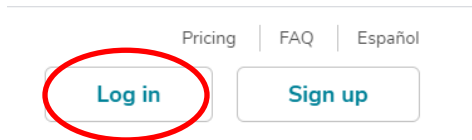
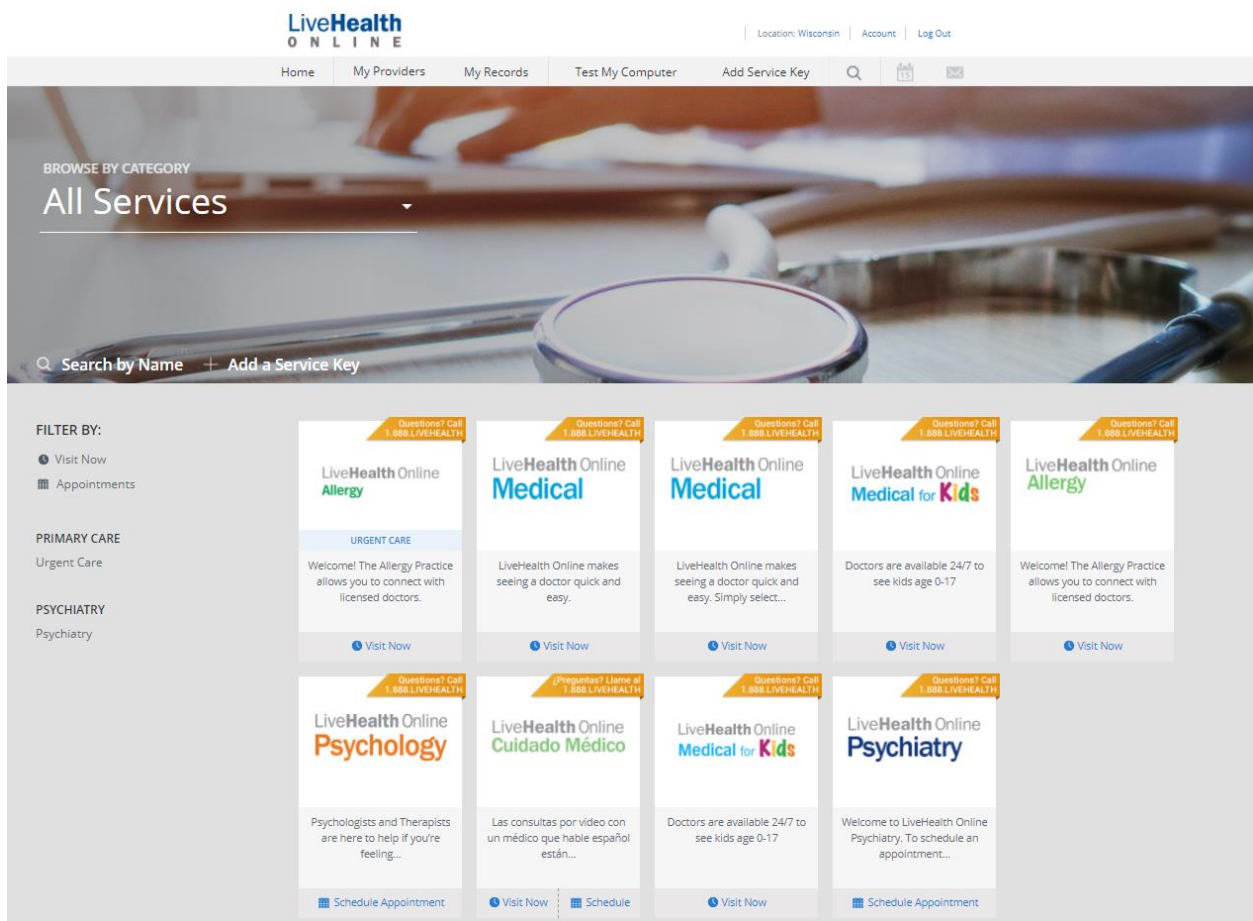


How to Schedule a LiveHealth Online Visit

1. Visit livehealthonline.com or the LiveHealth Online mobile app.
2. Log into your LiveHealth Online account. If you do not have an account, review the “How to Register for LiveHealth Online” for instructions on how to create one.
3. Click “Log in” in the upper right corner.



