

Video Visit Step-by-Step Patient Guide (Desktop/Laptop)

Thank you for participating in Community Health Network's Video Visit program. Video Visit appointments **provide a convenient** way to receive exceptional care, simply delivered to a location that is convenient for you!

First, let's review some helpful tips to make your experience quick and easy.

Not all visits will be conducted through video. Your Provider will determine if your appointment need is appropriate.



Am I Eligible?

- ✓ All participants must have an **active** MyChart account.
- ✓ Patients must use the web-browser platforms **Mozilla FireFox** or **Google Chrome** to successfully use Video Visits from desktop or laptop computers.
 - Please be sure your device has a camera and microphone



Helpful Information

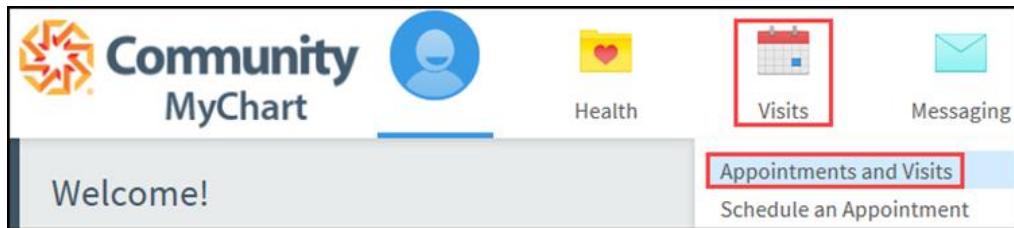
- If during a video visit, it is determined that your condition warrants an office visit, the office will call you to schedule that appointment.
- Once the video visit begins, your image will appear in the window located in the lower right of the screen.
- For optimal picture quality, don't sit or stand in front of windows or bright lights.
- Mute, Disable Camera, Leave Visit, Device Selection, and Shrink or Grow your camera preview buttons are available to use during your visit.
- If the call or video connection is lost prior to your Provider joining the visit, simply reconnect.
- You can eCheck-In up to three days before your video visit.
- The Begin Video Visit button will not appear until you are within a 2 hour time frame from your Video Visit.
- DO NOT click the Begin Video Visit button at the end of your check in process if your office is not using MyChart to complete the Video Visit. Your provider's office will be communicating the way in which you will complete your video visit.
- Call 317.355.2273 for MyChart support.



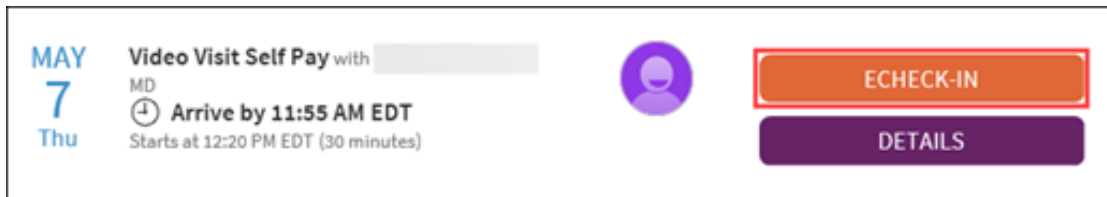
Using a Desktop or Laptop for Video Visits?

If you will be using a desktop or laptop for the video visit, please complete the hardware/connection test the day before your appointment to ensure your equipment and internet access support the Video Visit.

