [Register](#)


Home



INDIVIDUAL AND MEMBER

Get access to plan information, manage your policies and track your claims.

Welcome to the self-service portal for clients of Forrest T. Jones & Company (Forrest T. Jones Consulting Company in AZ), a nationally licensed insurance third-party administrator.

 **1-866-809-3899**

<https://ryan.seemyinsurance.com>

#8446 0920



Customer Service: **1.866.809.3899**

Contents

1	Go to Website	3
	How to Register	4
	Personal Information	5
	Login & Security Information	6-8
	Language Preference	9
2	Returning Individual/Member Log-In	10-11
	Navigating My Insurance	12
3	Update Personal Information	13
4	Policy Details	14
	Life & Health Products	15-16
5	View Billing/Payments	17
	Billing Payment Details: Life & Health Products	18
6	Change Your Bank Account	19
7	Wallet Section: Change Bank Account	20
	8	Income Reporting Form:.....

The portal is best viewed using **Chrome**.

On all pages, you must click the action button (e.g. **NEXT, Retrieve**) to execute the command. Hitting the ENTER key will not execute the command on any page in the portal.

Go to Website

RYAN INSURANCE
STRATEGY CONSULTANTS
Protecting Your Financial Plans Since 1978

Submit Your Inquiry Contact Us Log In Register

Home

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We've been contracted to provide administrative services for one or more of your insurance products; which are accessible through this portal. If you have any questions or require assistance, please contact us at 1.800.821.7303.

1-866-809-3899

How to Register

01 If you are new to the Portal, you will need to register. Start by clicking **Register**.

Register



Home



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 **1-866-809-3899**

Personal Information

The information on this registration screen must match our records. If you get an error on this page or you don't know all the information contact Customer Service for assistance.

Home

Register Now ?

1. Personal Information **3. Preference Information**

Personal Information (* required field)

* **User Type(s)**

* **First Name**

* **Last Name**

* **Date of Birth (mm/dd/yyyy):**

* **SSN / Government Identifier**

Member Identifier/Policy Number

Member Identifier/Policy Number

01 This field must match your certificate or policy number. Certificate and policy numbers are 10 digits. If you have a shorter number (e.g., 9000999), add zeros to the front to get to ten digits (e.g. 0009000999).

02 All information must be exactly what is on file.

Next

Log-In & Security Information (cont.)

My Profile

Personal Information

First Name

MARY JANE

Last Name

SMITH

Date of Birth (mm/dd/yyyy):

06/24/1980

SSN / Government Identifier

XXX-XX-1234

User ID

mjs_123456

Current Password

.....

User ID

mjs_123456

Current Password

.....

New Password

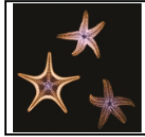
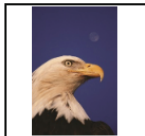
Confirm Password

.....

Security Image

* Category

Animal



* Security Phrase

seal



User ID is a mix of 8 to 20 letters, numbers or the underscore (_) character



Password is a mix of 8 to 20 letters, numbers or these special characters
! , _ - % () - ? [] ` ~)

What was your childhood nickname?

* Answer 1

* Security Question 2

What is the name of your favorite chil

* Answer 2

* Security Question 3

What is the name of your oldest friend?

* Answer 3

* Please enter displayed security code



Can't read the code? Click to refresh

Log-In & Security Information (cont.)

My Profile

Personal Information

First Name MARY JANE	Date of Birth (mm/dd/yyyy): 06/24/1980
Last Name SMITH	SSN / Government Identifier XXX-XX-1234
	Agent Number

User ID
mjs_123456

Current Password
.....

New Password

Confirm Password

Security Image

* **Category**
Animal

* **Security Question 1**
What was your childhood nickname?

* **Answer 1**

* **Security Question 2**
What is the name of your favorite chil

Answer 2

* **Security Question 3**
What is the name of your oldest friend?

* **Please enter displayed security code**

* **Security Phrase**
seal

* **Security Phrase**
seal

01 Pick a Category.

02 Pick a photo.

03 Create a Phrase to describe your image.

Log-In & Security Information (cont.)

