

MyCare **TELEMEDICINE**

SETTING UP YOUR VIDEO APPOINTMENT
ON YOUR MOBILE DEVICE

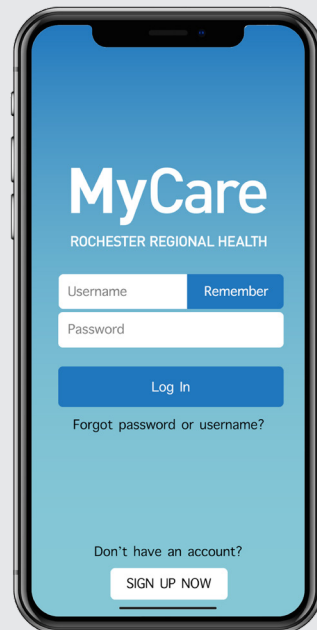


ROCHESTER REGIONAL **HEALTH**

GETTING STARTED



To access a video appointment using your mobile device, you will need to install the **RRH MyCare** application. Open your app store and search for “RRH MyCare” when prompted. Log in using your **MyCare** username and password. To create an account, select *Sign Up Now*.

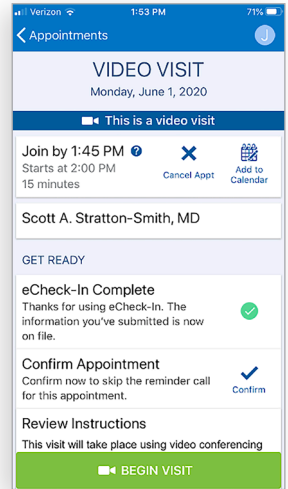
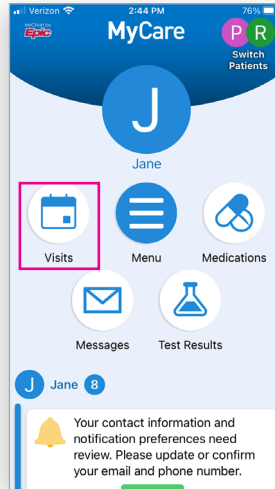


CONNECTING

Access to the video functionality will be available 30 minutes prior to your scheduled appointment.

To begin your Video Appointment through your mobile device, login to the MyCare app, select *Visits*, and select *Begin Visit*.

Set up your appointment and complete your eCheck-in up to three days before your scheduled time for the most success in completing your visit, and troubleshooting any possible issues.



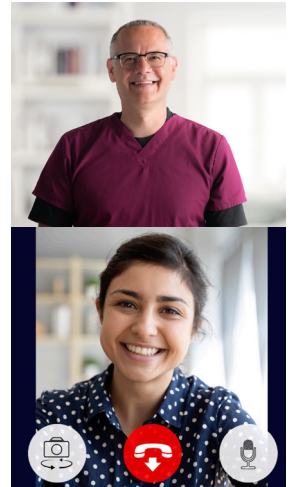
Technology requirements:

Operating Systems: Android 7,8,9 and 10
iOS 11,12,13

Apple Devices: iPhone® 6, 6 Plus, 6S, 6S Plus, 7, 7 Plus, SE and up
iPod touch® 4th and 5th generation
iPad® 3rd, 4th, iPad Air®, iPad Air2, iPad mini2™, iPad mini3, iPad Pro®

Android Device requirements:

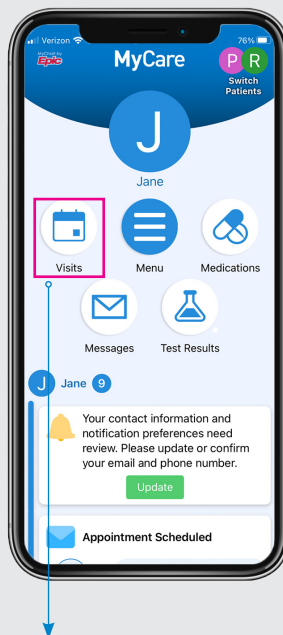
- Dual core ARMv7 processor
- 512 RAM
- OS version 7 and above
- Screen resolution of 480x800 pixels



Once you are logged in, you can view your scheduled appointments by selecting the *Visits* icon.

Prior to each appointment, it is required for all patients to complete the **eCheck-in** process at least 15 min before your appointment in order to:

- Confirm any current medications, allergies, and health issues
- Verify your insurance information and address
- Pay your copay
- Complete our health questionnaire or electronically sign any paperwork needed for your visit



Go to *Visits*
to access **eCheck-in**.
Available 3 days prior
to your appointment.

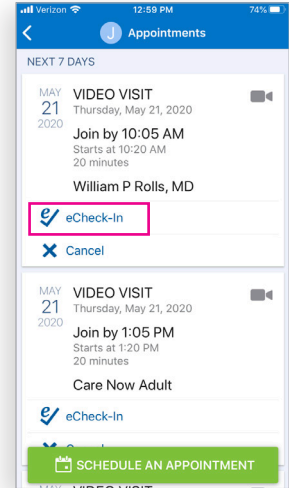
For assistance, please call MyCare Patient Support Team at **585-922-1234**
or email mycare@rochesterregional.org

eCHECK-IN

Your eCheck-in will be available 3 days prior to your appointment—you must complete this process in order to activate your video session. If you start the eCheck-in just prior to your appointment, please allow at least 15 minutes to complete the process.

