

'Start-Up Visit' Guide to Wellocity Sign Up

OVERVIEW

Participating patients come to the health center for their 'Start-Up Visit' where the following steps are completed:

- 1**
Sign the Patient Agreement
- 2**
Sign Up for *Healthy Together* in Wellocity
- 3**
Complete Wellocity Training
- 4**
Receive & Learn How to Use Patient Care Kit Tools
- 5**
Complete Baseline Measurements (Including A1c, Height, & Weight)

Use the Patient Checklist as a guide to make sure all Start-Up Visit steps are completed.

CONTENTS

This 'Start-Up Visit' Guide to Wellocity Sign Up walks through the following steps on the pages listed below:

- Pg. 2** Join the *Healthy Together* program
- Pg. 3** Complete the Participant Demographic Information Form
- Pg. 4** Complete the Program Start-Up Screening Questions
- Pg. 5** Log in to the Wellocity online portal
- Pg. 6** Download the Wellocity App

Patients should complete these steps with the assistance of the Lifestyle Coach as part of the *Healthy Together* 'Start Up Visit'.

STEP ONE

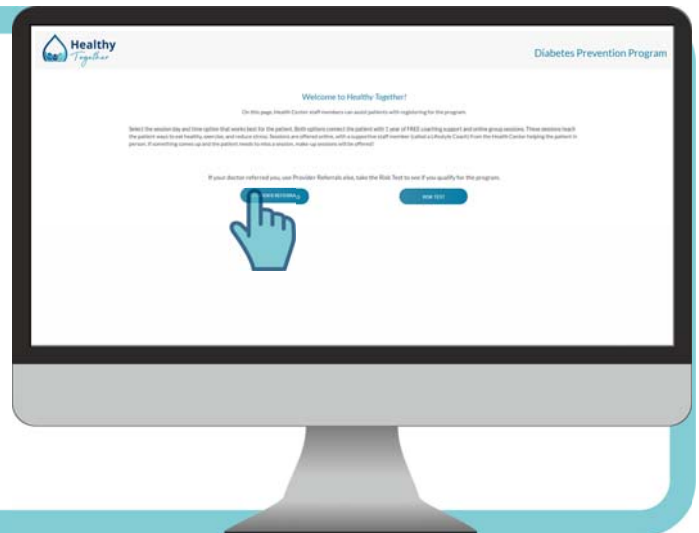
Visit the [Healthy Together portal](#).

[Scroll through the list to find and select your health center's name, and the session day/time you will join.](#)



STEP TWO

Click on 'Provider Referrals'

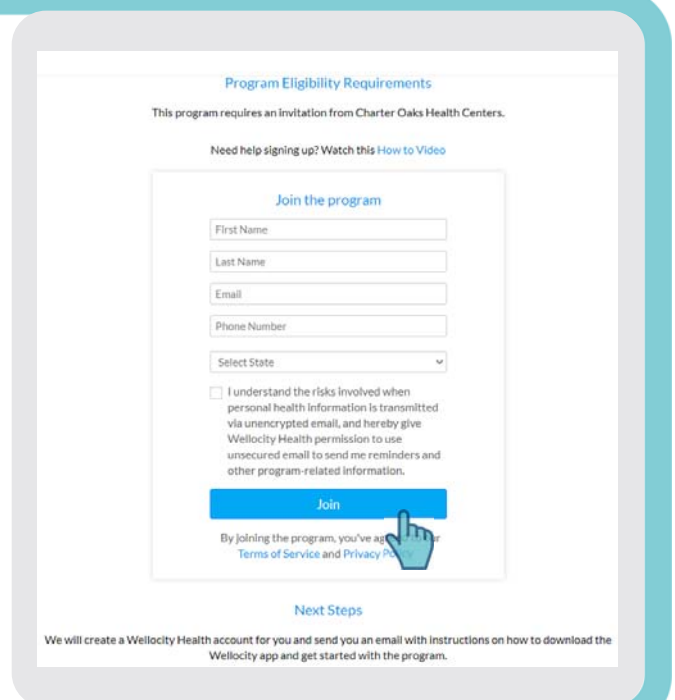


STEP THREE

Fill in your name, email address, phone number and select your state.