1. Log in to **MyChart**.
2. Click the **Visits** icon. Click **Appointments and Visits** from the dropdown.

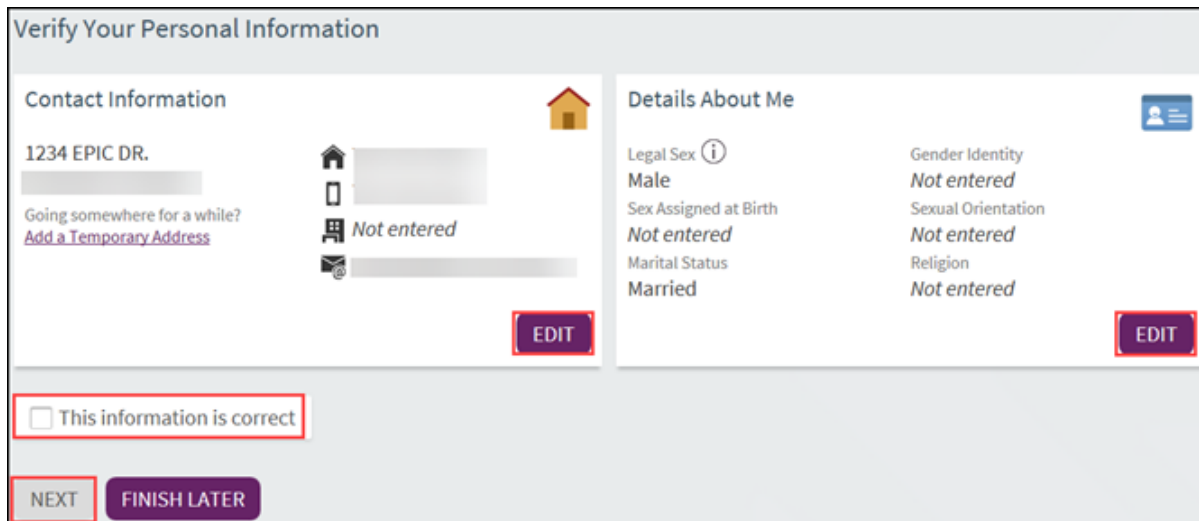


3. Click the **ECHECK-IN** button.



Personal Information

1. Verify all **Personal Information**.
 - a. Edits can be made using the Edit Button.
2. Click the **checkbox** next to < This information is correct > if no changes need to be made.
3. Click **Next**.



Payments

1. Click the **checkbox** next to the Video Visit balance.
 - a. Payments for Video Visits are expected before the visit begins.
2. Click the **Pay button**.
 - a. You will need to add your credit card/debit card information.

3. Click **Next**.

Insurance

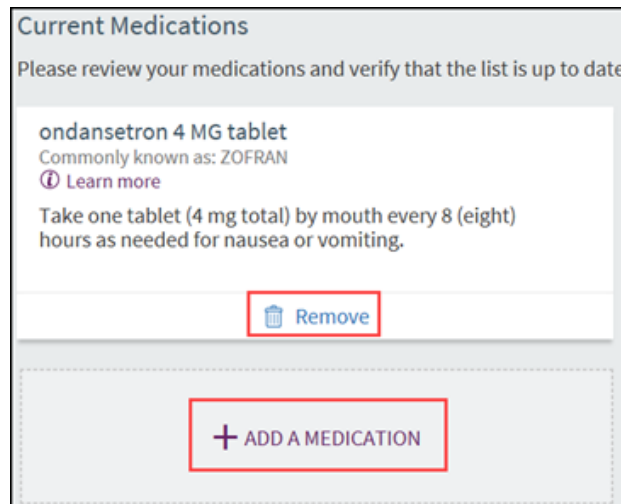
1. Verify **Insurance information**.
 - a. There are questions that are required to be answered before continuing with the eCheck-In.
 - b. You are able to upload images of your insurance card.
2. Click **Next**.

Travel History

1. Click **Add a Trip** to document any trips you have taken outside of the country.
2. Click the **checkbox** next to < This information is correct > if no changes need to be made.
3. Click **Next**.

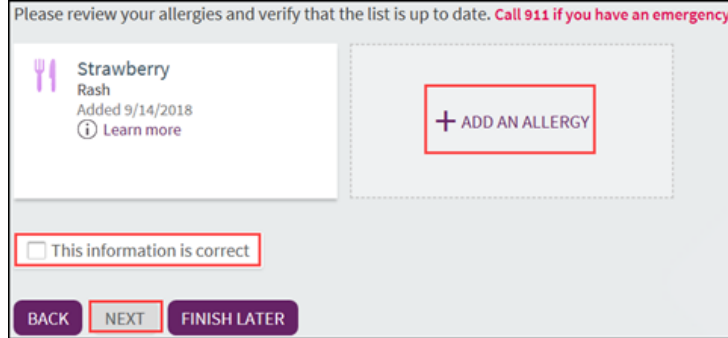
Medications

1. Review the list of **current Medications**.
 - a. Use the remove button to remove the medication from your current list.
2. Click **Add a Medication** to add more medications to your current list.
3. Click the **checkbox** next to < This information is correct > if no changes need to be made.
4. Click **Next**.



Allergies

1. Review the list of **current allergies**.
2. Click **Add an Allergy** to add another allergy to your current list.
3. Click the **checkbox** next to < This information is correct > if no changes need to be made.
4. Click **Next**.

