WAIMĀNALO HEALTH CENTER PATIENT PORTAL USER GUIDE



Ask a staff member for more information on how to enroll

Patient Portal

- Request access to your health record
- Schedule and view appointments
- Request medication refills
- Request to see your lab results
- Communicate with your health care team
- Ask questions about your bill





ENROLL TODAY! It's free and easy

What is the Patient Portal?

The patient portal offers a secure way for Waimānalo Health Center (WHC) patients to communicate with their health care team. Secure messages and information can only be read by someone who knows the right password to log into the site. This website will allow WHC patients to schedule and view appointments, request medication refills, request to see lab results, and ask questions about their bill. The portal is not intended for "Web Visits" or to replace appointments which are to be done in person with your provider. The portal is a voluntary option of WHC patients who wish to participate. The tool is free of charge to all Waimānalo Health Center patients.

Response Time

Responses will be made within 24 hours but no later than 3 business days. If you have not received a response within 3 business days, please call the office at (808) 259-7948 to check on the status of your request. Please do not use the Patient Portal for urgent or emergency messages.

Privacy and Security

Waimānalo Health Center takes the security of your personal health information very seriously. We follow all security laws, including Health Insurance Portability and Accountability Act (HIPAA) and Health Information Technology for Economic and Clinical Health Act (HITECH). Email information will be protected in the same manner as your medical and other personal information. We will never sell/trade/abuse your email address. Use of the Patient Portal is extended as a courtesy to allow enhanced communication between WHC patients and their health care team. Abuse of this courtesy and/or falsifying information, could result in discontinuing electronic communication with you.

Your Account

You are responsible for maintaining the confidentiality of your account and password and for restricting access to your computer. You agree to accept responsibility for all activities that occur under your account or password. You may cancel or opt-out of your account at any time.

Getting Started

- Complete the Patient Portal Authorization Form for yourself and each dependent
- A valid email address will need to be provided for each person
- WHC staff will input your information into the system and print a token
- The token is a unique id number needed to complete your portal enrollment.
- If you misplace your token, please request for a new token in person with a WHC staff member

Enrolling Dependent(s)

- As a parent or legal guardian you can have access to your child's patient portal as their Care Manager.
- Care Manager access will expire on the dependent's 18th birthdate.
- The dependent's health information can be accessed from the guardian's portal account.

Enrolling a Care Manager (CM)

- You can authorize another adult as a CM to have access to your patient portal.
- Specific rights can be granted for viewing only or allowing them to send/complete information on your behalf.
- The CM must be a current WHC patient.
- The CM's access will expire 1 year to date unless otherwise specified.

Completing Your Portal Enrollment

- The portal enrollment link can be accessed from various locations on the WHC website (waimanalohealth.org)
- You may access the link from an email that is sent to you when the token was generated
- You may also go directly to the enrollment screen at www.nextmd.com



		Engli
me to Pat	ient Portal, your medical home on the Web. With Patient Po enviro	rtal, you can connect with your doctor through a convenient, safe, and s nment.
	Already a member?	I am new here
	Welcome!	
	Please note that the username and password fields are case	
	sensitive and the password must contain at least one number.	
	Username	Have you been provided an enrollment
	Password	token?
	Password	Do you have a temporary username and
	Need help with your username and password?	password?

• Click on "I AM NEW HERE"



 Read the Terms and Conditions and click on "I ACCEPT"

is is your first s	tep to the enrollment process.
ease select the	option that applies to you and provide the required information.
I was given an enro	liment token
* Enrollr	ment token:
• Date of birth (mr	What is security: token? n/dd/yyyy): [MM/DD/YYYY
* Em	ail address:
	I do not have an email address
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	NEXT CANCEL

- Select "I was given an enrollment token"
- Type in the token number (without dashes) that was given to you during the time of signing up for the portal. It must match exactly in order to continue with the enrollment process
- Type in your date of birth and email address that was noted on the portal authorization form. It must match exactly in order to continue with the enrollment process
- Click "NEXT" when all information has been added



- Create a username and password
- Username must be unique, is case sensitive and must be 6-20 characters. If a message appears noting username not accepted, try another username
- Passwords must be 6-20 characters, contain at least one number, and is case sensitive

Create your login security authorization Choose a login security question and enter you process. You will be prompted to enter the ans Asterisk (*) denotes required field.	ir answer. This question will be used as part of the login authorization wer for your selected question when you try to login to your account.
* Select a question:	T
* Enter your answer:	
* Retype your answer:	

 Select a security question and answer. This will be asked upon each login.

process. You	itten password question and enter the answer. This question will be used in the password reset will be prompted to enter the answer for this question in case you need to reset your password in th
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- You will also need to create your own security question and answer. This will be asked if you need to reset your password
- Click on Submit when all required fields are completed and start using your portal account WAIMĀNALO HEALTH CENTER PATIENT PORTAL USER GUIDE