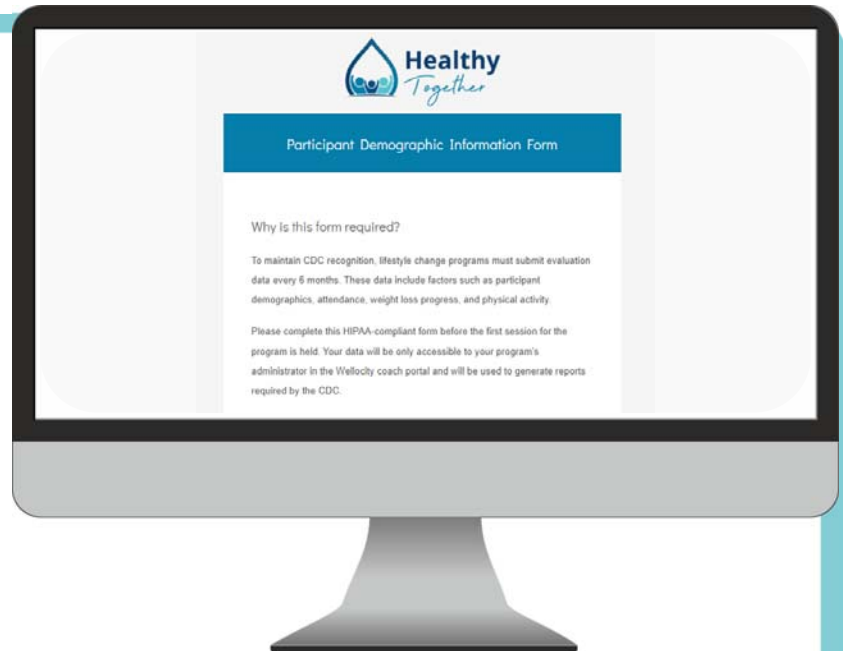
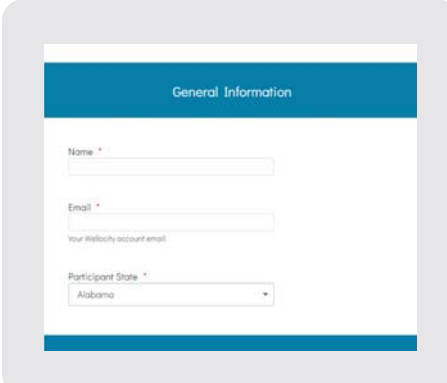
Check the box to give Wellocity permission to email you.

Click "Join".



STEP FOUR

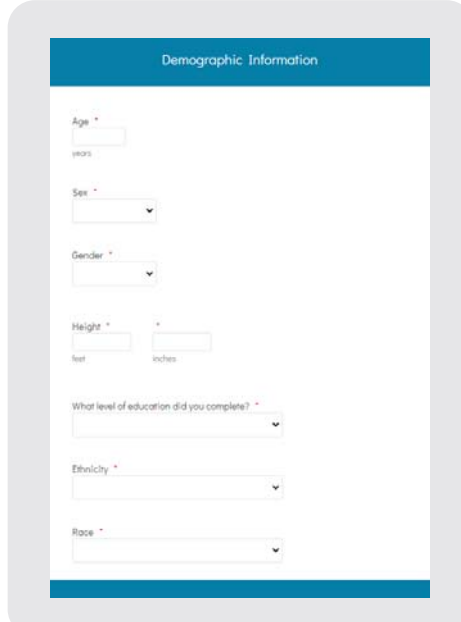
Fill in Participant Demographic Information Form.



 This section is titled 'General Information' and contains the following fields:

- Name *
- Email *
- Your Wellocly account email.
- Participant State * (Alabama is selected)

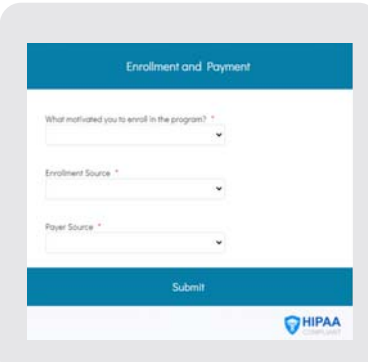
a) Fill in your name, email, and select your state.

b) Fill in your age, sex, gender, height, level of education, ethnicity, and race.


 This section is titled 'Demographic Information' and contains the following fields:

- Age * (years)
- Sex *
- Gender *
- Height * (feet and inches)
- What level of education did you complete? *
- Ethnicity *
- Race *

c) Select your motivation for joining the program, Enrollment Source, and Payer Source.


 This section is titled 'Enrollment and Payment' and contains the following fields:

- What motivated you to enroll in the program? *
- Enrollment Source *
- Payer Source *
- Submit button
- HIPAA logo at the bottom right.