What you will need to complete your check-in:

- **MyCare** login credentials: username and password
- You may be asked to upload a photo of your current insurance card.
- Payment information (credit card, HSA or debit card)

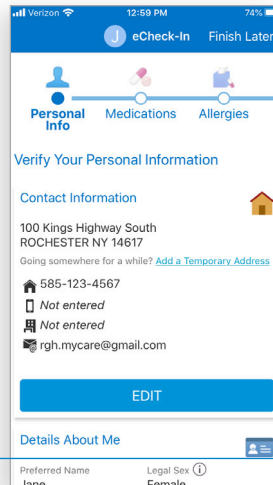


Information Verification:

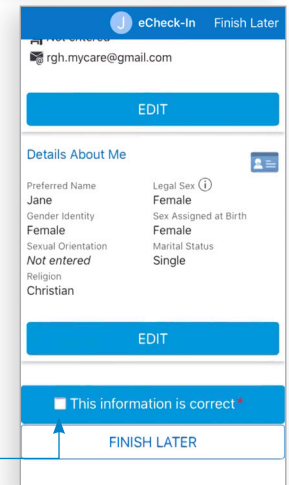
Through this series of screens you will be asked to confirm or edit personal and medical information and pay your copay.

To edit information, select the *Edit* button, and complete any necessary changes.

Once all the information is accurate, check the box next to "This information is correct" and select *Continue* to move to the next screen.



Select to make changes or add information





Patient Consent:

You may be asked to sign a consent form if one is not on file. Select *Review and Sign* to access the telemedicine consent form.

Select the designated area to sign and enter your **MyCare** password.

NOTE: You will need to manually enter your password, it will NOT autofill from previously saved settings.

Verizon 1:03 PM 73%

eCheck-In Finish Later

Telemedicine Consent

Rochester Regional Health
Name: Smith, Jane

MRN: 61026700
DOB: 1/1/1970
Sex: female

Patient Permission for Telemedicine Services

Please review the following permission for telemedicine visits and sign below if you want to authorize such treatment. This permission will remain in effect for as long as you are a patient of Rochester Regional Health through one or more of its affiliated practices (referred to herein as "Rochester Regional").

Patient Rights: Rochester Regional patients have the following rights with respect to telemedicine visits:

1. The right to refuse to participate in services delivered via telemedicine at any time and to be made aware of alternatives and potential drawbacks of participation in a

Signature of Patient or Legal Representative
✓ Jane Smith
Date: 1/1/2024 1:03 PM

To submit this document, please enter your MyCare password.
Password:

CONTINUE CLEAR FORM CANCEL

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eCheck-In Finish Later

(Name of Legal Representative if Applicable)

(Relationship of Legal Representative to Patient if Applicable)

Signature of Patient or Legal Representative
✓ Jane Smith
Date: 1/1/2024 1:03 PM

To submit this document, please enter your MyCare password.
Password:

CONTINUE CLEAR FORM CANCEL



Payment:

You will need a valid credit card, debit card, or HSA card. Select the copy box under "Payment for This Visit" and click *Pay \$ amount*.

Enter your payment information, then click *Continue* to process your payment.

Click *Submit eCheck-in* on the payment verification screen. Please note that your card will not be charged until the claim is processed through your insurance carrier.

NOTE: Your ability to pay should not discourage you from attending your visit. If you would like to discuss financial assistance please reach out to (585) 922-1001 option #3.

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eCheck-In Finish Later

Insurance Sign Documents Payments

Complete your payment below.
Payment for This Visit

Copy
✓ \$20.00 (Amount due)

PAY \$20.00
BACK
FINISH LATER

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eCheck-In Finish Later

Enter payment information

CREDIT/DEBIT CARD

Name on Card

Card Number

Exp Date CVN

Zip

Phone #

Save Payment Method to My Wallet

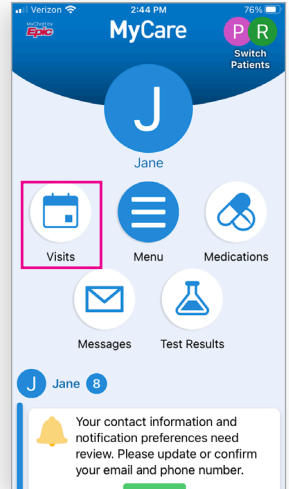
POWERED BY InstaMed

SUBMIT

After Your Visit:

Your provider will record any necessary details about the appointment, sign the progress note and close the visit. At this time a summary of your visit will be available by selecting the *Visits* icon.

NOTE: This is only available after the provider closes the appointment and may not be available immediately.



Helpful Tips

- Do not exit the app once logged in for a video visit
- Find a well-lit, comfortable setting with little distraction for your visit
- Please make sure you are using a reliable connection and have a fully charged device