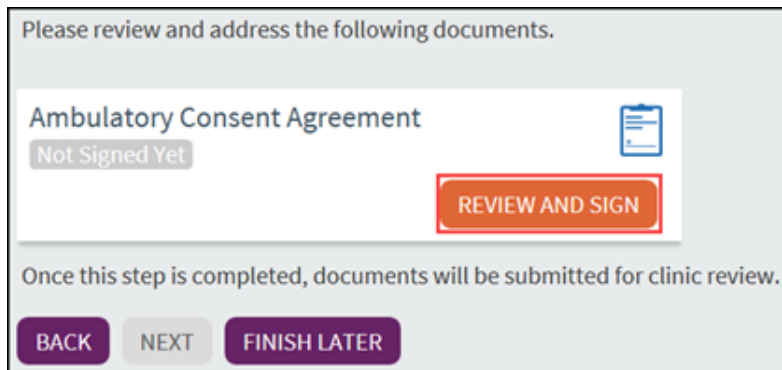


Health Issues

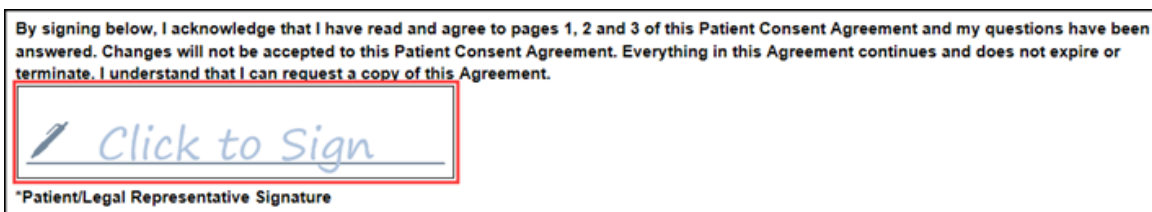
1. Review the list of **current health issues**.
2. Click **Add an Health** Issue to add another Health Issue to your current list.
3. Click the **checkbox** next to "This information is correct" if no changes need to be made.
4. Click **Next**.

Sign Documents

1. Click the **Review and Sign button** to electronically sign the Ambulatory Consent Agreement.



2. Review the Ambulatory Consent Agreement. Click the < **Click to Sign** > line. This will automatically add your name to the form.



3. Click **Continue** on the Ambulatory Consent Agreement.
4. Click **Next**.

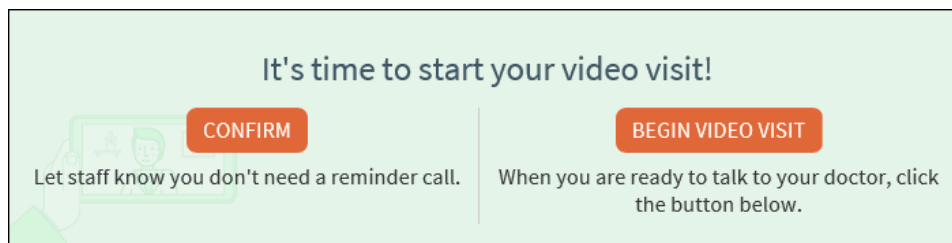
Questionnaires

1. Answer any questions related to the questionnaires listed in your MyChart.
2. If you have Medicare please see the Medicare Section below.

Final Page

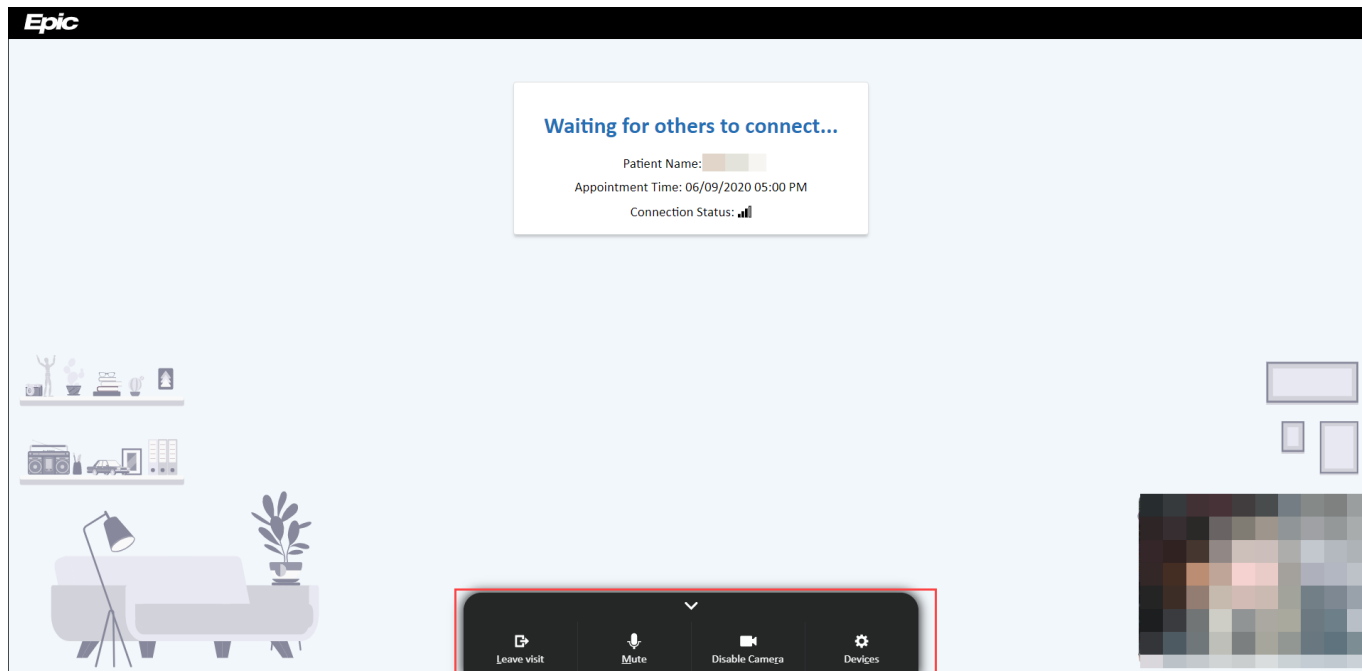
1. Click **Confirm** to receive a reminder call from your provider's office.