STEP FIVE

Complete the 'Program Start-Up Screening Questions'.

a) Answer the questions about your recent mood, your gender, and drug use.

Program Start Up Screening Questions

Email *

Your Wellcity account email.

During the past two weeks, have you been bothered by little interest or pleasure in doing things?

No
 Yes

During the past two weeks, have you been bothered by feeling down, depressed, or hopeless?

No
 Yes

What is your gender?

Male
 Female

How many times in the past year have you used a recreational drug or used a prescription medication for non-medical reasons?

None
 1 or more

b) Answer the questions about your education, work, income, and transportation.

What is the highest level of school that you have finished?

Less than high school degree
 High school diploma or GED
 More than high school
 I choose not to answer this question

What is your current work situation?

Unemployed
 Part-time or temporary work
 Full-time work
 I choose not to answer this question
 Otherwise unemployed but not seeking work (ex: student, retired, disabled, unpaid primary care giver) Please describe:

In the past year, have you or any family members you live with been unable to get any of the following when it was really needed? Check all that apply.

Food
 Clothing
 Utilities
 Child Care
 Medicine or Any Health Care (Medical, Dental, Mental Health, Vision)
 Phone
 I choose not to answer this question
 Other (please describe):

Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living? Check all that apply. *

Yes, it has kept me from medical appointments
 Yes, it has kept me from non-medical meetings, appointments, work, or from getting things that I need
 No
 I choose not to answer this question

c) Answer the questions about your social life, stress level, and safety.

How often do you see or talk to people that you care about and feel close to? (For example: talking to friends on the phone, visiting friends or family, going to church or club meetings)

Less than once a week
 1 or 2 times a week
 3 to 5 times a week
 5 or more times a week
 I choose not to answer this question

Stress is when someone feels tense, nervous, anxious, or can't sleep at night because their mind is troubled. How stressed are you?

Not at all
 A little bit
 Somewhat
 Quite a bit
 Very much
 I choose not to answer this question

Do you feel physically and emotionally safe where you currently live?

Yes
 No
 Unsure
 I choose not to answer this question

In the past year, have you been afraid of your partner or ex-partner?

Yes
 No
 Unsure
 I have not had a partner in the past year
 I choose not to answer this question

d) Rank your feelings about your overall health, ability to manage your blood sugar, and your opinion of the health center.

In general, how would you rate your overall health?

1 2 3 4 5
 Poor Excellent

Do you feel confident in your day-to-day ability to manage your blood sugar?

1 2 3 4 5
 Never Always

How likely are you to recommend [health center name] to your family and friends?

1 2 3 4 5
 Never Always

Submit

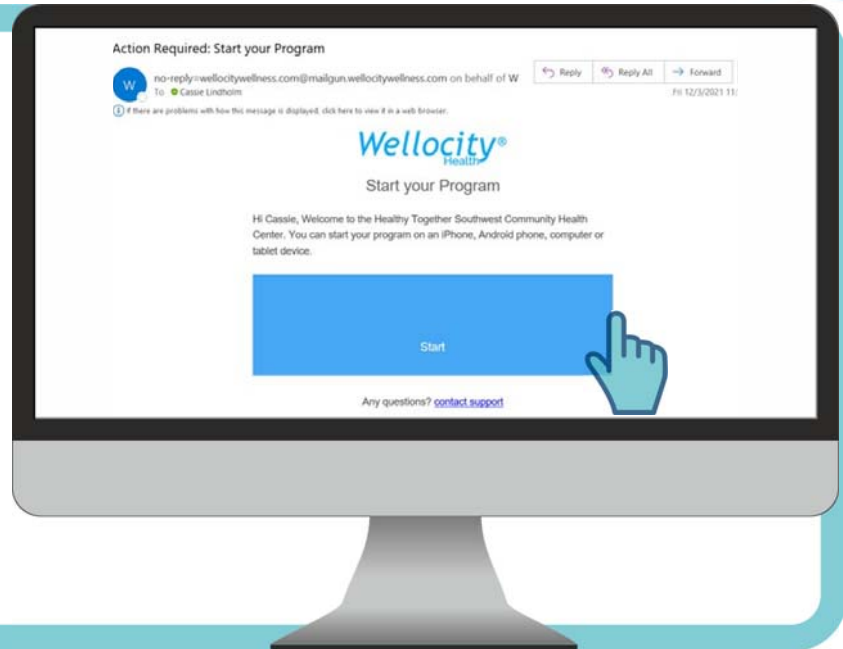
HIPAA COMPLIANT

CLICK
'SUBMIT'



STEP SIX

Log into your email account, open the email from Wellocity, and click 'Start'.



