



**Weill Cornell Medicine**



## **eCheck-In**

**A Fast and Convenient Way  
to Reduce Your Visit Wait Time**

**[weillcornell.org](http://weillcornell.org)**

**Weill Cornell Connect**

# Welcome to Weill Cornell Connect eCheck-in!

**Expedite  
your check-  
in process  
by logging  
into WCC to  
follow these  
simple steps**

1. You will receive an e-mail tickler the day before your scheduled appointment to complete eCheck-In:

*Subject:*

*New Weill Cornell Connect  
eCheck-In Reminder*

*Dear [Patient Name],*

*It's time to check in for your appointment.  
Please [click here](#) to save time at your  
appointment by using our eCheck-  
in feature to verify and update your  
information.*

*eCheck-in is also available through the  
Weill Cornell Connect mobile app.*

*Provider: [Provider Name]*

*Date/Time: [Appointment Date and Time]*

*Sincerely,*

*WCC System Administration*

*(Please do not reply to this message. We are unable to  
respond to account inquiries sent in reply to this e-mail.*

*To contact us, please send a Technical Support message  
while logged into Weill Cornell Connect or contact your  
Weill Cornell provider of care.)*



2. Click on the link to **Weill Cornell Connect** from the e-mail tickler to log in:

A screenshot of the Weill Cornell Connect website. The header features the logo "Weill Cornell Connect" in red and orange. Below the logo are four service icons: a person at a computer for "Communicate with your doctor", a line graph for "Access your test results", a pill for "Request prescription refills", and a calendar for "Manage your appointments". On the right side, there is a login section with the text "Thanks for using Weill Cornell Connect. You have been logged out." Below this is a form with fields for "Weill Cornell Connect Username" (containing "testc") and "Password" (represented by dots). There are "SIGN IN" and "SIGN UP NOW" buttons, along with links for "Forgot Username?", "Forgot Password?", and "New User?".

After logging in, you will be brought directly to the eCheck-In screen. You will also see the steps you need to complete. Click on the 'ECHECK-IN' button to start the process.

**Note: You may see different requirements for each individual appointment, since you will not be asked to update/verify certain items that have already been verified within a certain time period.**

Follow Up Visit with Neepa Shah, MD

Friday March 09, 2018 8:00 AM EST  
[Add to Calendar](#)

Well Cornell Eye Associates  
1305 York Avenue, 11th Floor  
New York NY 10021-5663  
646-962-2020  
[Get Directions](#)

Please be sure to bring your eye glasses, contact lens box or vial indicating your prescription, your insurance card and referral (if required) to the visit. If you need an interpreter, please arrange for someone to accompany you to this appointment.

You have begun your online check in.  
You can save time at the clinic by completing the following tasks in eCheck in:

- Verify Demographics
- Verify Insurance
- Verify Medications
- Verify Allergies
- Verify Health Issues
- Make Payments
- Sign Documents

**ECHECK-IN**

If you need to cancel an appointment, please help us to serve you and our other patients by giving us as much advance notice as possible.

**CANCEL**

**BACK TO VISITS LIST PAGE**

3. You can update your demographics information. You can click on the 'Edit Information' button if there are edits to be made. If no edits need to be made, you can click on the 'This information is correct' checkbox to proceed to the next step. You will need to click on 'Continue' to move to the next screen.

**eCheck-In**

Demographics Insurance Medications Allergies Current Health Issues Payments Documents

Street Address: 1001 Washington Ave  
City: New York  
State: New York  
ZIP Code: 10022  
County: NEW YORK  
Country: United States of America

Home Phone: 718-962-2999  
Mobile Phone:  
Work Phone:  
Preferred Phone:  
E-mail Address: eis2004@med.cornell.edu

This information is correct

4. You can review the list of your active insurance coverages. If everything looks correct, you should click on the *'This information is correct'* checkbox and click *'Continue'* to go to the next step. You also have the ability to *'Add an Insurance'*.