4. Input the email and password you used when creating your account and click “Log In.”
5. Select the type of visit you are looking for.



6. You have the option of selecting a specific provider or to see the first available provider. Click “Get Started” or “Start Visit” to begin.

See the first available provider
The quickest way to start your visit.
Get Started

Find a Specific Provider

 Natalia DiPaola Family Physician Start Visit	 Michael Monahan Emergency Medicine Start Visit	 Shoua Thao Kalugdan Family Physician Start Visit	 Molly Yurk Nurse Practitioner Start Visit
 Gary Mallis Pediatrician Start Visit	 Christal Rousseau Family Physician 1 Patient Waiting	 Mary-Elise Smith Emergency Medicine 1 Patient Waiting	 Nyree Padilla Family Physician 1 Patient Waiting

7. Answer the questions as prompted and select “Continue.”

Get Started **Your Visit** Pharmacy Payment Your Provider

Your Visit

What would you like to discuss today? (select all that apply)

Cold Other
 Fever Rash
 Flu-Like Symptoms Stomachache
 Headache

Other Symptom or Conc

What is your current physical address in the event of a medical emergency?

Are you allergic to any medications?

Are you now or could you be pregnant?

Do you have any immune system compromise or chronic lung disease?

Do you have any vulnerable family members in the home (infant, pregnant, cancer, elderly)?

Back **Continue**

8. Share your Medical History with the provider by sharing any conditions you have been diagnosed with, any allergies you may have, as well as any current medications you are on.

✓ Get Started Your Visit Pharmacy Payment Your Provider

Medical History

CONDITIONS Have you ever been diagnosed with any of the following conditions?

<input type="checkbox"/> Alcohol Use Disorder	<input type="checkbox"/> Fibromyalgia
<input type="checkbox"/> Allergies	<input type="checkbox"/> Gastrointestinal Bleeding
<input type="checkbox"/> Anxiety	<input type="checkbox"/> Glaucoma
<input type="checkbox"/> Arthritis	<input type="checkbox"/> Gout
<input type="checkbox"/> Asthma	<input type="checkbox"/> Headaches
<input type="checkbox"/> Atrial Fibrillation	<input type="checkbox"/> Hearing Loss
<input type="checkbox"/> Attention Deficit Disorder	<input type="checkbox"/> Heart Disease
<input type="checkbox"/> Back Pain	<input type="checkbox"/> Heartburn, Reflux
<input type="checkbox"/> Bipolar Disorder	<input type="checkbox"/> High Blood Pressure/Hypertension
<input type="checkbox"/> Blood Clots	<input type="checkbox"/> High Cholesterol
<input type="checkbox"/> Breast Disease	<input type="checkbox"/> Immune Deficiency
<input type="checkbox"/> Cancer	<input type="checkbox"/> Irritable Bowel Syndrome
<input type="checkbox"/> Chronic Fatigue Syndrome	<input type="checkbox"/> Kidney Stones
<input type="checkbox"/> Chronic Kidney Disease	<input type="checkbox"/> Macular Degeneration
<input type="checkbox"/> Chronic Liver Disease	<input type="checkbox"/> Migraine
<input type="checkbox"/> Chronic Wounds	<input type="checkbox"/> Osteoporosis
<input type="checkbox"/> Cirrhosis	<input type="checkbox"/> Overactive Bladder
<input type="checkbox"/> Congestive Heart Failure	<input type="checkbox"/> Overweight/Obesity
<input type="checkbox"/> Constipation	<input type="checkbox"/> Pneumonia
<input type="checkbox"/> COPD (Emphysema, Bronchitis)	<input type="checkbox"/> Prostate Disease
<input type="checkbox"/> Crohn's Disease	<input type="checkbox"/> Pulmonary Emboli (lung clots)
<input type="checkbox"/> Depression	<input type="checkbox"/> Seizures
<input type="checkbox"/> Diabetes (Type 1)	<input type="checkbox"/> Stomach Ulcers
<input type="checkbox"/> Diabetes (Type 2)	<input type="checkbox"/> Stroke
<input type="checkbox"/> DVT (leg clots)	<input type="checkbox"/> Thyroid Disease (Low or High)
<input type="checkbox"/> Eating Disorder	<input type="checkbox"/> Ulcerative Colitis
<input type="checkbox"/> Eczema	<input type="checkbox"/> Urinary Incontinence
<input type="checkbox"/> Epilepsy	<input type="checkbox"/> Urinary Tract Infections
<input type="checkbox"/> Erectile Dysfunction	