STEP SEVEN

Create a password for Wellocity.

A great password should have:

- At least eight characters
- Letters, uppercase and lowercase
- Numbers
- At least one special character

Save your password.

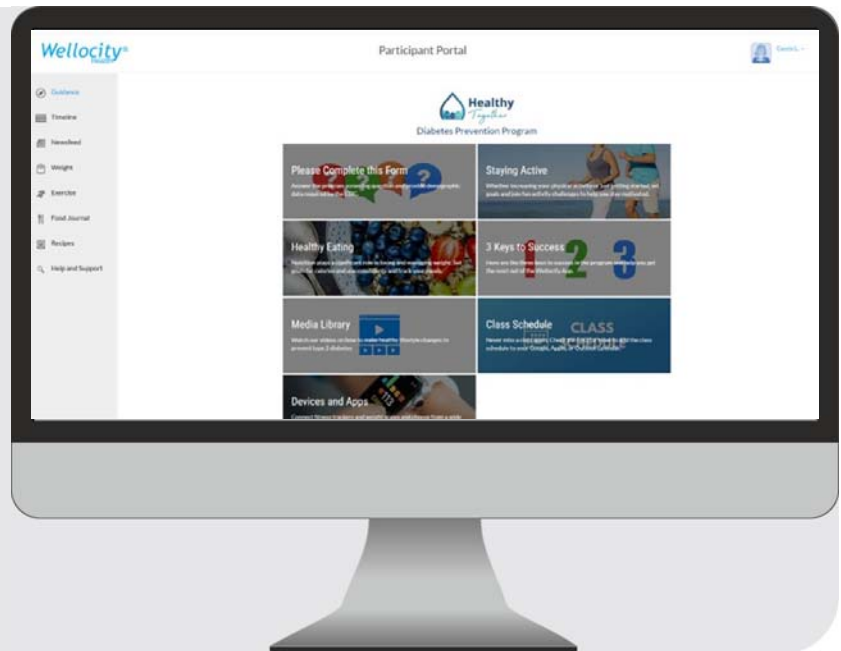
STEP EIGHT

Log into the Wellocity Portal using your email address and the password you created in **Step Seven**.



SUCCESS!

You have created an account and logged into the online portal!



STEP NINE

Go to the App Store and search for “Wellocity Health” or follow the link sent to you via text message.

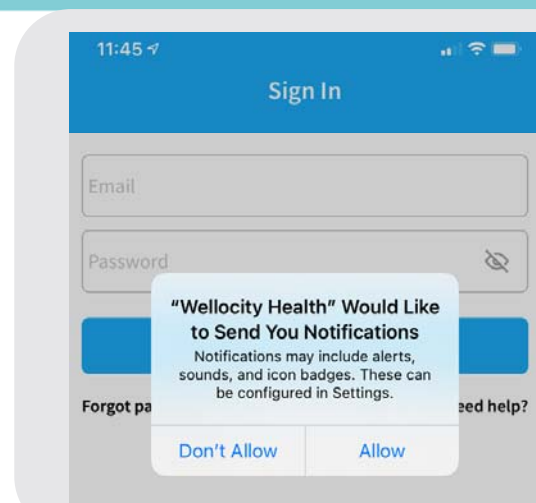
Download the App.

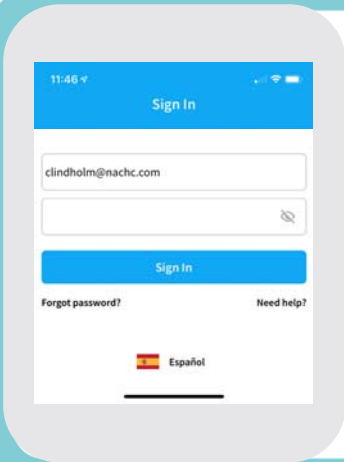
Wellocity: Download our app at <https://members.wellocitywellness.com/myapp.php>
Msg & data rates may apply

STEP TEN

Open the Wellocity app. Click 'Allow' to allow the app to send notifications.

Notifications will include important reminders for logging your data and attending sessions.





STEP ELEVEN

Log into the app.

Your username is your email address and the password is the one you created in **Step Seven**.

SUCCESS!

You have successfully downloaded and signed into the Wellocity mobile app!

Tip: Bookmark the portal for quicker access in the future!



If you have any questions about navigating and using the Wellocity app, please contact your PCA/HCCN Hub.