My Profile

Personal Information

First Name
MARY JANE

Date of Birth (mm/dd/yyyy):
06/24/1980

Last Name
SMITH

SSN / Government Identifier
XXX-XX-1234

Agent Number

User ID
mjs_123456

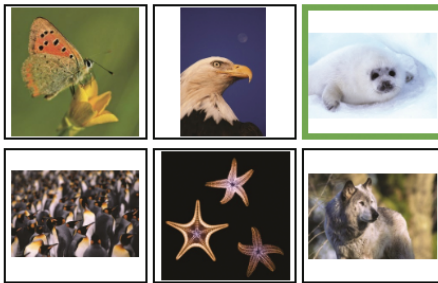
Current Password
.....

New Password

Confirm Password

Security Image

*** Category**
Animal



*** Security Phrase**
seal

*** Security Question 1**
What was your childhood nickname? ▼

*** Answer 1**

*** Security Question 2**
What is the name of your favorite chil

*** Answer 2**

*** Security Question 3**
What is the name of your oldest friend? ▼

*** Answer 3**

01 Select & answer three Security Questions.



02 Enter the displayed Security Code.

Preference Information

Register Now ?

1. Personal Information 2. Login & Security Information 3. Preference Information

Preferred Language

English

mm/dd/yyyy

Previous Submit Cancel

Submit

01 Choose the Language you prefer.

02 Click **Submit** to complete your registration.

Returning Individual/Member Log In

01 If you have already registered, click **Log In**.

Log In



[Submit Your Inquiry](#) [Contact Us](#) [Log In](#) [Register](#)

Home



INDIVIDUAL AND MEMBER

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Welcome to the self-service portal for clients of Forrest T. Jones & Company (Forrest T. Jones Consulting Company in AZ); a nationally licensed insurance third-party administrator.

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 **1-866-809-3899**

Returning Individual/Member Log In (cont.)

Member Login 🔒

User ID

[Register](#) | [Forgot Your Password?](#)


Next

01 Enter User ID.

Member Login 🔒

Security Image

Please validate image
If you recognize image
password and login



seal

Password

[Register](#) | [Forgot Your Password?](#)

Prev **Next** **Login**

[Register](#) | [Forgot Your Password?](#)

02 Validate your chosen **Image** and **Security Phrase**.

03 Enter **Password**.

04 Click to **Log In**.

05 Click to recover **Password**.

Navigating My Insurance

This will be your Insurance Benefits home page.

The screenshot shows a web application interface. At the top right, the user name 'SMITH' and a 'Log Out' button are visible. A breadcrumb trail shows 'Home' and 'My Workspace / My Insurance'. Below this, the page title is 'My Insurance'. The main content area displays details for a '0006000004 Term Life' policy. A table lists the following information:

Insured Name	MARY JANE SMITH	Effective Date	03/17/20
Owner Name	MARY JANE SMITH	Coverage Amount	250,000.00
Status	Premium Paying	Premium	

To the right of the table is a dropdown menu labeled 'I would like to ...'. The dropdown is open, showing three options: 'Update Personal Information', 'View Policy Details', and 'View Billing/Payments'. The first option is highlighted. Two callout boxes provide instructions: '01' points to the breadcrumb trail, and '02' points to the dropdown menu.

01

The pages you have visited will appear here. To return to a previous page, click on the page listing.

02

Highlight your selection and click to go the chosen screen.

I would like to ...

- Update Personal Information
- View Policy Details
- View Billing/Payments

Update Personal Information

You can update your personal information on this page.

[Submit Your Inquiry](#)
[Contact Us](#)
MARY JANE SMITH
Log Out

Home My Workspace ▾

My Workspace / My Insurance / Personal Information

Personal Information

Name
MARY JANE SMITH

Relationship
Owner one

SSN / Government ID
XXXX-XXX-1234

Date of Birth
10/27/1974

Gender
Female

Need Help? !
For assistance call Customer Service
1.888.000.0000

Contact Information

Enter your changes and click Save.