PORTAL WEBSITE OVERVIEW

HOME PAGE

- Once enrollment is completed and upon each login, you will be taken to the home screen.
- The home screen has WHC information and the following:



- Inbox: This will list the last 3 messages that was sent by WHC
- **Upcoming Appointments**: Future appointments booked after the portal enrollment has been completed will show up in this section
- Reminders: The system will auto generate appointment reminders 7 days before the scheduled appointment
- Lab Results: Lab results will populate after you have requested your Personal Health Record (See page 12 for more details)
- **Medications**: Lists all medications. Clicking on Refill will take you to the Renew Medications Page. (See page 13 for more details)

MAIL PAGE

- You will be able to view any correspondence between yourself and your healthcare team at WHC
- Unread items are bolded
- Select Compose Message to send your healthcare team a secured message
- To respond back to a message, open the message and select Reply and when done click Send
- You will be notified when your message is sent
- All messages are first sent to the support staff and they follow up with the providers when necessary
- You will receive an email notifying you anytime WHC sends a correspondence to your portal

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- **Billing question**: Support staff will look into the issue and follow up with you
- **Medication question**: Support staff will forward the request to the provider
- **Test Result Requests**: Support staff will forward to the provider for approval. The provider may request for you to schedule an appointment to discuss the results.

WAIMĀNALO HEALTH CENTER PATIENT PORTAL USER GUIDE

SCHEDULE PAGE

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() Select Your Medical Practice Record associate medical practice	for that appointment					
Practice	Waimanalo Health Center					
*Patient:	Please make a selection	•				
2.) Select Provider and Location People select your provider, the op-	angenate appointment category and di	uved location from the drug	down lats below. Asterial (*) d	ienotes required Seld.		
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*Select category:	Please select a category.					
"Select location	Please select a location.					
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*Reason for appointment						
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Disclaimer. If this is a tri call your nearest hospital	ue medical emergency please contact I or medical practice	your Emergency Medical Se	rvices (SLI), or			
* For urgent or same day	appointments please call the office :	et (808) 259-7848.				

- Request Appointment: You have the option of requesting an appointment for yourself or your dependents. All fields with * must be completed before submitting.
 - Use for non-urgent appointments. You're given the option to select a provider, select specific days & times, reason for visit, & additional comments
 - Please call to cancel your appointments

NextMD.com Appointment Response

To: 1Portal

This email is to notify you that a response to your appointment request has been sent by the staff at Waimanalo Health Center . At your earliest convenience please log in to your NextMD account to review this information.

- When an appointment has been scheduled you will receive an email suggesting to review the information in your inbox on the portal.
- You will also receive a reminder email 7 days before scheduled appointments.

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This appointment request is awaiting your response								
Click <u>here</u> to view you	ir appointment.							
Date practice responded	: Thu 3/10/2016 11:48:44 PM GMT							
Proposed appointment of	Proposed appointment date: Your selected appointment date/time is not available. Please contact your practice.							
Proposed provider:	Proposed provider: Jones, Christine							
Proposed location:	Waimanalo Health Center 41-1347 Kalanianaole Hwy Waimanalo, HJ 967951247 (808) 259-7948							
Your appointment has been Mahalo	en scheduled for Wednesday 3/23/16. Check in at 8am. If this does not work for you please let us know and we can reschedule the appointment.							
Original Appointment Re								
Patient Name:	IPORTAI LEST							
Bequested provider:	Innes Christine							
Requested category:	Physical Exam							
Requested location:	Waimanalo Health Center							
Appointment priority:	Normal							
1st preferred:	Mon, Tue, Wed, Thu, Fri or Sat from 1:00 PM to 5:00 PM							
2nd preferred:								
Reason for appointment	:							
Work Physical								

- If the appointment was made within your requested dates and times you can click at the top to view your appointment.
- If your appointment was made outside of your request the information will be noted under Message from practice.

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• **My Appointments**: Future appointments will be listed. Select include past check box to view past appointments.

MY CHART PAGE

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- These fields will populate once you have requested your Personal Health Record (PHR).
- <u>We recommend all patients to request a copy of their</u> <u>PHR to see what is in your chart and discuss any</u> <u>discrepancies with your Primary Care Provider.</u>

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Request Personal Healt	th Record			Trapport Department of a
"Practice. "Patient	Waimanalo Health Center	v		
A This disclaimer n	ressage will be presented to users in Ne	MD's Personal Health Record Module.		

- Personal Health Record: Select yourself or dependent and click on submit.
 - You will receive your health record in your inbox within a couple of days.
 - This is system generated and no notification of request is sent to the provider.
 - This document can be downloaded and saved as a pdf file.
 - It includes: Allergies, Medications, Problems, Procedures, Results, Advance Directives, Encounters, Family History, Immunizations, Payers, Social History, Vital Signs, Reason for Visit, Chief Complaint, Reason for Referral, Plan of Care, Functional Status, Medications Administered

RENEW MEDICATIONS

Manual Andrew Sector Control of C	
Select Your Medical Practice	
act the medical practice that prescribed the medication you wish to renew.	
Practice: Waimanalo Health Center	
"Patient: [Self V	
Select Medications	
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Narcotic or controlled substance medication reflis require an appointment with your Provider and will not be reflined through this ports. Piesse on 80% 25%-7448 for an appointment.	GUMIDE ER. 2.5 MG take 2 bablet by oral note every 7/15/2014 GUMIDE day with breadsa:
¥	PRENATAL VELAMINS
Medication renewal requests will be answered Monday through Hiday during normal business hours.	