**eCheck-in**

Demographics Insurance Medications Allergies Current Health Issues Payments Documents

Please review the insurance information that we have on file. If the information is incorrect, hover over the insurance and click on the EDIT or REMOVE button to request updates. Click on the ADD AN INSURANCE link to add additional coverage(s). Note that adding an insurance here does not guarantee that the provider accepts the insurance. Contact the practice if you are unsure whether your insurance will be accepted. When the section is updated, select the 'This information is correct' checkbox and click the CONTINUE button.

**Active Insurance Coverages**

<b>Aetna Health Plans</b> Aetna Choice Pos II Subscriber Name Testc,Btest	<b>UHC - United Health Care</b> Golden Rule Insurance Company Subscriber Name Testc,Btest	<a href="#">+ ADD AN INSURANCE</a>
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This information is correct

[BACK](#) [CONTINUE](#) [EXIT ECHECK-IN](#)

5. On the Medications step, you can Add/Remove Medications and Pharmacies.

**Note for steps 5–7: Any clinical updates made during the eCheck-In workflow will need to be reviewed by a provider, before being accepted into your chart.**

**Both insurance & clinical info must be reviewed by the practice before being accepted in the chart.**

Once all information is added, you can click on the 'This information is correct' checkbox and click the 'Continue' button.

**eCheck-In**

Demographics Insurance **Medications** Allergies Current Health Issues Payments Documents

Please review this section for updates, then select the "This information is correct" checkbox and click the CONTINUE button. Below are your current medications and pharmacies. Click on the ADD A PHARMACY link below the medications to add additional pharmacies. Multiple pharmacies are allowed. To remove a pharmacy from your record, click on the star next to the pharmacy name so it is no longer highlighted in yellow.

If you are not currently taking a medication or have changed dosage, hover over the medication and click on the REMOVE button to request updates. Click on the ADD A MEDICATION link to add new medications or medications with the correct dosage. The Learn more links will take you to additional information about that medication. **Call 911 if you have an emergency.**

**Atenolol 100 MG Tabs**  
Commonly known as: TENORMIN  
Take 1 tab by mouth daily.  
[Learn more](#)

**+ ADD A MEDICATION**

**List of all Your Preferred Pharmacies**

**DUANE READE** - 100 Broadway #14497 | 100 BROADWAY NEW YORK, NY 10005 | 212-227-5148  
100 BROADWAY  
NEW YORK NY 10005  
212-227-5148

**+ ADD A PHARMACY**

This information is correct

**BACK CONTINUE EXIT ECHECK IN**



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**6.** On the Allergies step, you can Add/Remove Allergies.

Once all information is added, you can click on the 'This information is correct' checkbox and click the 'Continue' button.

**eCheck-In**

Demographics Insurance Medications **Allergies** Current Health Issues Payments Documents

Please review this section for updates, then select the "This information is correct" checkbox and click the CONTINUE button.

Below are your current allergies. If you no longer have an allergy, hover over the allergy and click on the REMOVE button to request updates. Click on the ADD AN ALLERGY link to add additional allergies. The Learn more links will take you to additional information about that allergy. **Call 911 if you have an emergency.**