Street Address

9876 MAIN STREET

City

DALLAS

State/Country

Texas US

Zip Code

75230

Home

(214) 123-4567

Business

Facsimile

Preferred Method of Contact

Undecided

01 Update information.

Email Address 1 + Add

Save
Cancel

02 Click Save.

Policy Details

This is how you access your Policy and Benefits Details.

Submit Your Inquiry Contact Us MARY JANE SMITH Log Out

Home My Workspace ▾

My Workspace / My Insurance

My Insurance

0006000004 Term Life

Insured Name	MARY JANE SMITH	Effective Date	03/17/20
Owner Name	MARY JANE SMITH	Coverage Amount	250,000.00
Status	Premium Paying	Premium	

I would like to ... ▾

- Update Personal Information
- View Policy Details
- View Billing/Payments

Policy Details: Life & Health Products

This page contains details about your Certificate or Policy. Click on the Benefits at the bottom for Benefit Level Details.

[Submit Your Inquiry](#) [Contact Us](#) [MARY JANE SMITH](#) [Log Out](#)

[Home](#) [My Workspace](#)

[My Workspace](#) / [My Insurance](#) / [Policy Details](#)

Policy Detail

Policy Number 0006000004

[Back to My Insurance](#)

Current As Of Date 05/26/2020

Owner [MARY JANE SMITH](#)

Address
1234 MAIN STREET
DALLAS, Texas 75230
UNITED STATES OF AMERICA

[Update Personal Information](#)

Agent

ROY JONES
[Phone](#)
[Email](#)

Policy Information

Status Premium Paying	Premium 30.25
Currency DOLLAR (US)	Payment Method Electronic Funds Transfer
Application Date 03/02/2020	Automatic Payment ID Account Information 00089765120
Effective Date 03/17/2020	Payment Frequency Monthly
Paid to Date 03/17/2021	Net Cash Value 0.00

Benefits

Product Name	Insured	Status	Effective Date	Coverage Amount	Net Benefit Value
Term Life w / AD&D	MARY JANE SMITH	Premium Paying	03/17/2020	250,000.00	0.00
Term Life w / AD&D Spouse Rider	ROBERT SMITH	Premium Paying	03/17/2020	25,000.00	0.00

01 Benefit level details.

Benefit Details: Life & Health Products

[Submit Your Inquiry](#) [Contact Us](#) [MARY JANE SMITH](#)

[Log Out](#)

[Home](#) [My Workspace](#) ▾

[My Workspace](#) / [My Insurance](#) / [Policy Detail](#) / [Benefit Detail](#)

Benefit Detail

[Back to Policy Detail](#)

All currency values expressed in DOLLAR (US)

Insured	Effective Date
MARY JANE SMITH	03/17/2020
Status	Expiration Date
Premium Paying	03/17/2073
Issue Age	Paid Up Date
41	08/01/2023
Risk Class	
Non-Smoker	
Coverage Amount	
250,000.00	

Additional Coverage

Product Name	Insured	Effective Date	Expiration Date	Status	Coverage Amount
Term Life w / AD&D	MARY JANE SMITH	03/17/2020	03/17/2073	Premium Paying	250,000.00

View Billing/Payments

Submit Your Inquiry Contact Us MARY JANE SMITH Log Out

Home My Workspace ▾

My Workspace / My Insurance

My Insurance

0006000004 Term Life

Insured Name	MARY JANE SMITH	Effective Date	03/17/20
Owner Name	MARY JANE SMITH	Coverage Amount	250,000.00
Status	Premium Paying	Premium	

I would like to ... ▾

- Update Personal Information
- View Policy Details
- View Billing/Payments**

I would like to ... ▾

- Update Personal Information
- View Policy Details
- View Billing/Payments**

Billing Payment Details: Life & Health Products

[Submit Your Inquiry](#) [Contact Us](#) [MARY JANE SMITH](#) [Log Out](#)