ALLERGIES Are you allergic to any medication?

Yes No

MEDICATIONS Are you currently taking any medications?

Medication Name

SHARE A FILE Would you like to share a photo, lab result, or other information with your provider?

+ Attach a file

Share my health summary, previous visits, and medication history

9. Input the pharmacy you would like a prescription sent to, if applicable. Please note the Roehl medical plan does not cover Mail Order prescriptions.

The screenshot shows a web application interface for selecting a pharmacy. At the top, a progress bar indicates the current step is 'Pharmacy', with previous steps 'Get Started' and 'Your Visit' completed, and 'Payment' and 'Your Provider' yet to be reached. The main heading is 'Pharmacy' with a flag icon. Below this, the instruction 'Choose a Pharmacy:' is followed by two options:

- In-Store Pickup**: Represented by a pharmacy icon. Text: 'Pick up your prescription at your local retail pharmacy like CVS, Rite Aid, Walgreens, and more.' A blue 'Select' button with a right arrow is at the bottom.
- Mail Order**: Represented by an envelope icon. Text: 'Manage your ongoing care with ease by having your prescription delivered right to your door.' A blue 'Select' button with a right arrow is at the bottom.

At the bottom of the screen are two blue buttons: 'Back' and 'Skip'.

10. Ensure your insurance information is accurate and select "Continue."

The screenshot shows a web application interface for entering insurance information. The progress bar at the top shows 'Payment' as the current step, with 'Get Started', 'Your Visit', and 'Pharmacy' completed, and 'Your Provider' yet to be reached. The main heading is 'Insurance' with a shield icon. The first option is selected:

- I have insurance**
Insurance may cover all or part of your visits. If your plan isn't listed, you can still have a visit.
A dropdown menu shows 'Anthem Blue Cross and Blue Shield'.
A text input field contains 'RTDAN6094676'.
Text: 'Are you the Primary Subscriber?'
Radio buttons: Yes, No.

Other options are:

- I don't have insurance
- My plan isn't listed/Skip this step

A large blue 'Continue' button is centered at the bottom of the screen.

11. Follow the steps to Set Up Your Video and Audio.

- a. If you are unable to connect, you have the option to “Switch to Phone Visit” at the bottom of the page under the “Continue” button.

Set Up Your Video and Audio

Please **ALLOW ACCESS** to your camera and microphone (you may need to update your browser settings to allow access). Then, select your preferences for camera and microphone.

[Test Your Connection Speed](#)

Select A Camera

Camera Permission Not Granted
Please update your browser settings to allow camera access.

Retry

If you do not see yourself make sure your camera is on and not in use by another application.

Select A Microphone

Test your audio input by speaking into your microphone. If you do not see the sound bars move, confirm the microphone is not muted.

Microphone Permission Not Granted
Please update your browser settings to allow microphone access.

Retry

Continue

[Cancel Visit](#) | [Switch to Phone Visit](#)

12. Your visit will begin shortly.

Please note: LiveHealth Online offers 24/7 support by calling 1-888-548-3432.