2. Click **Begin Video Visit** button when you are ready to start your visit.



3. Click **Allow** on the pop ups to use your device's microphone and camera.

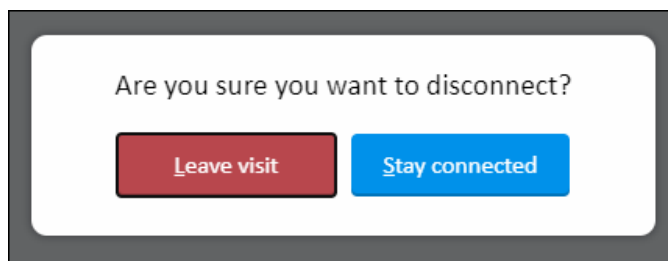
4. Once connected to the video visit you will see the following screen while you wait on the provider to join you:



5. At the bottom of the screen you will see a toolbar of buttons. If you do not see the toolbar you should see an arrow pointing up on a black bar. Click the **arrow** to see your toolbar.



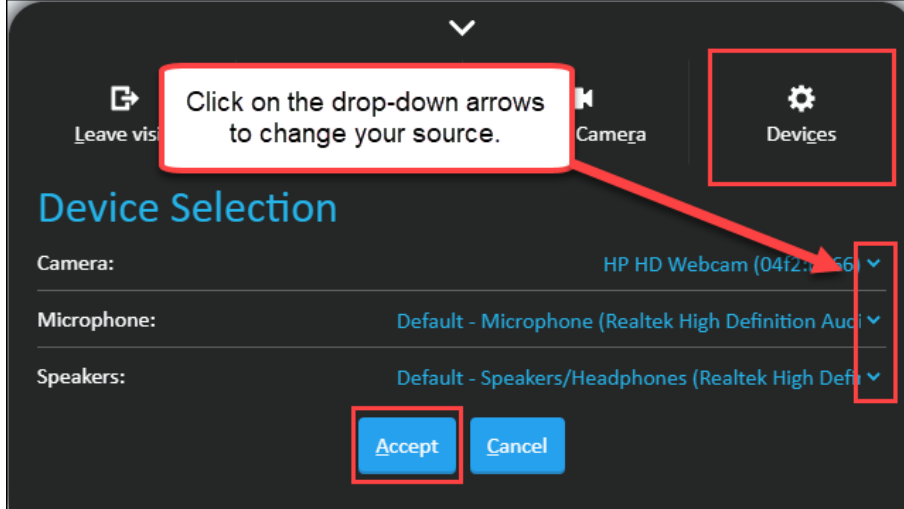
a. **Leave the Visit** – click this when you are ready to leave. You will see a pop up asking you if you are sure you want to disconnect.