Home [My Workspace](#) ▾

My Workspace / [My Insurance](#) / Billing Payment Details

Billing Payment Detail

[Back to My Insurance](#)

Policy Number 0006000004

All currency values expressed in DOLLAR (US)

Payor	MARY JANE SMITH
Effective Date	03/17/2020
Paid To Date	09/17/2020

01 Select **Account Information** to change the bank account used to pay your insurance premiums.

Billing/Payment Information

Bill To Date	10/01/2020	Payment Fr	Monthly	Automatic Payment ID	000098761234	Account Information
Premium	30.35	Payment M	Direct Premium Notice	Automatic Payment ID	000098761234	Account Information

Payment History

From Date (mm/dd/yyyy) Through Date (mm/dd/yyyy) [Retrieve](#)

Show entries

Transaction Date	Appy Date	Payment Method	Payment Frequency	Payment Amount
08/06/2020	08/06/2020	Direct Premium Notice	Monthly	30.25
07/06/2020	07/06/2020	Direct Premium Notice	Monthly	30.25
06/06/2020	06/06/2020	Direct Premium Notice	Monthly	30.25

02 These are your past payments.

Change Your Bank Account

The screenshot shows a user interface for changing a bank account. At the top right, there are links for 'Submit Your Inquiry', 'Contact Us', 'MARY JANE SMITH', and a 'Log Out' button. Below this is a navigation bar with 'Home' and 'My Workspace'. A breadcrumb trail reads: 'My Workspace / My Insurance / Billing / Payment Detail / Make a Payment / Payment Information'. The main heading is 'Make a Payment', with a 'Policy Number 0006000004' displayed. A yellow callout box on the right says 'Need Help? ! For assistance call Customer Service 1.888.000.0000'. Below this, a note states 'All currency values expressed in DOLLAR (US)'. The 'Owner' section lists 'MARY JANE SMITH' with fields for 'Effective Date' (03/17/2020), 'Paid To Date' (03/17/2020), and 'Status' (Premium Paying). A 'View / Edit Wallet' button is highlighted. The 'Bank Information' section includes a note: 'Your preferred account is shown below. Select the Next Payment Date and Frequency.' It lists fields for 'Name', 'Account Number' (987654321), 'Account Holder' (Mary Jane Smith), 'Account Type' (Checking), 'Bank Name' (LOCAL BANK), and 'Routing Number' (123456789). A 'Next Payment Date (mm/dd/yyyy)' field is also present. An 'Automatic Payment Authorization' section has a checked checkbox: 'I authorize the automatic transfer of funds for premium payments.' At the bottom, there are 'Submit' and 'Close' buttons. Three numbered callout boxes provide instructions: 01 points to the 'View / Edit Wallet' button, 02 points to the 'Automatic Payment Authorization' checkbox, and 03 points to the 'Submit' button.

Submit Your Inquiry Contact Us MARY JANE SMITH Log Out

Home My Workspace

My Workspace / My Insurance / Billing / Payment Detail / Make a Payment / Payment Information

Make a Payment

Policy Number 0006000004

Need Help? !
For assistance call Customer Service
1.888.000.0000

All currency values expressed in DOLLAR (US)

Owner
MARY JANE SMITH
Effective Date
03/17/2020
Paid To Date
03/17/2020
Status
Premium Paying

Last Payment Date
03/17/2020

Current
Electro

Current
Monthly

View / Edit Wallet

Bank Information View / Edit Wallet

Your preferred account is shown below. Select the Next Payment Date and Frequency.

Name

Account Number
987654321

Account Holder
Mary Jane Smith

Account Type
Checking

Bank Name
LOCAL BANK

Routing Number
1234567890

*** Next Payment Date (mm/dd/yyyy)**

Automatic Payment Authorization
 I authorize the automatic transfer of funds for premium payments.
 I authorize the automatic transfer of funds for premium payments.

Submit Close

Submit

01 If the bank account you want to use is not listed, click **View/Edit Wallet** and follow the directions in the **Wallet** section of this guide.


