amwell - a faster, easier way to see a doctor

Sign up with AmWell to connect with a certified provider anytime, anywhere. To do so, please follow the steps below. **Note:** you may also download the AmWell mobile app (similar information as indicate below will be asked, but may be in slightly different order).

1. Visit <u>www.amwell.com</u> and click on the Continue button.



2. Click on Get Started to create an account.



3. Enter your name and e-mail address, create a password, check the "I agree" box then click Sign Up.

	🔗 amwell	
	First Name Last Name	
See a Provider Now!	Email Confirm Email	
well makes it easy for you to talk to doctors, nediately, from your home. Simply log on or call 44-SEE-DOCS (1-844-733-3627) to connect with	Password I agree to these Terms of Use. Sign Lip	
ra-certinea aoctors in your area. m More >	Already have an account? Log In	

4. Answer a few more questions to create your profile (not needed for dependent minors) then click Continue.

\sim	a	mw	ell		
We need a few	more de	etails to cre	ate your pr	ofile.	
Current Lo	cation			V	
Date of Birth:					
Month	۳	Day	Year		
⊖ Male ⊖	Female				
	Co	ntinue			

- 5. Under health insurance, in the drop down menu select **ASR Health Benefits**. *Do not select Andrews University SHIP (AU's student health insurance plan)*. The subscriber ID will be the ID# from your ASR ID Card. If you are not the primary subscriber (insured), then you will need to provide some information about the primary insured. The service key will be as follows:
 - HDHP (High Deductible Health Plan)= asrmemberpay
 - Premier and Standard plan= asrcopaywaived

Click Finish when done.

Vanweu	
Do you have health insurance?	
⊛ Yes	
Insurance may cover all or part of your visits. If	
your plantactures you an suit have a visit.	
ASR Health Benefits	
Subscriber ID	
Are you the Primary Subscriber?	
O Yes O No	
ONo	
○ Skip this step / My plan isn't listed	
Service Key	
If you received a key from your employer or	
another group, enter it here. More info	
Service Key (optional)	
Finish	

6. Click on the Get Started button.



7. Complete the patient questionnaire before your visit.

Please note:

- You will be required to enter your credit card information even if you have no copay responsibility. This information is entered when a visit is initiated.
- HDHP members will be charged the \$59 visit fee (unless the visit results in an order for COVID-19 testing, then it will be covered at 100%).

🔗 amwell	1 Location Michigan Account Leg Out
Get Started Your Visit	Pharmacy Payment Your Provider
여 Your Visit	
What would you like to discus	ss today?
Cold	Nutrition
Diet and Nutrition	Sleep issues
Earache	Stomachache
Headache	Other
Your Answer Have you had any exposure to Your Answer	o a known or expected Covid-19 patient in the last 14 days?
Do you have any immune syst	tem compromise or chronic lung disease?
Your Answer	
Do you have any vulnerable fa elderly)?	amily members in the home (infant, pregnant, cancer,
Your Answer	
	Back Continue
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