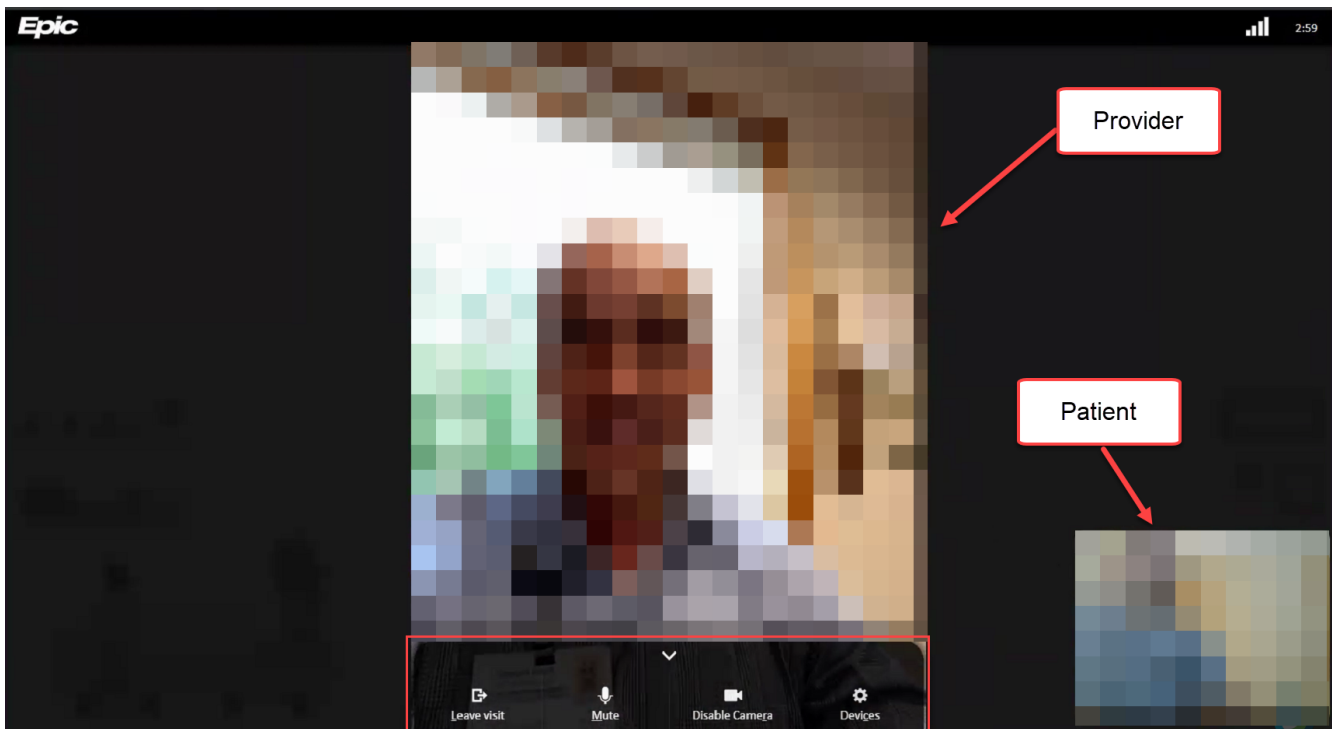
b. **Mute** – click this if you need to mute yourself

c. **Disable Camera** – click this if you need to turn off your camera

d. **Device** – click this if you need to change the devices (camera, microphone, and speakers) you are using. If you make changes be sure to click the **Accept** button.

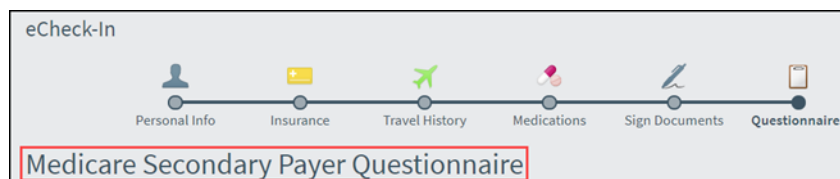


6. Once the provider is connected to the visit it will look like this:



Medicare Questionnaire

For Medicare patients, a Medicare Questionnaire will be presented in MyChart.



1. Answer the following questions:
 - a. Are you receiving Black Lung (BL) benefits?
 - b. Are the services to be paid by a government research program?
 - c. Are you entitled to benefits through the Department of Veterans Affairs (DVA)?
 - d. Was the illness/injury due to a work-related accident/condition?
 - e. Was the illness/injury due to a non-work-related accident?

- f. Are you entitled to Medicare based on age?
 - g. Are you entitled to Medicare based on end-stage renal disease (ESRD)?
 - h. Are you currently employed?
 - i. Do you have a spouse who is currently employed?
2. Click **Continue** once you have answered all of the questions.
 3. Review your **answers** and click **submit**.