02 Click **Authorization** box.

03 Click **Submit**.

Note: If your current payment method is not Direct Premium Notice, Credit Card Deduction or Electronic Funds Transfer, you will need to contact Customer Service to make a one-time payment or make changes to your payment method or frequency.

Wallet Section

Add Bank Account

Your Wallet  **Add Bank Account**

01 To add a bank account to your **Wallet**, click **Add Bank Account**.

No accounts exist. Click Add Bank Account to add a new account.

Select	Account Holder Name	Bank Name	Account Number	Account Type	Edit / Delete
No records found.					

Showing 0 to 0 of 0 entries Previous Next

Continue Cancel

Add Bank Account

02 Fill in form.

*** Name Type**

*** First Name (Account Holder)**

*** Last Name (Account Holder)**

*** Bank Name**

*** Routing Number**

*** Account Number**

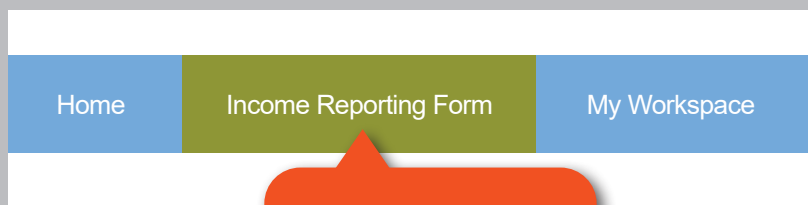
*** Account Type**

Save Cancel

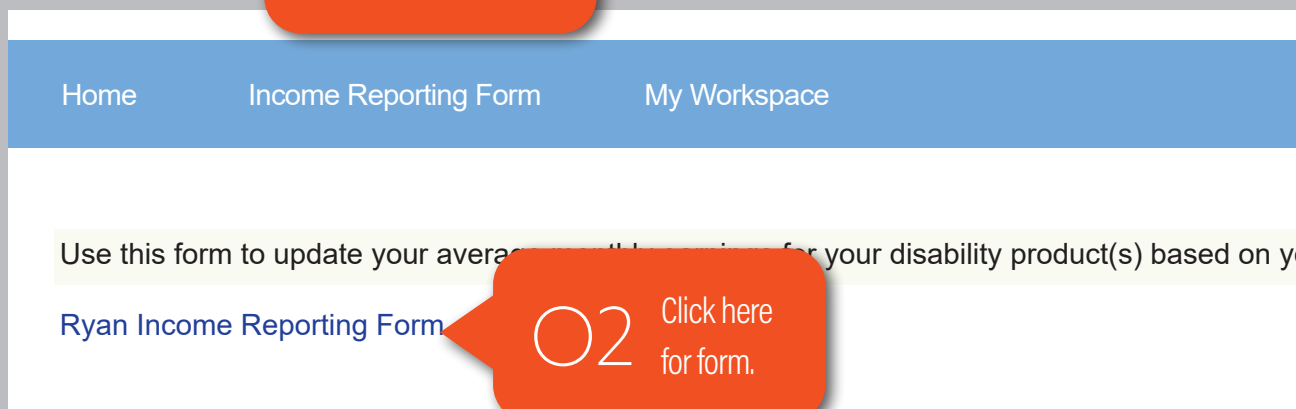
Save

03 Click **Save**.

Income Reporting Form



01 Click here.



Ryan Income Reporting Form for MetLife Consideration

g Form

Ryan Income Reporting Form

Use this form to update your average monthly earnings for your disability product(s) based on your **PRIOR year's earnings**.

You must update your average monthly earnings at least once per calendar year. Most do it after they have filed their prior year's taxes. Since your disability benefit amount is based on your average monthly earnings, so are your premiums. Once you submit this form, your insurance record will be updated and your new coverage amount and premium will be visible in our [web portal](#) and will be reflected in the next monthly payment drawn on your account.

- Check box to see Definition of Income: Predisability Earnings
- I am enrolled in short- and/or long-term disability through my association.*

03 Read carefully, review definition of income, then complete form.

End of the Portal Guide