**Penicillins**  
Added 1/7/2018  
[Learn more](#)

**+ ADD AN ALLERGY**

This information is correct

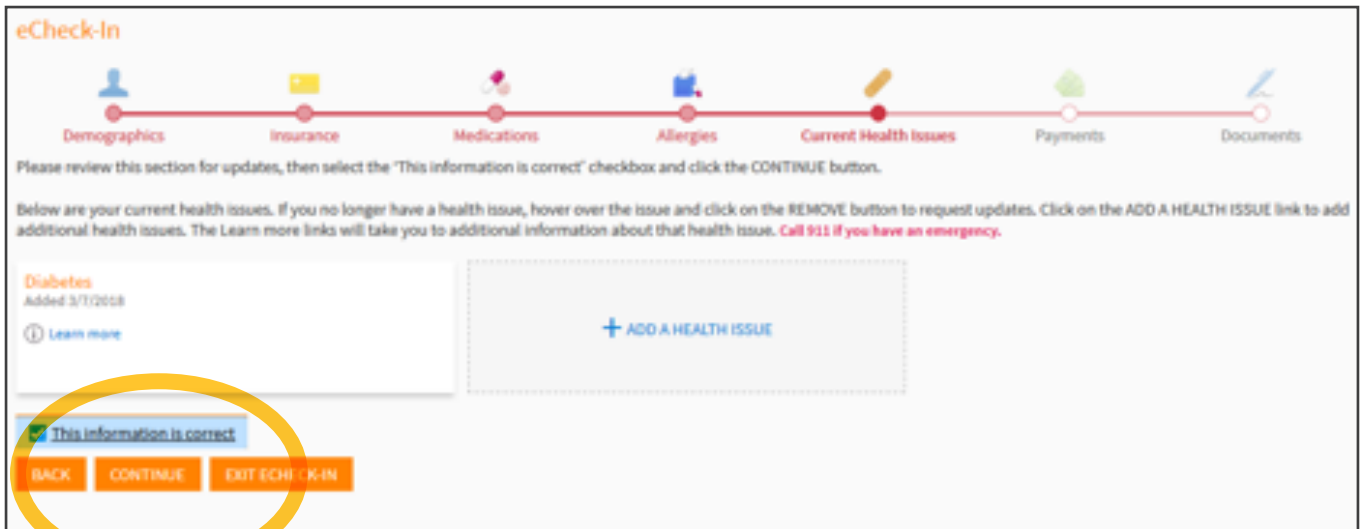
**BACK CONTINUE EXIT CHECK-IN**



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7. On the 'Current Health Issues' step, you can Add/Remove Health Issues.

Once all information is added, you can click on the 'This information is correct' checkbox and click the 'Continue' button.



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8. On the Payments screen, you can choose to pay any outstanding balances from previous visits. You can also choose to pay a portion of your outstanding balance.

**Note: You can still complete eCheck-in by deciding to skip the Payments screen.**

The screenshot shows the 'eCheck-In' interface. At the top, a progress bar indicates the current step is 'Payments', with other steps being 'Demographics', 'Insurance', 'Medications', 'Allergies', 'Current Health Issues', and 'Documents'. Below the progress bar, there is a paragraph of instructions: 'Please select the amounts you wish to pay below. If you choose to make a partial payment, the payment will apply to the balance associated to your oldest visit. If you wish to view and pay balances for a specific provider, you can go to the [Billing Accts Summary](#) page. This will take you out of the eCheck-in workflow - to return, click on your name on the upper left hand corner and click on the link that says "View instructions for your appointment on [date] with [provider]". If you wish to pay later, you can skip to the next step by clicking on the "Pay outstanding balances later" checkbox.

Below the instructions is the section 'Your Outstanding Physician Balances'. It displays 'Account #101317416' and two payment options: '\$776.00 (Amount due)' with an unchecked checkbox, and '\$101.00' with a checked checkbox. A 'Pay outstanding balances later' checkbox is also present. At the bottom, there are three buttons: 'BACK', 'PAY \$101.00', and 'EXIT CHECK-IN'. A yellow circle highlights the 'PAY \$101.00' button.

This is the screen where you will enter your credit card and billing information.

**1. Verify amount**

Total  
**\$101.00**

\$1.00 Copay  
\$100.00 Account #100237351

**2. Enter payment info**

Enter payment information

\* Indicates a required field

\* Name on card

\* Card number

\* Expiration date  
 /   
mm / yyyy

Save for future use

Billing information  
1000 Washington Ave  
New York NY 10022  
718-962-2999


**BACK** **CONTINUE**

You will be asked to verify the amount and credit card information before clicking on *'Process Payment'*.

**Note: Co-pay may also be required at time of visit**

Please verify that the information below is correct before processing your payment.

Payment amount  
**\$101.00**


 x0888  
exp. 04/2019  
Trust Commerce

**BACK** **PROCESS PAYMENT** **CANCEL PAYMENT**

You will receive a confirmation that you have paid successfully and will be able to print a receipt. Click on '*Continue ECHECK-IN*' to go to the next step.