- Select the medication you want to request to refill. Only active medications will be listed and available to select.
- The list of active medications displays when you click on the select different medications link
- You will also need to select the desired pharmacy you wish to have the prescription sent to.
- You will receive an email notifying you to check your portal when a determination of this refill is made by your provider.
- The message sent to your portal will have the information on the status of your refill request.
- Keep in mind that not all refill requests are approved. Your provider may request for you to schedule an appointment.

PRINTING YOUR MEDICATION LIST

iew Med	ications					_
Select Yo	our Medical Practice					
lect the m	edical practice that prescribed the mea	lication you wish to r	enew.			
	*Practice: Waimanalo Heal	th Center	~			
	*Patient: Self		~			
Select M lect the m	edications edication you wish to renew.					
ou curre	ntly have no medications selected f	or renewal. click th	e Select different medications link	to choose the	medication(s).	
Select	t different medications			ſ	Print Medications	
Check the listed, ple	e box next to all medication(s) you wo asse contact your practice using the se av any inactive medications that may l	uld like to have rene cure messaging fun	wed and click the submit button. If y ctionality.	ou do not see y	vour medication(s)	•
	Prescription Name	Dose	Description	Start Date	Stop Date	
	PRILOSEC OMEPRAZOLE	20 MG	take 1 tablet at bedtime	6/5/2014		
	DEPO-PROVERA MEDROXYPROGESTERONE ACETATE	150 MG/ML	inject 1 milliliter by intramuscular route every 3 months	6/29/2014	9/28/2014	
	LORADAMED LORATADINE	10 MG	take 1 tablet (10MG) by oral route every day	8/20/2013		
	ZANTAC 75 RANITIDINE HCL	75 MG	take 1 tablet by oral route every day with a glass of water	8/29/2013		
	GLIPIZIDE ER GLIPIZIDE	2.5 MG	take 2 tablet by oral route every day with breakfast	7/19/2014	~	
	PRENATAL VITAMINS					
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- You have access to print your active medication lists
- If you click on Print Medications link you will be prompted to select the printer.

LOGGING OUT

HOME MAIL SCHEDULE MY CHART RENEW MEDICATIONS PATIENT EDUCATION SETTINGS

HEALIHGARE

• For your security, it is best to log out of the portal after each use.

LOGGING ON IN THE FUTURE

		Already a member?
		Welcome!
PATIENT	PORTAL	Please note that the username and password fields are case sensitive and the password must contain at least one number.
Connect to a healthi	er way of life.	Username
Learn more		Username
		Password
		Password
EXISTING PATIENT	NEW PATIENT	Need help with your username and password?
Login	Signup	
LUYIT	l oigirup	LOGIN

- The portal enrollment link can be accessed from various locations on the WHC website at waimanalohealth.org (See page 4 for details)
- You may also go directly to the Login screen at <u>www.nextmd.com</u>
- Type in your username and password and click on Log In. Username and password are case sensitive

LOCKED ACCOUNTS

- If you fail to properly log in to your portal account after 4 attempts, the system will lock your account for 20 minutes.
- If WHC locks your account, you will be notified through your email address we have on file.

FORGOT USERNAME/PASSWORD

Username	
Username	
Password	
Password	
Reed help with your use	rname and password?

 Click on the "Need help with your username and password" link shown above.

FORGOT USERNAME

F	Forgot your Login information?				
I'm having problems signing in.					
	● I forgot my Username				
	Please enter your information below so that we can locate your account. Last Name: •				
	Email address: *				
	Date of Birth (mm/dd/yyyy): *				

- Select I forgot my Username
- Input your last name, your email WHC has on file, and your birth date.
- You will need to complete your Last name, email address, and birthdate
- Click on submit when items are completed.
- You will receive an email with your username

FORGOT PASSWORD

I forgot my Password

Please enter your information	below so that we can locate your	account.
Username: *		

- I forgot my Password
 - Select I forgot my Password
 - Type in your username (case sensitive)
 - You will be asked to answer one of your security questions
 - You will be sent an email. Select forgot password link
 - You will be asked to create a password and select your security questions.

۲	ave my password reset token
P	se enter your information below so that we can locate your account. Your password reset tok Ild have been provided by your practice.
	Reset token: *
	Email address: *
	Date of Birth (mm/dd/yyyy): *

- Request a reset token from WHC
 - Type in your reset token, email address, and birth date
 - You will be asked to answer one of your security questions
 - You will be asked to create a password and select your security questions

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