**Payment Processed**  
✓ Your payment has been processed successfully! Please print this page as a receipt for your records.

Payment amount	Date
<b>\$101.00</b>	1/12/2018
\$1.00 Copay	Authorization code
\$100.00 Account #100237351	123456

 x0888  
exp. 04/2019  
Trust Commerce

[PRINT RECEIPT](#) [CONTINUE ECHECK-IN](#)

**9.** You will be presented with documents to e-sign, if they have not been collected at one of your previous visits. You can click on the '*Review and Sign*' buttons to open the form and enter your signature. If you wish to sign the documents at the time of visit, click on the '*Review Later*' buttons under the documents or you can click on the '*Finish Later*' button to exit and finish eCheck-In later.

## Note: You can still complete eCheck-In by reviewing documents later.

**eCheck-In**

Demographics Insurance Medications Allergies Current Health Issues Payments Documents

Please review the following documents. Click on the REVIEW AND SIGN button to sign the document. Scroll to the end of the form to ensure you have clicked on the signature box and then click CONTINUE. If you wish to sign these documents at the clinic, click on the REVIEW LATER button. There may be additional documents to sign at the clinic. Click SUBMIT to complete eCheck-In.

**AOB**  
Not Signed 

[REVIEW LATER](#) [REVIEW AND SIGN](#)

Once this step is completed, documents will be submitted for clinic review.

[BACK](#) [SUBMIT](#) [EXIT ECHECK-IN](#)



10. View the form when you click on 'Review and Sign'. You can click on the signature box and your electronic signature will appear.

**AOB**

## Weill Cornell Medicine

**Assignment of Benefits and Authorization to Release Medical Information**

I authorize and direct Weill Cornell Physicians, having treated me, to release to governmental agencies, insurance carriers or others who are financially liable for my medical care, all information needed to substantiate payment for such medical care and permit representatives thereof to examine and make copies of all records relating to such care and treatment. I hereby assign, transfer and set over to Weill Cornell Physicians sufficient monies and/or benefits to which I may be entitled from governmental agencies, insurance carriers or others who are financially liable for my medical care to cover the costs of the care and treatment rendered to myself or my dependents. I request that payment of authorized benefits be made on my behalf, and I understand I am responsible for charges not covered by policy or plan.

For Medicare patients: I certify that the information given by me in applying for payment under title XVIII of the Social Security Act is correct. I authorize any holder of medical or other information about me to release to the SS Administration and HCFA or its intermediaries or carriers any information needed for this or a related Medicare claim. I request that payment of authorized benefits be made on my behalf. I assign the benefits payable for physician services to the physician furnishing the services or authorize such physician to submit a claim to Medicare for payment to me.

**Adela Test**  
Signature generated for Adela Test

[CONTINUE](#) [REVIEW LATER](#) [CLEAR FORM](#) [CANCEL](#)

**Note: Once all steps are completed, you can click on Submit and you will get a confirmation that eCheck-In is complete.**

## eCheck-In Complete

Thanks for Using eCheck-in!

The information you've submitted is now on file. When you arrive for your appointment, let the front desk know you're here.

When you arrive, you may need to:

- Make Payments
- Scan Insurance Card
- Sign Documents

Follow Up Visit with Neepa Shah, MD  
🕒 Friday March 09, 2018 8:00 AM EST

**Weill Cornell Eye Associates**  
1305 York Avenue, 11th Floor  
New York NY 10021-5663  
646-962-3000  
[Get Directions](#)

[BACK TO APPOINTMENT DETAILS](#)



## Online Patient Access

Our secure patient portal, Weill Cornell Connect, gives you access to view the following within your medical records:

- **Medications**
  - **Test Results**
- 

Download the MyChart app in iTunes or the Google Play store to get started or create an account at [www.weillcornell.org](http://www.weillcornell.org).

## With Weill Cornell CONNECT you can:



Send messages to your physician's practice or directly to your MD



Request refills and referrals



Schedule an appointment



Pay your bills online



Read in-depth medical advice and information by searching any health topic of interest

